

Changing Race, Changing Sex

The Ethics of Self-Transformation

Cressida J. Heyes

Analogical Minefields: What Is Changing Sex Like?

“Changing Race, Changing Sex” was one of those articles that comes out of the backchat at conferences and in bars. It was a response to a tendency among feminists who are relatively far from trans politics to wonder why people don’t change race, how feminists should respond if they did, and whether this (putatively critical) response could be transposed to the much more well-trodden ground of changing sex. At a time when “transgender” is a ubiquitous term of art within feminist theory, the analogy can function as a Trojan horse for skepticism about transsexuality: rather than risking censure by arguing outright that sex change is politically regressive, critics would rather imply this by asking, rhetorically, “Well, what would you say to a *transracial*?” A lot of this wondering never seemed very well grounded to me: people *do* “change race,” even if they don’t have a psychiatric diagnosis to explain it. I don’t exactly know the best response as a feminist to such changes—real or imagined—and I’m not sure one response would cover all eventualities. Most of all, the idea that sex and race necessarily function in the same ill-defined constructionist way does a great disservice to the long and complex histories of the categories as we have inherited them. The article, then, tries to flesh out these intuitions in a philosophical voice, showing that race and sex yield different possibilities that we all negotiate but none of us can dictate.

The discourse of individual authenticity—especially as it is mediated through biomedical models in psychiatry—seems to have gained pace in many of the ways I implied toward the end of “Changing Race” (when I alluded to the idea that if extreme racism can become a psychiatric disorder, then “transracialism” might be only one step behind). Reflecting this trend, since “Changing Race, Changing Sex”

came out, I have also published a book in which I talk about how transsexuality rests in part on a similar model of the authentic inner self as one increasingly used to justify having cosmetic surgery. I felt rather politically uncomfortable, however, including analyses of transgender politics and cosmetic surgery in the same monograph, and my introduction gestured toward this discomfort without really addressing it.¹ Yet it is hard to deny that cosmetic surgeries and trans surgeries are mutually implicated, even if one pulls back from the conclusion that sex reassignment simply *is* a set of cosmetic procedures.² They have an intertwined institutional history in medicine, use many of the same techniques, and are performed by surgeons with basic training in the same subspecialty, for example. Both effect changes to the body's soft tissues in the name of ameliorating psychosocial distress. Many defenders of the right to change sex, however, make the same kind of too-casual analogical move I challenged in "Changing Race." Sex reassignment is *not* cosmetic surgery, they aver, because it is, variously, medically and psychologically necessary, central to personal integrity and mental health, outside history and driven by a universal struggle, and motivated by a kind of suffering beyond the control of the individual. Cosmetic surgery, by implication, must be a self-indulgent luxury, instrumentally undertaken, driven by fad and fashion, peripheral to individuals' well-being, and frivolously self-interested.³ That this is an implausibly univocal and facile view of the psychology of cosmetic surgery is apparent. It is not apparent, though, what would be argued if the disanalogy were more carefully spelled out.

Noticing this, therefore, I started to write a familiar sort of article about how trans surgeries and cosmetic surgeries compare and contrast, in which I pointed out that most attempts to analogize or disanalogize them are undertheorized, serving only rhetorical purposes rather than making any convincing case. In a more constructive vein, I also wanted to say something about the way this analogy should be handled so that it respects the complex realities of each phenomenon, while also developing a political position I could stand behind. Thus this new essay quickly took on a form highly reminiscent of "Changing Race, Changing Sex." Looking back, my avowedly selective history of race and sex stressed certain discontinuities, but a different inflection might have made them look much more alike. My own anxieties about defending changing sex by making it seem *unlike* anything else linger in the text. This only became evident when I found myself oddly reluctant to point out how interconnected trans and cosmetic surgeries are and how disanalogies by trans activists often demean cosmetic surgery recipients. Perhaps I risk inverting rather than avoiding the ad hoc reasoning for which I criticized Janice Raymond. That is, I argue backward from the conclusion that changing sex is *exceptional* (especially in being distinct from practices that are considered more obviously vulnerable to feminist critique), to the premise that analogy x, y, or z is unjustified.

This move mirrors a larger political trend among transsexual activists, if not among transgender theorists (a controversial but, I would argue, real distinction that correlates in interesting ways with one's position on analogical arguments).⁴ The former are directly concerned with, among other things, protecting and expanding legal rights and access to health care for transsexuals, including those who do sex work, are living with HIV/AIDS, or are in poverty. Especially for these populations, medical

and social services are, where they exist at all, vulnerable to political retrenchment.⁵ In this light, endorsing the psychiatric model of transsexuality (in which a diagnosis of Gender Identity Disorder is followed by supervised guidance using the WPATH standards of care) serves a strategic function, no matter how convinced (or not) one is of its ethical or epistemological adequacy.⁶ A common—although contingent—underpinning of the psychiatric model is an understanding of transsexuality as an organic pathology the universal cause of which will eventually be found. On this view, while the *expression* of gender disorder may of course vary by cultural context (or historical epoch), its underlying nature remains constant and the remedy remains individual. Under current regimes of truth, this general form of explanatory model is perceived to get more uptake from health care systems and in the law than any feminist constructionism or libertarian demands for freedom of choice could hope to garner.⁷

