

Chapter 2. Embodied feelings: The sense of self-awareness of others

“There is hardly a person so constantly unhappy (before sex change) as the transsexual.”

(Benjamin 1966: 47)

“Yo soy una mujer con pene y feliz.”

(one of my interlocutors, 2015)¹

In this chapter, I focus on the self-awareness and experiences of my informants on bodily matters. However, because self-awareness and body image are not formed by the individual alone, but are also shaped through the awareness of others, i.e. experienced through confrontation with the social environment, I will also refer to family, peers and further players. First, I concentrate on the memories of my informants of how a gender ambiguity came to consciousness and manifested itself. Second, because of its central role in sex ascription, I look at the meaning of the genitals in relation to sex/gender awareness. When it comes to questions of sex/gender identity by my informants, these body parts cannot be neglected. It is then, at the latest, when questions about the necessity (or no necessity), possibilities and limits of genital reassignment surgery emerge. Third, the explanatory models of my informants about the sources of their gender-nonconforming will be addressed because they reveal information about their body concepts as well.

By focussing on bodily matters based on the above-mentioned topics, I switch between gender behaviour, concrete body parts, bodily functions and sensations/emotions. My reluctance to analyse this topic in a more selective way reflects the interplay between the individual's body and their social surrounding. Douglas (1973) speaks of two bodies; the social body and the physical body, which are in a continual exchange:

There is a continual exchange of meanings between the two kinds of bodily experience so that each reinforces the categories of the other. As a result of this in-

1 “I am a woman with penis and happy.”

teraction the body itself is a highly restricted medium of expression. The forms it adopts in movement and repose express social pressures in manifold ways. (Douglas 1973: 93)

Thus, the human body, seen as a system, expresses meanings in reacting upon the social system. “The two bodies are the self and society: sometimes they are so near as to be almost merged; sometimes they are far apart. The tension between them allows the elaboration of meanings” (Douglas 1973: 112). Villa refers to the embodiment of social norms: “[...] Entscheidungen über den eigenen Körper [sind] als Entscheidungen über das Selbst hochgradig normativ, sie sind getränkt von Sozialität” (Villa 2008a: 8).² Besides social interaction, Le Breton also mentions the impact of history and culture upon the body, and emphasises the symbolic meaning of physiology: “La physiologie de l’homme ne fonctionne jamais dans une sorte de pureté, de virginité biologique qui la tiendrait hors de l’histoire, hors de l’inconscient, hors du social. Elle est traversée de symbolismes sociaux et culturels” (Le Breton 1995 : 111).³ This approach to writing about the body is congruent with newer insights from within the field of ‘the anthropology of the body’, “[...] that bodies cannot be divorced from their lived experiences, requiring a focus on embodiment: a way of inhabiting the world as well as the source of personhood, self, and subjectivity, and the precondition of intersubjectivity” (Mascia-Lees 2011: 2).

Referring to his state of bodily transformation from female to male, Ronaldo hints in an exemplary way at this interaction of individual body awareness and social and cultural expectations (and by the way, it also gives insights into concepts of the border of the body):

“Ya no ... ya no puedo cambiar más ... de lo que estoy ... de lo que estoy cambiando. Ya no tengo menstruación, no tengo ... tengo barba, me afeito, tengo la voz masculinizada, tengo ... la sangre la tengo totalmente androgenizado ... sea ya tengo todos los andrógenos en el cuerpo.” (Ronaldo, 2003)⁴

Growing a beard and having a lower voice are culturally normed as male markers and are visible/audible from the outside. Displaying these markers helps Ronaldo to

2 “[...] decisions about one’s own body [are], as decisions about one’s self, highly normative, they are imbued with sociality [own transl.]” (Villa 2008a: 8).

3 “Human physiology never works in a kind of purity, of biological virginity that would keep it out of history, out of the unconscious, out of the social. It is crossed by social and cultural symbolisms [own transl.]” (Le Breton 1995: 111).

4 “I can no more ... I cannot further change ... that what I am... what I am changing. I have no more menstruation, I have no more ... I have a beard, I shave, my voice is masculinised, I have ... the blood is totally androgenised, that is, I already have all the androgens in my body.” (Ronaldo, 2003)

pass successfully as a man. The confirmation of his social environment strengthens his self-awareness of his felt sex/gender, which in turn, is additionally strengthened by the fact that not only has his menstruation cycle stopped (in western concepts definitely a female attribute), but he also has to shave his facial hair (perceived as a male act). In mentioning his androgenised blood, he transgresses the visual border of the body and holds to an endocrinological understanding of masculinity that cannot be seen by the naked eye. In sum, his statement about his body status reflects a wide spectrum of culturally learned concepts, which include knowledge about the existence and functions of hormones, and knowledge about socially accepted sex/gender attributes. It demonstrates the entanglement between individual, social and cultural factors when looking at something which is, at first glance, as natural as the body. It reflects his dealing with ‘nature’ to meet the requirements of the ‘webs of significance’ (Geertz 1993: 5) of his culture.

To understand how this entanglement unfolds within the body concepts of my informants, I start by looking back at their childhood memories.

2.1 Memories of sex and gender

Tracing back the incongruence between the sexed body and the felt gender to early childhood is a prominent narrative in the life stories of trans people. The discourse of a stable identity that reaches back to childhood supports the arguments for the necessity of gender affirmation procedures especially when medical attendance concerning gender non-conformity is sought. The discourse is that of always having been locked up in the wrong body (cf. Tena 2010). Not all, but the majority of my interlocutors reflected this discourse. Bittor stated: “Porque yo lo tenía claro desde que yo tengo razón, y tengo memoria.” (Bittor, 2015)⁵ And Luisa: “Yo cuando yo nací, cuando yo empecé a tener uso de razón con tres años yo tenía un comportamiento de una niña normal corriente.” (Luisa, 2003)⁶

Bittor and Luisa both aimed for the complete gender affirmation procedures. Their formulation “*desde que yo tengo razón*” (“since I have use of reason”) or “*cuando yo empecé a tener uso de razón*” (“when I started to have use of reason”) seems to reflect the guidelines that the Spanish Society of Endocrinology and Nutrition (*Sociedad Española de Endocrinología y Nutrición*) elaborated in a clinical guide from the year 2002 for the diagnosis and treatment of people with a gender dysphoria. The appendix to this guide contains a declaration of consent, which the trans person who is looking for hormonal treatment has to confirm. Point 2 reads as follows:

5 “I was clear about it ever since I have use of reason, and a memory.” (Bittor, 2015)

6 “When I was born, when I started to have use of reason at three years old, I behaved like an ordinary normal girl.” (Luisa, 2003)

DECLARO: 2. Que desde que tengo use de razón [italics, CI], y a pesar de mi apariencia externa y caracteres sexuales y genitales de, yo siempre me he considerado un / a (Grupo de Trabajo sobre Trastornos de Identidad de Género 2002: 28)

(I declare: 2. That since I've been using reason, and despite my outward appearance and sexual and genital characteristics as a, I've always considered myself a,)

These memories of early childhood are often reconstructed in quite a stereotypical manner, such as referring to clothes and toys that are ascribed to a certain sex. Ronaldo, for example, who is also very explicit in emphasising a stable identity in the wrong body, states: “[...] yo he nacido hombre. Con un cuerpo equivocado, pero nací hombre.” (Ronaldo, 2003)⁷

He dates the consciousness of being a boy and not a girl to the age of four, when he remembers his parents buying him a girl's dress. He rejected the dress and wanted trousers.

Carmina's account corresponds strongly to the narration of a stable gender identity as well. Born in a male body, she remembers always having seen herself as a girl. She exemplifies this by means of her hairstyle, which had the effect that people perceived 'him' as a girl. Anecdotally, she tells how, as a little child, accompanying 'his' father, outsiders reacted to the child's feminine appearance (which she ascribes primarily to her hairstyle) by asking if she was his daughter: “Con el pelo rizadito, rubia, muy blanca, y todo el mundo le decía que si era su hija.” (Carmina, 2015)⁸

Carmina felt pleased by this reaction, but her father got so annoyed that he stopped taking his little son out.

Tamara also identified herself as a girl from childhood. Although a boy, she stresses that she also had the physical appearance of a girl, which outsiders confirmed through their reaction by exclaiming what a pretty girl she was. Her parents always corrected the misunderstanding, and in contrast to Carmina, she was ashamed, knowing she was supposed to be a boy:

“[...] siempre me identificaba con las niñas, sabes? Incluso físicamente parecía una niña desde pequeña también. A mi llame ... cuando era chico ... me daba pudor [...] de ir a las tiendas o si mis padres encuentran a algún conocido siempre le decía 'ay que chica más guapa' y a mí me daba pudor porque era chico, y mi padre 'no' corrigiendo 'no, no es una chica es un chico'” ... (Tamara, 2003)⁹

7 “I was born a man. With the wrong body, but I was born a man.” (Ronaldo, 2003)

8 “With curly, blond hair, very white, and everybody asked him if I was his daughter.” (Carmina, 2015)

9 “I always identified myself with the girls, you know? Even physically, I seemed to be a girl too, since a small age. They addressed me ... when I was small ... I was ashamed ... to go to

Others emphasise the internal process that led from a diffuse feeling of a kind of otherness to the recognition of being the other sex. For example, Diego, who, although he states he has few memories from his early childhood, remembers with certainty that something was wrong, but there was nobody around to explain it:

“[...] en realidad mh que yo sup- o sea yo sabía que algo ni va bien. Pero tampoco sabía el que era porque era muy pequeño y no tenía nadie al lado que me hiciera entender que a lo que me estaba pasando.” (Diego, 2015)¹⁰

He relies on some anecdotes stemming from his mother to trace back his gender incongruence:

“Por ejemplo con cinco años yo decía yo me miraba en el espejo e hice: Yo soy muy fea. Yo no, yo no me gusta. Yo soy muy fea. O yo no soy feliz. Y mi madre, pues, se ponía triste ‘¿porque no eres feliz?’ Y yo ‘porque yo yo no soy feliz yo soy muy fea.’” (Diego, 2015)¹¹

Diego’s awareness of his body as a little girl (that is, his negative judgement) was linked to the fact that his mirror image did not represent the boy he felt he was. To cope with this feeling, he created his own history, his own world, where he changed family structures and the sex: “También eh muchas veces yo le decía a mi madre: Ustedes no sois mi familia. Y yo me creaba mi propia historia. Yo soy un niño.” (Diego, 2015)¹²

One could argue that this wish to create an imagined world where he fits in is an expression of an already felt discrepancy of (outer) norms versus (inner) feelings concerning his sex and gender. Or, using a description from Butler: “[...] there is the norm, and it is externally imposed, communicated through a set of expectations that others have; and then there is the world of feeling and being, and these realms are, for him, distinct. What he feels is not in any way produced by the norm, and the norm is other, elsewhere, not part of who he is, [...] what he feels.” (Butler 2004: 69). Diego had no words yet to articulate his sensation, which, using a concept

the shops or when my parents met somebody they knew they always said ‘oh, what a most beautiful girl’ and I was ashamed because I was a boy, and my father ‘no’, correcting them, ‘no, it is not a girl, it is a boy ...’” (Tamara, 2003)

10 “In reality, ehm, I knew something was not all right. But I didn’t know what it was, because I was very small and I had nobody at my side who could have helped me understand what was happening to me.” (Diego, 2015)

11 “For example, at the age of five, I said, I looked at myself in the mirror and said: I am very ugly. I don’t, I don’t like myself [physically]. I am very ugly. Or I am not happy. And my mother, then, was sad, ‘why aren’t you happy?’ And I, ‘I am not happy because I am very ugly.’” (Diego, 2015)

12 “And also, many times I said to my mother: You are not my family. And I created my own history. I am a boy.” (Diego, 2015)

of Plessner (1982), could be described as a *leibliche* sensation. A sensation which transcends the rationally comprehensible. In the words of Jäger (2014), who draws on a philosophical and therapeutic approach of Gendlin, this sensation could be described as a *Felt Sense*, a kind of part of the unconscious, which will probably soon come to the surface, which is first felt through the body, but has not yet found its way into the language.

Others did not reject their assigned sex. Anabel's memories of her childhood as a boy differ from the previous examples. The desire to live in the opposite sex was not something she reconstructs back to her childhood. Furthermore, she doubts this kind of narration: "Pero yo no creo ... no creo mucho en las transexuales de nacimiento." (Anabel, 2003)¹³

Rather she sees it as something developing, as progressive. Although she sometimes took up the discourse of a stable gender identity in our conversations and mentioned that she thinks that she has always felt this way, that she thinks that she has always been a woman, she explains in more detail, that as a child, she considered herself a boy like the other boys, although different: "Yo no me veía igual que los demás niños. A mí me parecía que yo algo tenía distinto. Pero sin embargo me reconocía como niño." (Anabel, 2003)¹⁴

She thought she could be homosexual. In grabbing first for the concept of homosexuality to explain the different feelings, Anabel represents the history of the evolution of the western definition of transsexuality/transgender. "Early manifestations of what later came to be seen as transgenderism were first seen as variations of homosexuality" (Ekins and King 2005: 382). Later, she became aware that she was also attracted to women, and thought she was bisexual. Only as she learned about the term transsexual, did she find an explanation for her evolving wish to live and to be socially accepted as a woman, and that it had nothing to do with her sexual orientation.

Ronaldo experienced the difficulties distinguishing sexual orientation and gender identity from part of his social environment. It was not helpful to be labelled a lesbian, because he did not feel attracted to women as a woman, which he was supposed to be.

"Lo que pasa que aquí se decía lesbiana. Que yo era lesbiana. Entonces eso a mí no me ayudó mucho. Hasta que yo conocí el problema de la transexualidad, que

13 "But I don't believe ... I don't believe so much in transsexuals of birth." (Anabel, 2003)

14 "I did not see myself the same as the other boys. It seemed to me that I had something different. But nevertheless, I recognised myself as a boy." (Anabel, 2003)

yo me ... digo yo no, yo no soy lesbiana. A mí me gustan las mujeres, pero yo no soy una mujer. Yo no soy lesbiana.” (Ronaldo, 2003)¹⁵

Just as troublesome were questions from people inquiring ‘what’ he was, almost implying that he was something outside the human species. In such a context, he put more emphasis on the fact that he is a person, rather than any gender category:

“¿Tú que eres?” (laughing), como si yo fuera, mh, mamífero, cuadrúpedo y palmípedo. ‘¿Que tú que eres?’ ‘¿Tú que cosa eres?’ Nh, ¿a ti [addressing CI] no te preguntan, verdad, a ti no te preguntan ¿tú que eres?, verdad? Tú eres un hombre normal corriente y no te preguntan nunca que eres ¿no? Porque a ella [su novia] tampoco le preguntan ¿que eres? A mí porque me preguntan ‘¿y tú que eres?’ ... Nh ... yo...verá, no sé cómo explicarlo. Hay hombres y mujeres y punto se ha acabado. Porque yo no hice así eh con el género. Y ya resulta que hay subdivisiones de ... eres transexual, eres lesbiana, eres gay eres esto eres otro. *Yo soy persona* [italics, CI]. Yo tengo ojo, boca y cara y trabajo y me divierto y el uno y el otro.” (Ronaldo, 2003)¹⁶

By referring to himself as a ‘person’, he evokes a philosophical concept of being, which leaves many possibilities open. Haucke notes that for the philosopher and sociologist, Helmuth Plessner, ‘person’ is the trinity of *Körper*, *Leib* and *Kultur*: “‘Persona’ ist die Maske, die verhüllt und enthüllt in einem, die einzig angemessene Erscheinungsweise für eine Substanz, der Verhüllung und Enthüllung wesentlich ist, weil sie ewige Potenzialität, unbestimmte seiende Möglichkeit ist“ (Haucke, 2000: 157).¹⁷

However, enduring an ‘ewige Potenzialität’ (eternal potentiality) with ‘unbestimmte seiende Möglichkeit’ (indeterminate possibility of being) proves difficult while having to cope with the reality of gender binary everyday-life. This might be a reason Ronaldo shifts in his self-description from “person” to “man”: “Yo soy per-

15 “What happens here is that they said lesbian. That I was a lesbian. But this did not help me much. Until I got to know the problem of transsexuality, that I... I say to myself, no, I am not a lesbian. I like women but I am not a woman. I am not a lesbian.” (Ronaldo, 2003)

16 “‘What are you?’ (laughing), as if I were, ehm, a mammal, quadruped and web-footed. ‘What is it that you are?’ Ehm. They don’t ask you, right?, they don’t ask you, what are you? Right? You are a normal common man, and they never ask you what you are, do they? Because to her (his girlfriend), they don’t ask her either, what are you? Why do they ask me ‘what are you?’ Ehm ... I ... really, I don’t know how to explain. There are men and women, point, end of story. But me, I did not do it like this with the gender. And it turns out that there are subdivisions of ... you are transsexual, you are a lesbian, you are gay or you are this or that. I am a person. I have eyes, a mouth and a face and I work and I have fun and I do this and that.” (Ronaldo, 2003)

17 “‘Persona’ is the mask that veils and unveils in one, the only appropriate appearance for a substance to which disguising and revealing is essential, because it is eternal potentiality, indeterminate possibility of being [own transl.]” (Haucke 2000: 157).

sona. Y soy ... pues si quiere que te diga ... un hombre. No hetero ni esto ni el otro, soy un hombre.” (Ronaldo, 2003)¹⁸

Other interlocutors relied on ideas of sexual orientation to confirm their awareness of a gender incongruence by emphasising their stable heterosexual attraction. In doing so, they reassured themselves that their body must be wrong, that is, that their gender identity must be right. For example, Imelda states:

“Yo nunca me he sentido ... hm ... desde pequeña, pequeña, pequeña, siempre, me he sentido muy mujer, siempre me he fijado los hombres, siempre me han gustado mucho los hombres”. (Imelda, 2003)¹⁹

Luisa expresses it in even more detail:

Luisa: “Yo por ejemplo yo me considero una chica heterosexual porque pues obviamente me gustan los hombres y mis parejas han sido heterosexuales siempre. Nunca han sido ni bisexuales ni mucho menos gay. Mis parejas (lengthened) no he tenido muchas, pero las que he tenido han sido heterosexuales. Han sido y son (laughs briefly) heterosexuales. Pero por eso yo nunca jamás he tenido un comportamiento masculino en la cama. Ni en la cama ni fuera de la cama, pero hablando ya de sexo yo nunca jamás he tenido un comportamiento masculino en la cama. Ni ... me negaría a tenerlo si alguien me propusiera hacerlo. Que puede darse el caso ¿no? De que alguien te proponga hacerlo, me negaría rotundamente. Y además rompería los vínculos con esta persona porque me daré la sensación de que no me ve como una mujer. Me daría la sensación de que me ve pues como no sé, como un travestido o algo así. Y para nada quiero esto. Entonces rompería los vínculos con esta persona.”