I don't endorse the model of gender and the self on which the diagnosis of Gender Identity Disorder is typically founded for reasons both philosophical and political, and I don't think defending biological essentialism for strategic reasons is guaranteed to have the positive effects that some advocates seem to believe. Eve Sedgwick famously remarks that to believe any particular causal origin story for homosexuality—including that homosexuality is “natural” or “biological”—will inoculate us against homophobia is to seriously underestimate the latter's multiple origins and strategies, as well as its power to survive in the face of contradiction. My suspicion is that the same is true of transphobia (a neologism badly in need of theorizing) and that advancing the view that transsexuality is a biomedical “disorder” will have mixed and unpredictable political consequences that currently emerge against the backdrop of a ubiquitous prior desire to eradicate gender ambiguity and perceived inauthenticity.⁸ Nonetheless, theorists of transgender—especially if we are ourselves cisgendered⁹—have a responsibility to think hard about the consequences of our writing for trans people, as well as how our own identities inform our accounts. There is also clearly a lot of work to be done in spelling out just how the *refusal* of analogy—making transsexuality always exceptional—might be linked to essentialist models, and how to theorize in ways that are both philosophically precise and politically responsive to the exigencies of trans-oppression. Some questions I am left with, then, include the following:

What investments do cisgendered people like me have in treating transsexuality either as “just like” some other phenomenon we think we understand or as exceptional—unlike anything we might recognize? How are these two responses related?

How is the impetus to treat transsexuality as exceptional conceptually connected to biomedical psychiatric models?

Does defending a biomedical psychiatric model (or refraining from attacking it) actually lead to positive political consequences in particular cases? Positive for whom? At what cost? To whom?

What is the connection between strategizing for trans rights and employing explanatory models one believes to be true?

Every year when I teach an introductory course in feminist philosophy, I see individual women and men drastically rethinking their previous understandings of gender

and race and of their own place in a gendered and racialized world. Often as a part of this rethinking, we struggle over what an ethical life amounts to; *ethical*, that is, in the sense of being responsive and responsible to one's relation to others and to the work one does on oneself.¹⁰ To talk in this way of the self as, at least in part, self-making presumes another set of questions about the very possibility of changing oneself. So, for example, feminists are not only interested in establishing who to count as "women" with regard to some already foundational definition but also in troubling and transforming the definition itself—in part through changing ourselves.

To address these simultaneously ontological and ethical questions, we need to ask what makes it possible to change one's identity—and not just incrementally within a defined category (e.g., as by becoming a more assertive woman through feminist consciousness raising) but also more drastically. Specifically, what are those people who "change sex" undertaking, and what makes sex into the kind of thing that can be changed? How is changing sex different from "passing"—the phenomenon central to the histories of both race and sex, in which one is read as, or actively pretends to be, something that one avowedly is not? It is in light of questions like the above that my interest in identity categories extends to asking: What makes a particular facet of identity into something the individual *can* transform? And what implications do answers to this question have for all our ethical lives?

These questions also invite reflection on how we think about the relationships among different identity categories. In particular, it is by now an orthodoxy in feminism that race and gender are always mutually implicated in individual phenomenology and social group analysis and that the most politically responsible thinking will fully incorporate both without assuming that either can be isolated from the other. It does not follow, however, that race and gender are always *analogous*—that is, that any conceptual analysis of gender applies straightforwardly to race, and vice versa. (I call this "the analogy thesis.") As I show, some feminists have invoked the analogy thesis in ways that serve only to elide the very different histories of these two categories. That is, a certain analytic treats gender, race, sexuality, and other identity categories as identical building blocks for theory by assuming their equivalence.¹¹ When this occurs, authors typically transpose ontological and ethical conclusions they may have drawn based on one context directly onto another. This is precisely the phenomenon, however, that accounts of mutual constitution were intended to avoid. Thinking through how gender and race work together, therefore, may actually be hampered by assuming the analogy thesis.

These two problematics—the possibilities for individual identity transformation and the limits of analogy—come together in the questions: Why are there "transsexuals" but not "transracials"? Why is there an accepted way to change sex but not to change race? I have repeatedly heard these questions from theorists puzzled by the phenomenon of transsexuality. Feminist thinkers, in particular, often seem taken aback that in the case of category *switching* the possibilities appear to be so different. Behind the question is sometimes an implicit concern: Does not the (hypothetical or real) example of individual "transracialism" seem politically troubling? And, if it is, does not the case of transsexuality merit equivalent critique?¹² Or, conversely, if one accepts transsexuals as people with legitimate demands (e.g., on medical resources

or single-sex spaces), then would one not also be committed to accepting the putative transracial in analogous ways? Understanding the ontological constraints and possibilities with regard to transforming one's identity is, I suggest, a project that should accompany ethical evaluation of those transformations. Under what circumstances is it (un)ethical to leave behind a gender or racial group with which one has once been affiliated? This question is, again, especially pressing for radical thinkers who endorse the claims that race and gender taxonomies are internally hierarchical and constituted through relations of oppression, domination, and normalization. Changing one's identity under these circumstances will surely always be linked, however tenuously, to consideration of the larger political and cultural milieu in which such changes are advantageous or disadvantageous, complicit with oppressive norms or resistant to them.