Christoph: “¿El comportamiento como hombre en la cama sería a utilizar el pene?”
Luisa: “Hmh (affirmatively). Sí sí, exactamente.” (Luisa, 2003)²⁰

18 “I am a person. I am ... well, if you want to know ... a man. Not hetero, neither this nor the other, I am a man.” (Ronaldo, 2003)

19 “I have never felt ... hm ... ever since I was little, little, little, I have always felt like a woman, I was always been driven towards men, I always liked men very much.” (Imelda, 2003)

20 Luisa: “I, for example, I consider myself a heterosexual girl because I obviously like men and my partners have always been heterosexual. They've never been bisexual, let alone gay. My partners, I haven't had many, but the ones I've had have been heterosexual. They have been and are (laughs briefly) heterosexual. That is why I've never ever had a male behaviour in bed. Not in the bed, not out of the bed, but speaking of sex now, I've never ever had a male behaviour in bed. Even, I would refuse to have it if someone proposed it to me. Which may be the case, right? If anyone were to propose it, I would absolutely refuse. And I would break my ties with this person, because I would feel that he does not see me as a woman. It would give me the feeling that he sees me, I don't know, as a transvestite or something like that. And I don't want this at all. So, I would break off ties with this person.”

Yolanda, who, as a little boy wished to have a small slit (*una rajita*) like her sister, tells of having been attracted to her male peers since childhood. Although her female peers asked her to play with them, Yolanda preferred to stay with the boys, play football with the boys, etc. Consequently, her female peers taunted her, calling her homosexual. She remembers how she went home, crying, to tell her mother what the girls had said. Yolanda is explicit in describing her bodily confusions, which culminated during a masturbation session with her male peers around the age of twelve or thirteen. One day, some of the boys proposed jerking off ("*vamos echar una paja*"). Up to this moment, she had never seen a penis, except her own. When she saw her friends' penises, she was frightened, because her penis was much smaller and there was a problem with the foreskin. She describes her impression of her genitalia as "having nothing", "just something where the urine came out". This discovery left her helpless because she did not know where she fitted in:

"Cuando yo vi la picha y vi eh eso, yo no tenía yo ouch mujer (amazed), yo no tengo esto. Ahora yo digo, yo pensaba, yo, vamos a ver ¿yo que soy? Si yo no tengo lo que tiene mi hermana ... que es una rajita, y yo no tengo lo que tienen mis amigos ... yo me quedé en blanco. Digo oy yo tengo un problema. Yo no soy como las personas. Yo no soy un hombre, ni soy una mujer. ¿Que soy?" (Yolanda, 2014)²¹

She was ashamed of her genitals, and spiraled down into existential doubts:

"Que no puedo disfrutar de la vida. Yo pensaba. Que no puedo disfrutar de la vida. Por yo decía, mi padre tiene hijos, eh el padre de este tiene hijos, la madre está casada, y a mí no puedo de tener ni hijos ni me puede casar. [...] Ni poder tener relación con nadie." (Yolanda, 2014)²²

Hearing this story, my emerging presumption that Yolanda had not yet told me that she might be intersexual turned out to be wrong. She later explains that at the age of seventeen she underwent surgery for phimosis, which she remembers as solving her problems. Thenceforward, she dared to enter sexual relationships (with both men and women).

Although some of my informants told of disturbing experiences already in childhood, it is not surprising that for several of my informants the situation

Christoph: "Would the male behaviour in bed be to use the penis?"

Luisa: "Hmh (affirmatively). Yes yes, exactly." (Luisa, 2003)

21 "When I saw the dick and saw, eh, this, I don't have that. I say, I thought: What am I? If I don't have what my sister has ... which is a little slit, and I don't have what my friends have ... I had no idea. I say, oh, I have a problem. I am not like others. I am not a man, nor am I a woman. What am I?" (Yolanda, 2014)

22 "That I can't enjoy life. I thought. That I can't enjoy life. Because I said, my father has children, that one's father has children, the mother is married, and I can neither have children nor can I get married ... nor can I have a relationship with anybody." (Yolanda, 2014)

became more unbearable when they entered puberty. In their survey of transsexual people in Spain, Dominguez et al. found that transsexual sensations were perceived at an average age of 10.8 years. They related this to the onset of puberty, which they situated between 10 and 12 years (Dominguez Fuentes et al. 2011). Although some of my informants told of a kind of awareness at a much earlier age, sexed bodily characteristics and ‘deviating’ interests and behaviour (compared to their same-sex peers) became more evident and less tolerated during puberty. Luisa summarises this in an exemplary way:

“Entonces ya con catorce años ya es algo que te resulta molesto. Que la gente te mire de manera rara ya te resulta más incómodo que con diez años a lo mejor. Que no, no es tanto, porque claro entre niños de diez años pues no resulta tanto. Pero entre personas ya de catorce años o así ya sí te resulta más incómodo. Para mí era incómodo, sí. Porque me sentía diferente.” (Luisa, 2003)²³

While there is diversity in the lived experiences of my informants while growing up (be it due to family background, degree of acceptance or rejection, capacity of resilience, hiding or not hiding, etc.), a noticeable difference concerning the possibilities to live the preferred gender to some extent can be seen between the MtF- and FtM-trans individuals I spoke to. For example, Diego, as female, experienced fewer problems at this age. His haircut blended with male fashion at this time, and he was often mistaken for a boy, which pleased him:

“Nh cuando tenía doce o trece años me confundían con un niño. Porque siempre iba con el pelo así por aquí, y en esa época todos los niños iban con el pelo (indicates hair length) más o menos ... me confundían con un niño y yo no les corregía, me gustaba.” (Diego, 2015)²⁴

Furthermore, all of the FtMs refused girlish clothing and insisted on sports apparel or trousers, which was finally more or less enthusiastically accepted by their parents, without any further consequences. This was true even in situations where there was no escaping wearing a skirt. For example, when Ronaldo attended a school that was run by nuns and he had to wear a uniform which included a skirt, he could wear a jogging suit beneath the uniform, because they practised gym every day. The wearing of the jogging suit helped him to endure the skirt. These kinds

23 “Then, already at the age of fourteen, there is already something that bothers you. That people look at you in strange ways and it is more uncomfortable than perhaps at the age of ten, which is not that much, because, of course, between children at the age of ten, this does not show that much yet. But between persons of already the age of fourteen or so, it is more uncomfortable. For me it was uncomfortable. Because I felt different.” (Luisa, 2003)

24 “When I was twelve or thirteen, they took me for a boy. Because I had my hair like this, over here, and at that time, all the boys went with the hair (indicates hair length) more or less ... they took me for a boy and I did not correct them, I liked it.” (Diego, 2015)

of strategies were not possible for the boys who wished to pass as girls. All of the MtF-trans persons I spoke to passed their school years in the male role. Correspondingly, Ronaldo notes that the FtMs (in contrast to the MtFs) do not have to change their clothes and lead a double life: “Nosotros vivimos así de muy pequeño. No tenem- yo no ... no llevan una doble vida. No nh salimos con falda y después nos cambiamos [la ropa].” (Ronaldo, 2003)²⁵

However, although my FtM-informants experienced more tolerance in wearing the opposite sex’s clothes, this did not resolve their emotional problems. Diego remembers that he was often sad and cried a lot. When he entered the age his sister started to wear make-up and dress up, he was not interested in doing this, which surprised his parents. He also never went to a disco, out of fear of encountering discriminating situations.

2.2 The meaning of the genitalia in relation to sex/gender awareness

“[...] como yo no llevo el pito fuera, pues no sabe nadie lo que ... nadie va con sus genitales fuera.”
(Carmina, 2015)²⁶

West and Zimmerman (1987), drawing on the work of Kessler and McKenna, point out

[...] that genitalia are conventionally hidden from public inspection in everyday life; yet we continue through our social rounds to ‘observe’ a world of two naturally, normally sexed persons. It is the *presumption* that essential criteria exist and would or should be there if looked for that provides the basis for sex categorization. (West and Zimmerman 1987: 132)

This might explain why my informants point to the preponderance of questions concerning their sexuality and their genitals when confronted with questions by outsiders. It also supports the judgement of the president of the ATA that we live in a “genital culture”:

25 “We live like this, ever since very little. We don’t have ... I did not ... they don’t have a double life. We do not leave home dressed with a skirt and then we change [clothes].” (Ronaldo, 2003)

26 “[...] as I don’t have my dick outside, so nobody knows what ... nobody goes around with their genitals outside.” (Carmina, 2015)

“Sí que es verdad que la sociedad eh nos impone una cultura genitalista ¿no? Sobre todo cuando dice: Si no tienes una vagina no eres una mujer. Si no tienes un pene no eres un hombre. ¿No?” (Mar, president of the ATA, 2013)²⁷

During my first field trip, I asked some of my informants what kind of questions people mostly confront them with, and which questions bother them most. This question aimed to find out my research subjects' sensitive issues (and it probably also served me to avoid a faux pas). It turned out that it was not so much the questions that bothered them (however intimate they might be) as the person who asked the questions, in which context they were asked and how the questions were formulated. However, the issues people were most interested in were related to the sexuality of the trans person, sometimes with their sexual orientation due to the confusion the person who was asking found himself in, and direct questions addressing the genitals (e.g. if they were operated). Paquita expressed her aversion when being asked questions about her sex by people she did not know:

“Yo entablo una amistad con alguien y bueno pues yo soy suficientemente, tengo suficientemente capacidad como para saber que se lo tengo que explicar cuando llegue el momento. O cuando se salga la conversación. Pero directamente que venga alguien a querer saber de mi vida, en una discoteca, en un bar. Y que alguien se encuentre con la autoridad de venir y preguntarme 'oye perdona' te hace una pregunta '¿tú que eres chico o chica?' Este tipo de pregunta me fastidie mucho. Eso que me pregunten de momento '¿tú estás operada?' (mimicking). A lo mejor, no sé, gente que no te conocen de nada y ... no sé, este tipo de preguntas es la que más te molestan también.” (Paquita, 2003)²⁸

Luisa told of frequent questions about sexual matters and gender appearance as well. In her case, questions about sexuality and sexual organs arose when she met a man she was interested in. Before she underwent genital surgery, she felt the need to tell the truth about herself in advance. In doing so, she intended to avoid a potentially embarrassing situation. Here she was confronted with many questions directly addressing her penis, like the impact of the hormonisation on the penis

27 “It is true that society imposes a genitalised culture on us, right? Especially when they say: if you do not have a vagina, you are not a woman. If you don't have a penis, you are not a man. Right?” (Mar, president of the ATA, 2013)

28 “I start a friendship with somebody and then, ok, I am sufficiently ... I have sufficient capacity to know that I have to explain when the moment comes. Or when the conversation comes up. But that somebody directly comes to ask about my life, in a disco, in a bar, and that somebody has the cheek to come and ask 'sorry, may I ask, are you a boy or a girl?' This type of question bothers me a lot. When they ask me “are you operated”? I don't know, people who don't know you and ... I don't know, this type of questions disturbs me the most.” (Paquita, 2003)

(if the penis gets small), if she used it in her sexual relationships, etc. Luisa summarised it in the following manner: “Ehm, la mayoría de las preguntas son esas. Son esas relacionadas con el sexo, con lo que es los genitales y, y con la apariencia física.” (Luisa, 2003)²⁹

The latter question about her physical appearance (including the sound of her voice, or if people notice when she walks along the street) were asked by persons she met in an internet chat and who did not see her.

There seems no way to avoid the subject of the genitals in the search for ultimate ‘truth’ (and self-reflection), although there exist other sex/gender characteristics to self-identify or to be perceived as either man or woman. Ronaldo, who mentioned his transition status: “*Ya no tengo menstruación, tengo barba, me afeito*” (“I have no more menstruation, I have a beard, I shave”), and lives his life as a man, nevertheless states:

“Pero yo no me siento totalmente hombre si no tengo unos genitales masculinos. Porque esa ya no (softly) ... yo ya no me puede engañar más a mí mismo. Yo sé que yo me siento hombre tal cual, pero si yo no tengo mis genitales masculinos no me siento un hombre.” (Ronaldo, 2003)³⁰

This statement points to the strong symbolic power the genitals signify for Ronaldo in order to be aware of himself as a full man. This is all the more noticeable (and hints to the societal pressure for clear sex classification) because his narration reveals that, rationally, he is totally aware that neither femaleness nor maleness is necessarily bound to the physical characteristics the norm dictates. At some other point in our conversation, he mentioned:

“Hay gente que lo ... se operan y hacen cosa con el dinero suyo, y entonces se ponen teta porque se ponen teta y se ponen labios de silicona ¡cuando ser mujer no significa ponerte mucha teta y ponerte labio de silicona! Ser mujer significa algo distinto. Igual que ser hombre no significa ponerte barba ni pelo ni estar fuerte, ni nada de eso. Ser hombre es llevar una vida ... yo que sé ... de hombre, lo que es sentirse hombre. Porque hasta ahora no está muy claro lo que es ser hombre. Socialmente, ¿no? Porque si ser hombre es no llorar y ser hombre no es ... es tener un trabajo de camionero y ser hombre es ... otra cosa, ¡yo no voy por

29 “Ehm, the majority of the questions are these. They are related to the sex, to the genitals and the physical appearance.” (Luisa, 2003)

30 “But I don’t feel entirely like a man if I don’t have some male genitals. Because this ... I can’t delude myself anymore. I know that I feel like a man like this, but if I don’t have my male genitals, I don’t feel like a man.” (Ronaldo, 2003)

allí! Ser hombre es sentirte, socialmente aceptado como hombre. Con el rol de hombre.” (Ronaldo, 2003)³¹

The fact that Ronaldo longed for a penis to feel totally like a man (despite his deconstruction of stereotypical gender attributions) might be related to his view that being a man depends on social/societal acceptance. When social/societal acceptance is understood as not only ‘passing’ within the nearer social environment (in this case, a penis would not be absolutely necessary), but also ‘passing’ in the bureaucratic and administrative context, where identity cards, which reveal all the personal data, must be shown, his aim for genital surgery had to do with the legal situation in 2003. Genital reassignment was necessary to have documents changed (name, sex), which would facilitate encounters with official organs, or potential employers, etc. Ronaldo criticised this procedure and the practice of law courts that (although they had all the medical reports) insisted that the transsexual person show up and have their genitals examined by a forensics expert for final proof:

“Si tú llevas todos los informes psicológicos de que eres transexual, de que ya estás hormonado, de que ya eres, de que ya eres el otro, pero ... no sé, porque se hace así, de que tienen que testificar visualmente que eres un hombre. Y entonces, por sí, por ... pagas ... dice ‘yo voy a cobrar tres mil euros hoy por’ ... por no hacer algo ... el médico es lo único que tiene que verlo físico. Y lo físico son los genitales. Por lo tanto tienes que bajar los pantalones.” (Ronaldo, 2003)³²

Examination of the genitals by ‘professionals’ for ‘social acceptance’ is an intervention which began clearly before the times of ‘sex change’ surgery. An analysis of the practices during the Inquisition in early modern Spain by Soyer (2012) reveals parallels, especially concerning law courts and medical opinion that favoured biological definitions of gender. Soyer (2012) analysed inquisitorial records from the

31 “There are people who ... get operated and do things with their money, then they get tits because they get themselves tits, they get themselves silicone lips – when being a woman does not mean getting a lot of tits and putting on silicone lips! Being a woman means something else. Equally, being a man does not mean having a beard or hair or being strong, nothing of this. Being a man is to lead a life ... I don't know ... of a man, that feels like a man. Because until now it is not very clear what being a man means. Socially, right? If being a man means not crying, or being a man means having a job as a truck driver, or being a man means ... these things. I don't go for this! Being a man is feeling like, being socially accepted as a man. With a man's role.” (Ronaldo, 2003)

32 “When you bring along all the psychological information that you are transsexual, that you have already been ‘hormoned’, that you are already the other, but ... I don't know why it is done like that, that they have to visually test that you are a man. Then, yes ... you have to pay ... they say ‘this will cost three thousand euros’ ... for nothing ... The doctor is the only one who needs to see it physically. And physically it is the genitals. Therefore, you need to let down your trousers.” (Ronaldo, 2003)