To illuminate these larger questions, in this essay, I first provide three examples of the analogy thesis in feminist thinking about race and sex change, each of which draws ethical conclusions about individual motivation, political strategy, or public policy, premised on the assumption that race and sex change are equivalent phenomena. None of these accounts considers the genealogy of each category as significant to contemporary possibilities. I next offer a descriptive analysis that highlights different norms at play in contemporary North American understandings. Sex–gender, I argue, is essentialized as a property of the individual's body, while race is essentialized with reference to both the body and ancestry. This analysis, I conclude, shows politically significant disanalogies between the categories and reveals the importance of genealogical accounts of race and sex in thinking ethically about changing ourselves.¹³

The Transracial Analogy

Why is it now considered legitimate to change one's *sex*, but not one's *race*? Why don't we have "transracials"? Here, in brief, are three textual examples of feminists whose theories answer these questions by assuming or arguing that changing sex and changing race must be analogous processes (and that, consequently, sex and race are analogous categories). In all three cases, implicitly or explicitly, race and sex end up divorced from their histories in ways that oversimplify and decontextualize the ethical possibilities and dilemmas that face agents working within the constraints of larger social group systems.

First, a bold version of the analogy thesis is advanced by Janice Raymond in the introduction to the 1994 edition of her notorious book *The Transsexual Empire*. Originally published in 1979, this text contains not only a critique of the then-incipient medical practices that institutionalize transsexuality but also an indictment of male-to-female (MTF) transsexuals themselves for their alleged appropriation of women's identities and bodies. Reading MTF transsexuality as another way for men to make women their property and to dictate gender norms, Raymond launches a critique of patriarchal psychiatry and of MTF transsexuals as perverse patriarchs. She uses what she sees as the contrast between gender and other social hierarchies,

including race, age, and class, to make her political critique. Transsexuals, she claims, are anomalous in relying on a psychiatric diagnosis to explain their gender identity conflicts. For those dissatisfied with their raced, aging, or impoverished status, it is much more evident that what is required is not personal transformation to satisfy the white, young, rich individual within but, instead, political action to end oppressive taxonomies or inequalities. She asks, "Does a Black person who wants to be white suffer from the 'disease' of being a 'transracial'?" and claims, "there is no demand for transracial medical intervention precisely *because* most Blacks recognize that it is their society, not their skin, that needs changing."¹⁴

A second example: the Michigan Womyn's Music Festival has a policy of allowing only "womyn-born womyn" onto its land, and MTF transgendered people are officially barred from entering the festival. In order to avoid masculine women being challenged on their gender, however, the organizers have a "don't ask, don't tell" policy that allows some MTFs who are able and willing to "pass" as genetic women to attend. Bonnie Morris, in her adulatory book *Eden Built by Eves*, vacillates between perspectives but ultimately opposes the inclusion of MTF transsexuals in the Michigan Womyn's Music Festival, arguing that "the celebration of female life and energy that is festival culture seems mocked by the inclusion of men who have *selected* female identity; they are not, to use Alix Dobkin's phrase, *survivors of girlhood*." Ruefully citing lesbian activism in support of transinclusion, Morris asks rhetorically, "Is it not possible for there to be one event, one annual festival, intended for women born female? One does not see any 'transracial' persons demanding entry to Michigan's Womyn of Color Sanctuary. But this analogy angers some activists."¹⁵ Here the section trails off; Morris is apparently unwilling to explore why the analogy might deserve a critical response and, much like Raymond, is content to let her rhetorical version of the transracial analogy stand on its implicit merits.

Both Raymond and Morris are working in a radical feminist tradition hostile to the institutions of transsexuality (and to MTF transsexuals themselves). In particular, they oppose the idea that an MTF transsexual can ever really "count" as a woman, including for the purpose of defining and defending the boundaries of women-only spaces; in their minds, then, MTFs are really only "passing" as women. How this claim is parsed within feminist politics and debates about the nature of women's shared identity is a complex question I discuss elsewhere.¹⁶ However, the abbreviated invocation of the transracial analogy in these contexts has the rhetorical effect of dismissing transsexuals as capricious or appropriative, without doing the political theoretical work of explaining why changing race and changing sex are relevantly different or similar for the ethical purposes at hand. In this respect, the texts fit well with Cass Sunstein's observation that most cases of analogical reasoning contain "an unarticulated supplemental judgment" that is necessary to make the analogy but not explicitly defended.¹⁷ In this case, the judgment is that race and sex are analogous for the purposes of comparing the motivations and politics of individuals who change their identities—a comparison also based on false claims (such as that there are no medicalized interventions on racial identity) and dubious inferences about individual behavior (that the acceptance or refusal of transition is based on transparent political evaluation of its benefits and drawbacks).