18th and 19th century to examine the phenomenon of gender ambiguity in early modern Spain and Portugal. Next to providing a context for understanding gender identity, sex, and hermaphroditism on the Iberian Peninsula in this epoch, he concentrates on a few selected case studies. Amongst them is the case of a person being married as a man but suspected of being a woman. Another is the case of a (male) priest, accused by several men of having had sex with them as a woman and of having only female genitals. And there is also the case of a sister of a convent who was suspected of having made a pact with the devil to obtain a penis to have sex with other women in the convent. Soyer describes in detail the process that led the Holy Office to decide the case. He worked out that in early modern Spain and Portugal people constructed and defined an individual's gender identity on the basis of quite rigid social norms relating to physical characteristics and behaviour, as much as from the possession of male or female genitals. For the former he states that in everyday life

[...] a well-established set of norms governing sexual behaviour, social conduct, clothing and outward physical appearance played an extremely important role in influencing perceptions and formulating how early modern Spaniards and Portuguese determined an individual's gender when they could not observe his or her genitals. (Soyer 2012: 287)

However, in the secular and religious law courts, the definition of sex/gender extended to the physical appearance of the individual's genitalia. The inquisitors usually tried to settle doubts surrounding the sex/gender of the accused person by ordering a physical examination by medical practitioners, such as doctors, surgeons and midwives. This consisted mostly of an external examination of their genitals. In general, the opinion of the medical experts carried more weight than witness statements. "The inquisitors were usually prepared to wholly discard the testimony of witnesses, even when it was particularly detailed, if it was contradicted by expert medical opinion" (Soyer 2012: 298).

Keeping Ronaldo's statement in mind when he mentioned that they have to *bañar los pantalones* (to let down their trousers) to be legally accepted, one is tempted to say how little has changed since the times of the Inquisition. Except that it was no longer the devil or demonic powers who could alter the sexual organs of an individual, a belief which according to Soyer, "[...] played a significant part in the rise of rumours circulating in towns and villages regarding the gender of the individuals whose cases have been examined" (Soyer 2012: 290). Compared to the tremendous changes that happened in other dimensions of life since that time era (technologisation and digitalisation, space science, reproductive medicine, artificial intelligence and cyborgs, just to mention a few) that forced (and continue to force) people to deal with accustomed ideas of a 'natural order', to think about mul-

tidimensionality and fluidity, it is striking to notice the adherence to the dualistic thinking based on a natural order when it comes to sex and gender. However, since the implementation of the gender identity law in 2007 (Jefatura del Estado 2007) that abandoned the requirement for genital surgery to change identity documents, the examination procedure has become much more bearable than Ronaldo anticipated. For Lora, for example, there was no necessity to *bajar los pantalones* anymore to have the documents changed from male to female (birth certificate, identity card, etc.). It was sufficient for her to produce the medical report certifying that she had been taking hormones for two years, and that she has no mental disorder.

Lora started the transition process (including her coming out) in 2007, at around the age of fifty, although her self-conception as female had existed since childhood. Her gender affirmation procedures consisted just of taking hormones to alter her body. She was not even sure if she will have a breast implantation, because she is quite satisfied with their growth due to the hormone intake. Initially, she thought that she would need the genital reassignment in order to be a real woman. She has since arrived at a different view, explaining that she feels stable enough as a woman, “[...] tengo lo que tengo entre las patas”³³. There might be different reasons which led to this decision. Ultimately, she argues that she had already been able to live fifty years with her body without sex reassignment, and that her incongruent feelings towards her sex never caused suicidal ideation. Therefore, she concludes that her gender dysphoria must be only slight. Finally, she gives more importance to mentality than anatomy and gets along well with her male body part: “Vamos decir no mh no odio mi cuerpo en sí. Pero mi cerebro decía que no era eh un hombre.” (Lora, 2015)³⁴

The reconstruction of our conversation revealed some other influencing factors that reduced her yearning for gender affirmation surgery. First, she struggled long and hard to dare to leave the house dressed in women’s clothes. But having dared to take that step, she gained much self-confidence because her passing for a woman got smoother and smoother and she had positive reactions. Second, her experiences with the UTIG were not very satisfactory because she had the impression she was not being taken seriously and feared that it would take too long until the staff in the UTIG would finally agree that she could start the bodily transformation process. She decided to look for an alternative and found a solution with her family doctor (with financial support by the *Seguridad Social*), who agreed to prescribe the needed estrogens. In addition (although Lora did not link her changing views to the influence of other trans people), her social environment includes trans women who feel completely female without genital surgery.

33 “[...] whatever’s between my legs” (Lora, 2015)

34 “Let’s say, I don’t hate my body as such. But my brain said that I was not a man.” (Lora, 2015)

This applies, for example, to Carmina, who emphasises the uncertainties of the results of genital surgery, the risk of lifelong complications and the loss of sexual sensuality, a risk she sees no necessity to take to feel completely like a ‘real’ woman. For Carmina, being a woman is independent from genital surgery: “[...] no hace falta tener eso ahí. Para sentirte mujer. [...] Hay muchas de nosotras que somos más mujeres sin necesidad de reasignarte.” (Carmina, 2015)³⁵

Similar to my many other informants, Carmina located sex and gender in the brain. She attached great importance to gender appearance and representation, which might also be related to her growing up in an aristocratic family and her dealing with a strict upbringing and etiquette: “¡Que es lo importante! No lo que tú seas, sino lo que tú representase.” (Carmina, 2015)³⁶

Sex/gender must be represented by outer appearance, by dressing and acting in a womanly manner to pass perfectly as a woman: “A cara a los demás, primero el físico. Que te vea una mujer. Y digan ¡mira!, no se dan cuenta.” (Carmina, 2015)³⁷

She considers the wish for surgical sex reassignment as something very individual and does not judge the individual who aspires for it. Yet, she criticises some trans persons for neglecting an adequate sex/gender representation, and for wanting to undergo the sex reassignment too fast. In this regard, her opinion is clear: “Primero que tú pases como señora.” (Carmina, 2015)³⁸

Carmina’s self-conception as a woman has been confirmed by others in various occasions. On one occasion she had been photographed to promote Chanel perfume. Her portrait won first prize among five thousand pictures of women, she recalls. She also remembers that at a public relations event for the ATA, journalists, referring to Carmina, asked another trans woman: “¿Esa señora que hace aquí?”³⁹, because they did not judge her to be a trans person. In addition, a few months before I met her for the interview, she posed for a campaign for Tolentino, which is an haute couture enterprise specialised in women’s hats.

Luisa attaches great importance to a feminine appearance as well. Her appearance is her bodily capital to earning a living. She performs in clubs, which include striptease (see 4.5). However, unlike Carmina and Lora, the penis meant something uncomfortable for her. When I met Luisa during my first field research trip, she was on the waiting list for genital reassignment. She was impatiently awaiting the date

35 “It is not necessary to have this down here to feel like a woman. There are many of us who are more womanly without the necessity of surgery.” (Carmina, 2015)

36 “This is the most important! Not what you are, but what you represent.” (Carmina, 2015)

37 “In the eyes of the others, first the body. That you look like a woman. And that they say: Look!, but don’t realise.” (Carmina, 2015)

38 “Firstly that you pass as a lady.” (Carmina, 2015)

39 “This woman, what is she doing here?” (Carmina, 2015)

to be summoned by the hospital for the surgery, and expressed her bad sensations towards her male body in the following statement:

“El no poder desnudarme y me ver al espejo para mhm eso parecen tonterías, pero es muy duro. En el fondo es muy duro. El tu verte en el espejo y no, no, no verte a ti. Ver algo extraño en ti pues es bastante duro.” (Luisa, 2003)⁴⁰

Her narration concerning the penis reflects her understanding of what it means to be a woman. Although it did not depend so much on the actual presence or non-presence of a penis, the important thing to be a full woman for Luisa meant to have at least the wish to get rid of it. She acknowledges some reasons why a transsexual woman has not yet had genital reassignment done (e.g. the costs, or being on the waiting list, like herself). However, in her understanding, ‘full’ women did not make sexual use of it:

“Realmente una mujer es la que, aunque lo tenga, no lo utiliza. Porque tú puedes tenerlo pues porque no te puedes operar porque no tienes dinero o porque estás en una lista de espera. Entonces sí eres una mujer porque lo tienes por obligación, pero no por gusto. ¿Entiendes? Entonces sí lo tienes por obligación pues sí por eso no eres ni más ni menos mujer. Eres igual de mujer, simplemente pues tienes una cosa allí, pero está ... tu pensamiento es deshacerte de esa cosa. Pero si tu pensamiento es mantenerla, entonces para mí no es una mujer.” (Luisa, 2003)⁴¹

For Luisa, being a woman is ultimately linked to anatomy, which surgery can correct, and which she is waiting for herself: “Pero yo ahora, no tengo realmente por completo un cuerpo de chica. Un (lengthened) un diez por ciento de mi cuerpo sigue siendo de chico.” (Luisa, 2003)⁴²

She expects this operation to help her feel more balanced, to give her more security in life, and thus to facilitate her everyday life:

“Porque por ejemplo yo tengo un problema, y este problema puede tenerlo otra persona. ¿No? Pero a mí se me hace más pesado, porque yo además de tener

40 “Not being able to undress and to see myself in the mirror for mhm this seems to be silly, but it is very hard. Deep inside, this is very hard. To look at yourself in the mirror and not to see yourself. To see something strange in yourself, well, this is rather hard.” (Luisa, 2003)

41 “Really a woman is someone who, even if she has it, she does not use it. You can have it, because you can't operate, because you don't have the money or because you are on a waiting list. Then yes you are a woman, because you are obliged to have it, but not for joy. Do you understand? So, if you have it out of obligation, then yes, that's not a reason to feel more a woman or less a woman. You are a woman all the same, you simply have a thing there, but it is ... your thinking is to get rid of this thing. But if you think to keep it, then for me it is not a woman.” (Luisa, 2003)

42 “But me, now, I don't really have a complete woman's body. Ten percent of my body is still male.” (Luisa, 2003)

este problema tengo el el malestar de que no me siento bien conmigo misma, entonces cualquier tontería hace que sea más grande.” (Luisa, 2003)⁴³

In that sense, genital surgery will eliminate the sex/gender discomfort that makes all the everyday problems more difficult. There will always be problems in life, but she would no longer have to bother with her gender identity, and would, thus, feel more confident:

“[...] pues este problema es simplemente un problema, no es un problema grande. ¿Entiendes lo que te quiero decir? No es que ... dejes de tener problemas, pero los problemas son más llevaderos. Porque eres una persona más segura, porque la operación te crea más seguridad, en ti misma, a la hora de salir a la calle, a la hora de entablar una conversación con un desconocido. Eh hm ... te cambia, pero o sea te cambia la vida pero no te cambia la personalidad.” (Luisa, 2003)⁴⁴

Some of my informants who refused genital surgery emphasised the uncertainty of the outcome (sensual feelings, orgasm, libido, etc.), a risk they did not want to take (as mentioned above in the case of Carmina). Imelda even compared this practice with playing Frankenstein, somehow interfering with a natural divine order, and which ultimately would not change anything for her:

Imelda: “Yo particularmente, el cambio de sexo de abajo yo no lo haría.”

Christoph: “¿No?”

Imelda: “Yo no. Yo particularmente no. A mí me da muchísimo miedo. Porque además le que te he dicho antes, todavía hay muchísimo rechazo, y después hay muchísimas contraindicaciones, tú no sabes si sientes... mmh... la manera de sentir... desde que te pones hormona, ya es diferente. Tú no sientes como un hombre, tampoco sientes como una mujer, porque nosotras nunca debemos olvidar lo que somos. Y creo que ya bastante vamos contra la naturaleza como para ahora operarte y tener... eso yo creo que ya es jugar un poquito a... a Frankenstein. A mí eso ya me da muchísimo miedo, lo respeto que cada una haga con su vida lo que sea, pero yo, teniendo lo que tengo o lo que dejo de tener, nadie tiene porque saber lo que tiene entre las piernas, si es una raja u otra cosa, pero para mí ... ¿tú te crees que no me gustaría ser una mujer completa? Pero si Dios me ha... me ha

43 “For example, I have a problem; a problem another person can have as well. No? But for me it gets more serious, because additionally to this problem, I have the discomfort that I do not feel well within myself. So, any nonsense makes it bigger.” (Luisa, 2003)

44 “[...] so, this will be just a problem, not a big problem anymore. Do you understand what I mean? It's not that you stop having problems, but the problems become more bearable. Because you're a more confident person, because the operation makes you more self-confident, when going out on the street, when engaging in conversation with a stranger. It changes you ... well, it changes your life but it doesn't change your personality.” (Luisa, 2003)

hecho así. Yo porque voy a cambiarme eso, si a mí mis sentimientos, mis cosas no van a cambiar.” (Imelda, 2003)⁴⁵

Those of my informants who thought that they could not go on without genital surgery, did not deny the complexities of the operation. However, the prospect of having the genitals that suit their gender identity weighed more. Magdalena, a 23-year old trans woman, who, like Luisa, passed all the medical clarifications in the UTIG and who was on the waiting list for sex reassignment surgery when we met in 2003, declared:

“La operación es muy complicada y el postoperatorio es criminal. Pero... es la única vía para sentirse feliz, para mí, como mujer y como persona. No concibo ser mujer sin eso. Lo siento. No puedo.” (Magdalena, 2003)⁴⁶

In addition, Anabel, whose biography differs significantly to Louisa's and Magdalena's (Anabel started the transition process later in age and had fathered a child) aimed for genital reassignment as well and expressed her conflicted attitude towards her penis:

“Esa es la parte quizás más importante, los genitales te sobran esos genitales aquellos no es ... no lo vives como tuyo ¿no? Y llegas casi un poco a odiarlos al final porque dices ... por culpa de esto ... estoy pasando por todo lo que estoy pasando ¿no?” (Anabel, 2003)⁴⁷

In the cases of the trans men, all of them wished for genital surgery. While some trans women expressed clearly that sex/gender is independent from genital

45 Imelda: “Me, I would not do the sex change below.”
Christoph: “No?”

Imelda: “Not me. Me not, really. It scares me a lot. Because besides what I have told you before, there is still a lot of rejection, and then there are many contraindications, you don't know if you will feel ... mmh ... the way you feel ... when you start to take hormones, it is already different. You don't feel like a man, you don't feel like a woman either, because we should never forget what we are. And I think that we are already going enough against nature, for now to operate and have ... this, I think, is already to play a little bit Frankenstein. This scares me a lot. I respect that everyone does whatever with their lives, but me, having what I have, or what I stop having, nobody has to know what you have between the legs, if it is a slit or something else, ... but for me... Do you think I would not like to be a complete woman? But God created me this way. Why should I change this, when my feelings, my being doesn't change.” (Imelda, 2003)

46 “The operation is very complicated and the post-operational process is criminal. But ... it is the only way to feel happy, for me, as a woman and as a person. I can't conceive of being a woman without that. I am sorry. I can't.” (Magdalena, 2003)

47 “This is maybe the most important thing, you have enough of those genitals ... it is not as if they are yours, right? And finally, you start to hate them a bit because you say, because of all this am I going through everything I am going through, right?” (Anabel, 2003)

anatomy (and therefore genital reassignment is not a necessity to feel like a woman), some trans men mentioned a similar understanding of sex and gender, but still wished to possess a penis. However, genital surgery techniques by FtMs pose an obstacle to fulfill this wish. The construction of the penis is said to be more complicated than the construction of the vagina, and, during my second field research visit, the UTIG was no longer offering this surgery due to bad results. During my first field research trip, Ronaldo told of his aversion toward his vagina when touching it. He managed to have the operation done, before the UTIG stopped this offer. Because it was more important for him to maintain the sensibility of his genitalia, than aspects of size, he went for a metoidioplasty (a micropenis constructed from the enlarged clitoris), instead of a phalloplasty (a neopenis using tissues from another body part like, e.g. arm or leg, which would have been bigger in size). Still, he experienced severe complications.

Another trans man, Diego, is cautious about genital surgery, but nonetheless clear in his attitude: “Yo si hubiera una técnica que me dijera que es fenomenal, yo lo haría.” (Diego, 2015)⁴⁸

However, because he knows of several discouraging results in his social environment, he regards this step as too risky, given the current technological possibilities. He has the patience to wait:

“Entonces como tengo tan eh tantas malas experiencias pues no (lengthened) de momento no. De momento no me operaría. En un futuro. Bueno. La ciencia (laughs) avanza ¿no? Yo, estoy esperando.” (Diego, 2015)⁴⁹

For Bittor, who is much more impatient than Diego to have this operation done, it was a moral setback that the UTIG stopped this offer: “Yo esa cirugía me la quiero hacer. Yo lo tengo muy claro.” (Bittor, 2015)⁵⁰

Although he is aware of the risks, he would do it in a private clinic with a good reputation, if he had the financial resources.