In a far more nuanced treatment of the analogy, third, Christine Overall seeks to make some unarticulated judgments explicit by exploring the if-then statement, “if transsexual surgery is morally acceptable... then transracial surgery should be morally acceptable.” Addressing those “inclined to accept the antecedent and reject the consequent,” Overall presents and then argues against eight possible reasons for the ethical rejection of transracial surgery (which she suggests is at present perhaps hypothetical, with the familiar exception of Michael Jackson).¹⁸ In effect, she is arguing the inverse of the position that Raymond and Morris imply: the latter suggests that because “transracial” would *not* be considered an intelligible or ethical subject-position, “transsexual” should be subject to the same political critique. Overall, by contrast, argues that if feminists in particular *accept* transsexual body modification, then we must in the interests of consistency endorse embodied race change (with whatever similar justifications).

Despite their evident political differences, both positions incorporate the claim—implicitly in the cases of Raymond and Morris—that sex and race are analogues. This assumption, however, operates at a high level of generality: “Either both sex and race are inherent fixed characteristics, or, more plausibly, both are socially constructed and socially acquired or ascribed,” writes Overall.¹⁹ The latter is a widely accepted claim among feminists, certainly, but the precise nature of the construction, acquisition, or ascription in question might be different in the two cases. In other words, both race and sex are constructed, but are they constructed in the same way? Overall’s work is admirably clear in anticipating and rejecting potential arguments for treating transracialism from transsexuality, yet she offers no positive account of the ways in which race and sex are the same kinds of identity categories for the purposes of making a *transition*. She tends to divorce race and sex from their discursive locations and histories, whereas location and history, I argue, set up different possibilities for the subject seeking to change her embodied identity. Overall’s argument operates on the basis of, a number of hypotheticals: for example, “physical identities are changeable; thus, transsexuals seek to change their public physical identity in crucial ways. “(Some regard themselves as ‘always already’ having the identity with which they aspire to make their physical body congruent.) The same would be possible for the transracialist.”²⁰ Would it? This argument needs to be made with some attention paid to the actual institutions engaged in racial body modification and the ideologies of racial difference on which they draw.

A corollary of the hypothetical voice is an approach that treats history as irrelevant to ethics. For example, Overall bases her ethical argument on the premise that “it is hard to see how the transracial case would be different from transsexual medical interventions, except for the fact that there is a history of ‘sex change’ surgery but not yet for ‘race change’ surgery.”²¹ This “except,” then, erases more contextualized approaches to understanding sex and race, as well as the implications such approaches might have for ethical thinking. Yet to the extent that the creation of particular subjectivities is a necessarily historical process, in which certain possibilities become sedimented by years of social practice, sex and race have emerged looking rather different. What possibilities, then, have been worked into the discourses political philosophers thinking about transrace and transsex have inherited? When we talk about changing sex or race, what do—or could—we mean?

Changing Race

"Race is socially constructed," claims virtually every philosopher writing on racial identity—by which they usually mean that there are no necessary or sufficient physical criteria (especially genetic criteria) that can determine an individual's membership in a racial category.²² Instead, the somewhat diverse taxonomies of race that western countries have inherited are contingent on ideologies developed in a colonial age. Claims about popular understandings of racial membership must be located in a context (and my context in this essay is contemporary North America), for the rules of race change as the national, cultural, and historical milieu changes. For reasons beyond the scope of this article, the thesis of the social construction of race seems to have had relatively little impact on folk beliefs about how racial identity works or on the power of racism. Thus, considering what it would mean to "change race" is a question that operates on different levels: philosophers of race are likely to think about this in ways that are significantly different from more widely shared intellectual inheritances. Let me, then, trace three North American contexts in which an individual might be said to change race: the legal context (where a specific jurisdiction's rule-governed norms for determining race are in play), the social context (where intersubjective perceptions of affiliation, community, and self-identification operate), and the context of body modification (where physical racial signifiers matter). My goal is to show how beliefs about the kind of thing race *is* shape the possibilities for race change. In particular, I show that the belief that an individual's racial identity derives from her biological ancestors undermines the possibility of changing race, in ways that contrast with sex-gender.

In jurisdictions where individuals are assigned to a racial-ethnic category (a practice now much less widespread than the ubiquitous assignment of legal sex), these assignments are often contested by individuals who feel an "error" has been made, resulting in a legal change of race. In the notorious 1982 Phipps case, Susie Guillory Phipps applied to the state of Louisiana to have the racial classification of her birth records (which labeled her "black" on the basis of one or more African great-great-great-grandparents) changed to white. Although she lost her case, the law was overturned, ironically leaving behind the even more stringent "one-drop rule," on the basis of which everyone with *any* African ancestry at all is black.²³ Examples like this one are the darlings of the critical race literature, showing the sometimes absurd lengths that racial states will go to in order to maintain a semblance of coherence for legal race classifications (and their segregationist implications). Within these legal frameworks race is explicitly and uniformly tied to ancestry: the "race" of any particular individual is derived from the racial classification of her forebears (in accordance with different rules in different jurisdictions, to be sure), and hence changing race requires an inquiry into family history to ascertain whether the rules have been correctly applied in the particular case.