2.3 It's in the brain: The dualism between body and mind

Although I never asked, some of my informants felt bound to explain to me the sources of the incongruence between their gender self-awareness and their biological sex. Their explanatory models had to do with hormones and the brain. For

48 “If there were a technique that they would say it's phenomenal, I would do it.” (Diego, 2015)

49 “So, because I have had so many bad experiences, so, no, not at the moment. At the moment I wouldn't have surgery. In the future. Well. Science (laughs) advances, doesn't it? I, I'm waiting.” (Diego, 2015)

50 “I want this surgery. I'm very clear about that.” (Bittor, 2015)

example, Anabel, who studied psychology, locates the causes in some part of the brain. In her view, it was due to specific hormonal dysfunctions during the development of the fetus that determined this phenomenon. She compares transsexuality with diabetes, thus, this biological bias serves to judge her gender non-conformity as a disease: “Como yo digo. Hay mujeres diabéticas, hay mujeres (lengthened) no sé que, y yo fui una mujer transexual. Y punto. No lo puedo evitar.” (Anabel, 2013)⁵¹

For Luisa as well, transsexuality is a kind of pathology. She informed herself in the internet, and remembers some pictures she discovered in a neurological study. She learned that men and women distinguished themselves as male or female in a part of the brain. Whereas there was no difference between homosexual and heterosexual men, this part of the brain was the same between a transsexual woman and a biological woman. This illustration convinced her on the one hand to be a woman; on the other hand, it confirmed for her that transsexuality had nothing to do with homosexuality (see 2.1). Furthermore, Luisa incorporated the theory that the foetus is female in the beginning, but holds the information to develop as female or as male (her misinterpretation of the scientific findings that the foetus starts out indifferently, or bipotentially, see Fausto-Sterling 2012, is not relevant for what I want to depict here). Thus, she understands that transsexuality arises out of a mismatch between information and a hormonal bath:

“Entonces decían pues que la transexualidad era cuando este feto tenía en su cerebro que era femenino y recibía un baño de hormonas superior al que debía recibir. Entonces se desarrollaba masculinamente. Entonces desarrollaba un cuerpo de varón. Pero claro la información era equivocada, sea no era equivocada la información es la que es, la que está equivocado es el baño de hormonas que debe recibir. O al contrario. Cuando ese feto eh trae la información para ser un varón, y no recibe este baño de testosteronas, y se queda pues de forma femenina. Entonces ya desarrolla como una niña. Y decían, eh leí que de allí mh venía la transexualidad.” (Luisa, 2003)⁵²

Matching the prevailing medical requirements to be diagnosed as transsexual for entitlement for gender affirmation procedures, Luisa agrees that she has a gender

51 “As I say. There are diabetic women, there are women ... I don't know what, and I was a transsexual woman. And that's it. I can't avoid it.” (Anabel, 2013)

52 “Then, they said, ok, transsexuality was when this foetus had in its brain that it was female and received a higher dose of hormones than it needed to receive. Then it developed the male way. Therefore, it developed a male body. But of course, the information was misguided, well, the information was not misguided as such, misguided is the shower of hormones it has to receive. Or the contrary. When this foetus gets the information to be male, and does not receive the shower of testosterone, and then stays female. Then it develops as a girl. That's what they say, what I read, that transsexuality comes from there.” (Luisa, 2003)

dysphoria. By comparing it with the Down Syndrome, she addresses the problem of social acceptance:

“O sea, no entiendo porque pueden, eh porque pueden tener algo en contra de una persona transexual, cuando es una patología igual que el síndrome de Down. Yo no creo que nadie con síndrome de Down, le tengan, tengan nada en contra de esta persona. ¿No? La sociedad en si. Entonces porque una persona que es transexual sí, si es lo mismo, una patología. Han nacido con eso. ¿Entiendes lo que te quiero decir? Es un problema ¿no? que que ha tenido tu cuerpo al desarrollarse. No es una cosa que tu hayas elegido ni ... es algo que tu que tu cuerpo pues se desarrolla malamente, a eh siendo feto antes de nacer. Entonces pues no entiendo porque una persona con síndrome de Down tiene el respeto de los demás, ¿no? Y son personas pues que son respetadas porque no ... son personas que han nacido con este problema, en su cerebro. Y nosotras que nacemos con el problema en el cuerpo pues no ... no lo ven igual.” (Luisa, 2003)⁵³

Both Anabel and Luisa hold to a biological essentialism at whose core is the belief that bodily, psychological and behavioural differences between men and woman can be traced back to the interplay of masculinising or feminising hormones, which in turn are controlled by the genes (cf. Gerschick 2005). Haraway (1988) and Fausto-Sterling (2000, 2012) (both biologists engaging in critical feminist theory) point out that one has to be careful in relying on reductionist biological models, because “[...] the hard truth is that there are probably so many contributing streams, and they probably interact in so many different ways, that we will never have a single story to tell about gender development” (Fausto-Sterling 2012: 57). However, in the case of transsexual people, Fausto-Sterling observes:

Because of the strength of their desire to bring anatomy and identity into synch, and because often they recall wanting since childhood to *be* the other sex, many adult transsexuals believe their condition to have a biological origin. Many suspect that there is something unusual about their own brain development. (Fausto-Sterling 2012: 58-59)

53 “I don't understand why they can hold something against a transsexual person, if it is a syndrome similar to the Down syndrome. I don't think that anybody has anything against this person with Down syndrome. Right? Society as a whole. So, why against a person who is transsexual, if it is the same, an illness? They were born like this. Do you understand what I would like to say? It is a problem, right? that your body has had as it developed. It is not a choice you made It is your body, which developed the wrong way, when it was a foetus, before birth. Therefore, I don't understand why only a person with Down syndrome has the respect of others, right? And these are persons who are respected, because ... these are persons who were born with this problem, in their brain. And we are born with the problem in the body, but no ... they don't see it as the same.” (Luisa, 2003)

She calls it the “hormone-brain-identity nexus” (Fausto-Sterling 2012: 46) and observes that the commonly sought treatment was to ‘correct’ the anatomy to conform to the identity (which consists of hormone treatments, surgical transformations of the genitals and alterations in secondary sex characteristics) (Fausto-Sterling 2012). This aim suits Luisa (and some of my research partners who went for all the gender affirmation procedures) who stated distinctly:

“[...] realmente soy una persona normal. Que no soy una persona extraña, sino que tengo un comportamiento como lo de cualquier otra chica. Sino que tengo un defecto en mi cuerpo pues que tengo que corregir.” (Luisa, 2003)⁵⁴

Despite the above-mentioned critiques for a more nuanced understanding of gender development, the prevailing discourse among my informants (independently of their bodily aspirations) was that gender identity is located in the brain. A posted picture on the website of the ATA reflected this discourse (see illustration 2.1). A finger points upward to the brain, indicating where sexual identity is located, another finger points downwards, indicating that all those who think that sexual identity or sexual behaviour has something to do with the genitals, are wrong.

The following statement from the president of the ATA serves as a neat description of this explanatory model:

“Lo que prima es el sexo psicosocial y no el sexo genital. ¿No? La persona se auto-percibe hombre o mujer eh en el cerebro no en los genitales (amused). Eh cualquier persona eh por ejemplo tú si perdieras los genitales en una operación o en un accidente ¿qué serías? Un hombre ¿no? Lo cual demuestra que los genitales no determinan ni la orientación de las personas pero tampoco la identidad.” (Mar, president of the ATA, 2013)⁵⁵

Congruent with the current appropriate terminological handling, she criticises people when they speak of ‘sex change’.

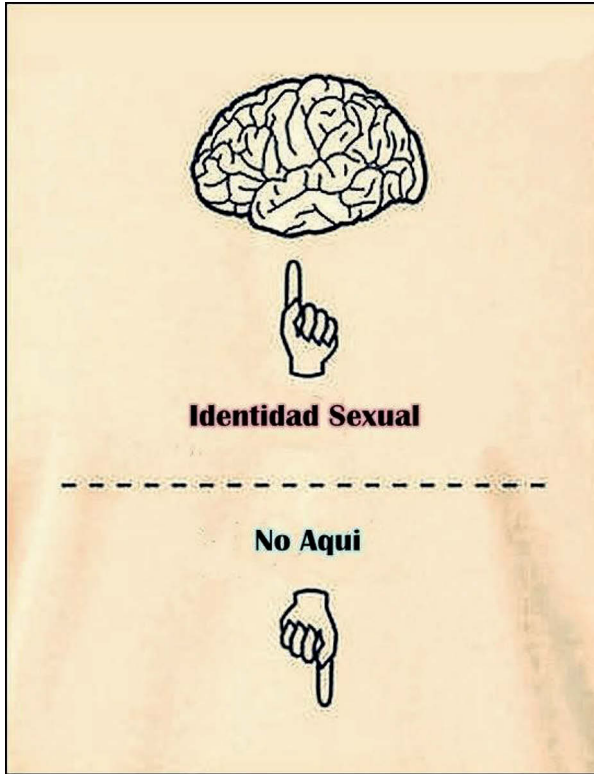
“Yo no cambio de sexo. Yo ya nazco con un sexo. A mí una cirugía me puede hacer es una reconstrucción genital, o un tratamiento hormonal, me puede ayudar a

54 “Actually, I am a normal person. I am not a strange person, but I behave like any other girl. I have a defect in my body that I have to correct.” (Luisa, 2003)

55 “What comes first is the psycho-social sex, not the genital sex. Right? The persons perceive themselves as man or woman in the brain and not in the genitals. Any person, for example, if you lost your genitals in an operation or an accident, what would you be? A man, right? This proves that the genitals determine neither the [sexual] orientation of the persons nor the identity.” (Mar, president of the ATA, 2013)

tener un físico más de acuerdo como yo me siento. Pero no me cambia el sexo. El sexo yo ya lo tengo.” (Mar, president of the ATA, 2013)⁵⁶

Illustration 2.1. Sex/gender identity is in the brain



<http://www.atandalucia.org>, CC BY-NC-SA 3.0

For her, the concept of a dominating *sexo psicosocial* is the reason why only a small portion of the trans people aspire for a genital operation, whereas all undergo hormonal treatment: “Porque es aquello que hace que nuestro cuerpo ¿eh? se ajuste al sexo que tú sientes y vives como propio.” (Mar, president of the ATA, 2013)⁵⁷

56 “I don’t change the sex. I was already born with a sex. Surgery can give me a genital reconstruction, or a hormonal treatment, it can help me to look more like I feel. But it does not change the sex. The sex I already have.” (Mar, president of the ATA, 2013)

57 “Because it’s that what makes that our body adjust to the sex you feel and you live as your own.” (Mar, president of the ATA, 2013)

In their quantitative study with trans people in Spain, Dominguez et al. (2011) show that the majority of them had undergone hormonal treatment to adjust physical traits to match sexual identity. A lesser part had undergone surgical interventions (which the authors do not specify), and only 15% underwent genital sex reassignment surgery.