Second, changing one's race can also sometimes arguably be achieved by moving in or out of relationships, neighborhoods, social class groups, or cultural practices, affecting one's perception by others and one's sense of oneself. Think of the famous

English *voyageur* Archibald Belaney who “went native” and lived for many years as “Grey Owl” in the northern Canadian wilderness, becoming a native icon invariably photographed in aboriginal garb, or of Philip Roth’s character Coleman Silk—a light-skinned African American man who for most of his life passes as Jewish. To make a wholesale transition in this way requires a more radical divorce from a differently racial (or ethnic) past. Linda López McAlister, in “My Grandmother’s Passing,” tells the gripping story of her Mexican American grandmother’s lifelong struggle to pass as an Anglo lady. Born María Velarde in a Texas border town, Mary Douglas (as she became known) married a wealthy Anglo and spent the last fifty years of her life in an entirely white milieu. Yet, McAlister points out, her grandmother did not successfully pass as Anglo due to her accented English and dark skin—but she apparently thought she did. Thus, when McAlister describes her to a friend as “Mexican,” her grandmother is so offended that she never speaks to her again: “my unpardonable sin was to reveal what she believed was a secret, even though it was not, thereby outing her, even though she wasn’t really passing, except in her own mind.”²⁴

Notice that McAlister uses the language of “passing” in telling this story, which she distinguishes from identity transition: “To pass implies that you are successfully fooling people into believing that you are something you are not. But there is a world of difference between successful passing and *being* the new identity. For one’s identity actually to change you have to go beyond successful passing and become someone different from who you were.”²⁵ For her grandmother’s ethnic identity actually to change, McAlister suggests, she would have to have complete amnesia for her language and culture of origin. In fact, on McAlister’s own account, both Archie Belaney/Grey Owl and María Velarde/Mary Douglas are more properly described as passing than as individuals who have changed race, because one cannot change one’s family of origin or one’s ancestors—although one can, of course, disavow them. Racial identity is in these social contexts, too, commonly understood as *narrative*: my race does not exist only in the moment but depends on my heritage, which will be scrutinized if my racial identity comes under question.

Indeed, passing is a phenomenon so central to the history of race that it is constitutive of racial meanings and hence the possibility of race changes. Anyone who attempts a race change is vulnerable to the charge that she is trying to pass, no matter what her avowed intentions are. This observation makes Overall’s circumscription of her argument question-begging: “I am not concerned here with the phenomenon of passing. . . . Nor am I interested in the phenomenon of compulsory assimilation, in which social pressures force individuals, through self-presentation to appear to become members of another race, whether they want to or not.”²⁶ Transracialism, I suggest, cannot be understood outside the historical frame in which racial crossing has typically been a matter of political expediency or survival, any more than changing one’s sex can be understood apart from the apparatus of transsexuality, which, as I argue, in turn mitigates (even if it does not dispel) the specter of gendered passing.

Heritage and morphology thus interact in complex ways to capture racial meanings. Legal racial reclassification is usually only available to a certain subset of phenotypically ambiguous individuals—the suitably “mixed” mixed-race child, or the

very light-skinned African American, for example. Had Susie Phipps had exactly the same ancestors, but through a trick of the gene pool not *looked* white, she would have had a weaker legal case. If "transracialism" simply means changing one's *legal* race, then there are numerous precedents; but while these say something about the application of rules of inheritance to particular cases, they do not imply that legal "race change" is open to anyone who cares to pursue it. Similarly, the social negotiation of racial identity is circumscribed—although not entirely dictated—by the body's visual cues. Mary Douglas was not entirely convincing in part because of her dark skin, while Grey Owl apparently worked hard with dyes to keep his hair black and his skin red. These visual cues, in turn, are not independent of racial hierarchy (and the history of passing): because whiteness maintains the privilege of neutrality, the pale-skinned can in theory have almost any mixed heritage, while nonwhite markers tend to overdetermine racial reception. This explains why Mary Douglas's appearance contributed to her being an unconvincing Anglo, while her granddaughter, whose "skin is white, not olive," can exercise greater control over whether she is perceived as all-white or part-Chicana.²⁷ Thus, the individual work of changing one's intersubjective recognition depends on a complex combination of self-presentation, social context, and embodiment. A certain amount can be achieved without changes to the flesh, and for some individuals noncorporeal markers may be enough. For others, however, the characteristics of a racialized body will tend to overdetermine identity, whatever other changes they make.

Third, then, people do (despite Raymond's and Overall's different skepticisms on this point) inflect their race through changes to their bodies. Most obviously, there are many cosmetic modifications—from hair-straightening treatments, to rhinoplasty, to eyelid surgery, to skin-lightening creams. Stated motivations for choosing these procedures, as things stand, rarely include "I want to become truly white" (or even, "I've always felt I was a white person trapped in a person of color's body"). Such claims are somewhat implausible, first, as I have shown, because race is taken to be *inherited* in a way that sex is not. The claim that "I've always known I was really white inside" is unpersuasive in part because it implicates others; if one's immediate forebears are not white, the claim risks being unintelligible. In part as a consequence, second, this ontology does not have an institutional psychiatric apparatus behind it. With race inhering *both* in the body and in ancestry, and transracialism lacking a diagnostic mechanism, the marketing of race-altering body modifications cannot play to individual essence to the extent that sex change can.

On the contrary, purveyors of racialized body modifications must seek to undermine the notion that making oneself look less like other members of one's racial group (including, perhaps, one's biological family) is disloyal. Products and surgeries must be advertised to attract appropriate consumers; having drawn in their customers, vendors must then actively deny that making use of their services constitutes race treachery. The surgical rhetoric uses bland counterassertion even when confronted with procedures to transform characteristics that are only incongruent if a racial identity itself is aesthetically illegitimate.²⁸ Promotional information for Asian eyelid surgery, for example, rejects the claim that it will westernize the surgical candidate. Instead, surgeons claim, the creation of a double eyelid crease is intended

to make the eye more “objectively” attractive, or more like other, more attractive Asian eyes, to improve the “overall appearance” or “harmony and balance” of the face, or even to make it easier for women to apply eye makeup.²⁹ Those who seek out an “ethnic” nose job are represented not as whitening their image but as seeking to correct malproportioned features and express their individuality;³⁰ cosmetic surgeons sell the procedures with talk of “enhancing ethnic beauty” rather than creating Caucasian uniformity; advertising for skin-lightening creams mostly focuses on its success in treating “patchy” pigmentation or unsightly “age spots,” despite the fact that many products also come in “whole body” formulations.³¹ The popular commodification of racially inflected body modifications often rests on the ideology of diverse individual self-expression rather than (as with sex change) on ideologies of psychological identity.

There is actually remarkably little contemporary research that delves more deeply into the complex motivations of people of color who elect to change their appearance along what might be thought of as racialized lines, although race is central to the history of aesthetic surgery.³² Individuals who undergo cosmetic procedures have diverse rationales, and it is perhaps a conceit—or a projection—of a white interpretive stance to think that all body modifications undertaken by people of color are motivated exclusively by a desire to look white.³³ In this light, Overall’s remark—echoed in many other analyses—that “Michael Jackson... has had surgery on his cheekbones, eyes, chin, and nose in order to make his face less ‘Black’-looking, and more ‘white’,” attributes individual motivation in the absence of any real inquiry.³⁴ We assume that Jackson’s transformations are in the service of whiteness because our cultural imagination is so systematically organized around the desirability of whiteness that we cannot imagine any other psychology for him. Race is defined through ancestry; racial transformation is commonly read as passing; hence the body modifications of individual people of color can only exemplify that they are dupes of whiteness. The ideology of individuality comes into play, therefore, to deflate the charge of racial treachery or masquerade when a product or procedure implicated with racial morphology is being sold.

Changing Sex

The possibilities for and constraints on changing race could be almost infinitely detailed through historical and contextual work; here I have just shown how three key moments rely on appeals to the genealogy of the individual to establish racial essence. How are the possibilities for changing sex—gender similar or different? First, unlike race, all western jurisdictions insist that their citizens have a legal sex. Almost all official documents—driver’s licenses, passports, birth certificates, and so on—bear the information “male” or “female,” and this has consequences for other legal rights (in particular, in most jurisdictions, the right to marry). To change one’s legal sex requires medical documentation that the appellant is “really” the sex they aspire, legally, to be. The force of this “really” is not, as with race, an inquiry into whether the rules of inheritance have been correctly applied but, rather, an investigation into

the nature of the individual, especially the nature of her or his sexed body. Although successful legal race change entails correcting a mistake without altering the individual, successful legal sex change requires medical intervention to make the person's body match the label.

Like race, one can shift one's gender by changing social context or self-presentation. Dressing differently, moving differently, using (or not using) cosmetics, adopting certain friends or joining certain communities, can all have consequences for gender identity. This can be a matter of degree: if a Chicana can sometimes seem more Anglo, then adopting a butch haircut and wearing dress pants and a button-down shirt can make a woman seem less feminine (if not quite a man). Gender offers a wide range within the two categories man and woman, and everyone will at some point (whether deliberately or not) incrementally shift their gender identity. Again, there is a rich history of passing here that partly constitutes the meaning of such transitions, and traditions of gendered performance (in the Butlerian and literal senses) inform our reception of gender change. Some transgendered persons do cross to the "other" gender, or blur the lines between woman and man, without ever undertaking surgery or hormone treatments.