It is striking to note that the 'brain discourse' serves as an explanatory model, that is to say, it is essentialised and politicised (e.g. demanding legal recognition of the felt sex/gender) by both groups, those like Anabelle and Luisa, who aim for genital sex reassignment, and those like Carmina and Lora, who do not. The former classify their gender incongruence as a kind of disease, which should and can be treated by altering the body. They accept the diagnosis gender dysphoria, which is the medical requirement to be approved for sex/gender confirmation treatment. For the latter, the 'brain discourse' serves as proof that their felt sex and gender has nothing to do with their anatomy, and that the individuals themselves can judge best about their gender incongruence. Therefore, this perception holds that the decision for gender transition (including the right to obtain medical assistance) is up to the individual, and should not be determined by gate keepers, like medicine and law, to construct societal and legal mechanisms of inclusion or exclusion.

2.4 Further thoughts about the concept of the body and dualism

The following concluding reflections of this chapter is a first attempt to scrutinise the dominant dualistic perception of the body, which renders it 'technically' adaptive. Far from complete, these reflections try to outline a different phenomenological approach to the body, and relate it to my research partners.

The recurrent narrative of living in the wrong body implies that sensations/emotions and body can be divided, thus reflecting our dualistic understanding of the world. The body equals anatomy, and sensations/emotions are located somewhere in the soul, mind, or psyche. Medicine promises to restore this duality. Hormones and surgery serve as a means for this unifying process. It is striking to note that (with regard to the location of the sensations) the 'brain discourse' has somehow replaced the 'soul discourse', although the latter is still used occasionally. For example, a recent documentary on 3Sat broadcast in January 2019 was titled *Das Geschlecht der Seele* (The sex/gender of the soul). However, illustration 2.1 shows that actual discussions locate gender identity in the brain (and not in other body parts or the soul). Nevertheless, as far as this dualistic thinking is concerned, both types of discourse (body and soul / body and brain) maintain an explanatory model that remains in the framework of a Cartesian way of thinking. The divide of body and soul shifts to a divide of body and brain (which might reflect the contemporary upturn of the neurosciences). According to Schmitz (2011), the externalisation of

the soul from the body can be traced back to the Greeks of the second half of the 5th century BC, where it was common

[...] das am Menschen, was in seinem Körper nicht unterkommt, als seine Seele auszulagern, der manchmal, eine Stufe höher, der Geist hinzugefügt wird, und sich vom Körper in diese Seele, diesen Geist als den eigentlichen Sitz des Menschseins zurückzuziehen; dafür spricht die geläufige Möglichkeit, sich von seinem Körper zu distanzieren, gleichsam auf ihn herabzusehen und ihn als Werkzeug zu gebrauchen. (Schmitz 2011: 1)⁵⁸

He further argues that this philosophical tradition ignored the *Leib* (understood as a more holistic concept of the body). That is, it broke with the dynamic interplay of *Körper* (body) and affections, and thus divided “[...] den Menschen in Körper und Seele – manchmal ergänzt durch einen der Seele unklar zugeordneten Geist [...]” (Schmitz 2011: 77).⁵⁹ The soul was perceived as a kind of house, on top of which the *Vernunft* (reason) resided that should direct the involuntary motions that were housed below. The soul was conceived as a private inner world, where (emotional) experiences take place. However, these were accessible only through the senses, which pass it on to the mind/reason. Thus, the latter is able only to gather these emotions, but cannot control them directly. Schmitz notes that this dualistic perception “[...] das private und öffentliche menschliche Selbstverständnis weitgehend kolonisiert [hat] und auch durch die heute wieder einmal vorpreschenden materialistischen Versuche, an die Stelle der Seele einen Körperteil (das Gehirn) zu setzen, nicht wesentlich geändert worden [ist]” (Schmitz 2011: 77).⁶⁰

An approach to overcome this dualism of body and psyche/soul can be found in the philosophical anthropology by Helmuth Plessner, who notes:

Bodily existence forces on man a dual role. At *one and the same time*, he is his body and *in* or *with* a body. In expressing this being-with and being-in, we also say: we have a (living) body. Being and having continuously shade off into each other in the fulfillment of existence, just as they are entwined with each other.

58 “[...] to outsource that which does not find its place in the human body to the soul of the human being, to which sometimes, one step higher, is added the spirit, and to withdraw from the body into this soul, this spirit as the actual seat of humanity; the common possibility of distancing oneself from one’s body, looking down on it as it were and using it as a tool, speaks in favour of this [own transl.]” (Schmitz 2011: 1).

59 “[...] the human being in body and soul - sometimes supplemented by a spirit unclearly assigned to the soul [...] [own transl.]” (Schmitz 2011: 77).

60 “[...] has largely colonised the private and public understanding of one’s human self and has not been substantially changed by today’s pressing and materialistic attempts to replace the soul with a body part (the brain) [own transl.]” (Schmitz 2011: 77).

At one time the human person confronts his body as an instrument, at another he coincides with it and is a body. (Plessner 1970: 148-149)

This perception of *having* a body (*Körper*) and *being* a body (*Leib*), both being intertwined, allows Plessner to show that

Körperlichkeit nun nicht mehr automatisch in einem dualistischen Gegensatz zu Geist und Seele gedacht werden muss. Durch die kernhafte Mitte kommt dem Ding in seiner Körperlichkeit etwas zu, was sich wie Geist und Seele der Erscheinung entzieht. (Haucke 2000: 43)⁶¹

Thus, the human being is no longer just a dualism of objectified body or an object of psychology, but a kind of a holistic entity. Additionally, Plessner argues that the human being inhabits a world full of possibilities that must be taken as reality, however without advising which possibilities are the most appropriate to choose. Yet, the necessity to choose or to decide is not arbitrary, but is always bound to the situation the person finds himself in, in the “[...] „hier und jetzt, gebunden an einen Leib“ (Haucke 2000: 14).⁶²

Following this thought and coming back to the meanings my research partners attribute to body parts or psyche, Plessner's understanding of the body might have some impact on their self-awareness and on the role of medicine. The society they are living in offers two kinds of sex and gender (male, female), and medicine promises to ‘unify’ that which is sex/gender incongruent between anatomy and brain/soul. However, if *Leib* and *Körper* are intertwined, are anatomy, soul and mind in one, and if the situation the trans person finds himself in were not divided in just two sexes/gender, a ‘unifying’ sex/gender affirmation surgery decision might be redundant.

If it were not for the dominance of an explicit sex/gender-binary appearance (the representatives of both groups were aiming for an appearance as either man or woman), one could argue that the latter group (formerly called transgender, or those who do not aspire for genital surgery,) somehow blew the frame of dualism, thus making use of their ‘subversive potential’ (see 1.2). They incorporated „[...] eine Erfahrungsstellung, in der die Differenz simultan erfasst werden kann, in der nicht Entweder-oder-, sondern Und- sowie Auch-Verbindungen sichtbar werden [...]“ (Haucke 2000: 30).⁶³ However, the above-mentioned dominance of an explicit

61 “Physicality no longer automatically has to be thought in a dualistic opposition to spirit and soul. Through its very core, the thing gets something in its corporeality, which, like spirit and soul, eludes the apparition [own transl.]” (Haucke 2000: 43).

62 “[...] here and now, tied to a body [own transl.]” (Haucke 2000: 14).

63 “[...] a position of experience in which the difference can be grasped simultaneously, in which not Either/Or-connections but And-connections and Also-connections become visible [...] [own transl.]” (Haucke 2000: 30).

sex/gender binary appearance/role of my research partners clearly shows that for them the *Und- sowie Auch-Verbindungen* (*And-connections and Also-connections*) are difficult to live. They incorporated and lived the societal expectations to be *Entweder-oder* (*either-or*).

The next chapter takes up this thread of thought once more and focusses on the agency of my research partners, and the available possibilities on their way to an *either-or*.