Moving not just within a gender category but decisively between woman and man, however, including through transforming the sexed body, engages a complex institutional medical apparatus of psychiatrists, endocrinologists, and surgeons engaged in the business of diagnosing transsexuals in North America with Gender Identity Disorder (GID) and effecting sex change—including legal sex change. Exactly which medical procedures are required to effect the latter is often legally vague (especially in the case of female-to-male [FTM] transsexuals).³⁵ Sex chromosome patterns cannot be altered, but with certain measures, (including vaginoplasty, phalloplasty, testicular implants, mastectomy or breast implants, facial feminization surgery, hormones, or electrolysis) all male and masculine persons can be made (more) female and feminine, and vice versa. (Of course, vice versa is a rather different matter, as the current results for surgical phalloplasty [construction of a penis] are poor, and many FTMs forego genital surgery. On the other hand, ironically, FTMs are often seen by others to be more convincing men than MTFs are as women.) An abundance of autobiography, memoir, and documentary attests to this experience and aspiration, which has come to structure many transsexual lives and has entered into popular understandings of gendered possibilities. Any individual with the means may opt to change their racialized body for whatever reasons they choose, and mounting a legal challenge to one's racial classification is open to anyone (although, as I have suggested, unlikely to succeed if the right ancestral and phenotypical conditions are not met). However, the medical apparatus of sex change (the precondition for legal reclassification) is available only to certain kinds of person—those who suffer from the condition of GID.³⁶

This is the most noteworthy contrast between the histories of race and sex: transracialism is not (yet) a mental disorder. GID is in the *Diagnostic and Statistical Manual (DSM)* of the American Psychiatric Association (4th edition)—the bible of categories of psychopathology that uses diagnostic criteria to define the mentally

disordered (and to make judgments about health insurance coverage and eligibility, and suitability for treatments, including sex reassignment surgery):

There are two components of Gender Identity Disorder, both of which must be present to make the diagnosis. There must be evidence of a strong and persistent cross-gender identification, which is the desire to be, or the insistence that one is, of the other sex (Criterion A). This cross-gender identification must not merely be a desire for any perceived cultural advantages of being the other sex. There must also be evidence of persistent discomfort about one's assigned sex or a sense of inappropriateness in the gender role of that sex (Criterion B).³⁷

The diagnostic criteria continue at some length, explaining typical behaviors and desires of girls, boys, adolescents, and adults with GID. The picture that holds this diagnosis captive is that of an essential difference in certain persons, biological in origin or nurtured by childhood relationships (or both), but nonetheless having its locus and causal origin in the individual, who then interacts with (rather than being made possible by) her society.³⁸ Because one's identity as a man or woman (or boy or girl) is, within the essentialist framework that organizes dominant views of GID, conceptually separable from anyone else's gender, a transition can be made without a necessary contradiction with others' identities. More specifically, one's identity as a boy or girl is not taken to mimic one's ancestors—I am not a woman just because my mother is a woman. In terms of the actual content of gendered relationships, of course, one's personal history (e.g., the kind of gendered person my mother is) is deeply significant to the kind of woman or man one will become. As I and many others have argued, gender *is* narrative and relational rather than essential, and hence changing gender often does challenge the identity of others—we just lack a vernacular for describing the phenomenon.³⁹ However, the history of biological essentialism with regard to individual sexed character exerts a powerful force here, in ways that avoid attention being drawn to the social context of gender as a relation rather than a substance. Susie Phipps was required to assemble extensive information about her ancestors in order to make her case that she was really white, but the person who seeks to change legal sex must show to the state's satisfaction that the new classification is appropriate to his *individual* psychological and physical condition.

Gender Identity Disorder thus has no obvious equivalent in the context of race: one cannot be diagnosed with any mental disorder specifically pertaining to confusion about one's racial identity. However, in arguing that race and sex have similar genealogies, Ladelle McWhorter suggests that for race there exists “the theoretical possibility . . . that deviant racial identities could be altered by scientific means.”⁴⁰ She has in mind nineteenth- and twentieth-century eugenic public policies that aimed to bring “primitive” racial groups up to the developmental level of Europeans—the residential school system for First Nations children, for example. Science has been less preoccupied with changing deviant racial identity in individuals than in populations (whereas both sexuality and gender have, historically, been the targets of normalization at the level of personal identity). Today, an ongoing media skirmish has mooted the idea that *racism* in its more virulent forms constitutes a mental illness

and deserves a place in the *DSM*.⁴¹ Although media treatments are critical—typically offering “for and against” debates—the growing plausibility of the idea that racism could be a mental illness marks, to my mind, the conceptual crawl of psychopathological accounts of human experience from sex–gender and sexuality, where the discourse is well established, to race, where the primary focus has hitherto been control of populations.

Why has this trend not gained more rapid purchase? To understand *why* transsexuality stands out as deeply connected to disease models, we need both a broader understanding of the history of gender and sexuality and a careful evaluation of how that history confronts individuals. “Sex,” “gender” (and “sexual orientation”) have come to be thought of as core ontological differences attaching to individuals, organized through binary schema. One simply *is*, essentially, either male or female, and concomitantly man or woman (and heterosexual or homosexual, depending on the relation of sexual object choice to biological sex). This schema, while in some moments resistant to any crossing of categories, has a history that simultaneously creates conditions of possibility for “mistaken gender” understood as a biological or pathological phenomenon. As Toril Moi recounts, “the distinction between sex and gender emerged from a concern with individual identity. At its inception [in the 1950s and 1960s], the distinction medicalizes ‘sex’ and turns ‘gender’ into a purely psychological category.”⁴² Indeed, the way that changing sex has been institutionalized in the postwar western world has, I would argue, come to be constitutive of what sex *simpliciter* means, just as the rather longer history of passing constitutes race. Combine this historical account with the still-pervasive dualism that construes sexed bodies as inert machines, animated by the gendered mind, and it becomes clear how a quest for an authentic identity could lead to changing the individual’s body.

Despite this institutionally powerful history, there is no simple mapping between an internalization of the GID diagnosis and the desire to change one’s sex. Nor is it the case that GID diagnosis is supported by all transgendered people (some want to get rid of the category, drawing the analogy with eliminating homosexuality as a mental illness⁴³.) Recent work on the history of transsexuality reveals the increasingly powerful grip of medical experts on discourses of sex and gender in the latter half of the twentieth century; but it also exposes how this labeling from above managed to repress an extraordinary diversity of autobiographical accounts and political organizing by loosely grouped gender nonconformists, some of whom agreed with aspects of medical opinion, but others of whom were entirely opposed to the idea of a mental illness diagnosed by gender deviance.⁴⁴ Arguably, it has only been since the 1990s that an organized transgender movement has generated sufficient communal resistance to enable a shifting of the balance of power back toward politicized accounts of gender nonconformity. Importantly, a useful rhetoric in this move has been that of the right to individual self-expression—the same discourse that often rationalizes racial body modification. For transgendered people, the right to individual self-expression without diagnostic overdetermination transgresses an established norm, enabling a kind of resistance that, paradoxically, the norm itself may have made possible. In the context of racial body modification, the language-game of individual self-expression, however, has been thoroughly (albeit contingently) colonized by normalizing

practices—expressing one’s true self is almost always achieved through conformity, in other words.

Finally, once GID became established—a process at once culture-driven and the local decision of a small coterie of psychiatric experts—it produced its own subjects. Once a disorder is in place, complete with diagnostic criteria, any individual who wants the clinical responses the disorder commands—for whatever reason—has a motivation to conform to the criteria. This is a well-known phenomenon among adult transsexuals in the case of GID, who read medical literature and use social networks to find out what kind of self-descriptions and behaviors are required to gain access to hormones, surgeries, or services. Quite disparate experiences and aspirations are thus erased and homogenized into a single category.⁴⁵ And there are powerful social motivations for participating in medical procedures that will make sexed bodies more or less legible to others, even if one is critical of GID: while many mixed race people often face a certain level of intrusive curiosity or skepticism about their racial identity, gender-ambiguous individuals face extraordinary levels of social discomfort and aggression. Gender limbo seems almost uninhabitable, while a consistent identity as a gender at odds with one’s sex requires extraordinarily careful self-presentation and interaction.

The Ethics of Self-Transformation

This exercise in comparing and contrasting possibilities for race and sex change reveals the complexity and distinctiveness of the genealogies of race and sex themselves. It illustrates that both categories are undergirded by a plethora of sometimes contradictory ontological assumptions, and they maintain their social meaning not because they are philosophically coherent labels that fit with unified political perspectives but because they are slippery, ad hoc, and available to serve various rhetorical purposes, depending on social contexts that are themselves in transition. It also undercuts one element of feminist handling of the analogy thesis—namely, the suggestion (implied or explicit) that race and sex change can be considered equivalent without further argument, including for ethical purposes.

None of us is at liberty to become any kind of person we want, and to align oneself with a particular identity formation is a necessarily intersubjective activity. Especially in cases of labels such as “woman” or “black,” there will often be a larger tension between what Ian Hacking calls “the vector of labeling from above” and “the vector of the autonomous behavior of the person so labeled.”⁴⁶ If we think that what we expect of agents, ethically speaking, is enabled or constrained by what it is actually possible for them to be and do (and here I just assert that it should be), then any discussion of the ethics of gender and racial identity must be sensitive to the range of actually available possibilities for sustaining and transforming oneself. The actions of individuals, now and in the future, will be constitutive of new norms of racial and gendered identity. The institutions and practices of transformation I have alluded to create a certain room for maneuver between overdetermination and individual freedom, oppression and resistance, opacity to oneself and transparency.

In the case of race change, a language of fidelity to one's heritage vies with popular insistence on individual autonomy, which, in turn, mystifies conformity to norms of racialized beauty. Thus, for example, Michael Jackson—a powerful symbol, but a very diffident spokesman for his own ethics of the self—is caught between these discourses. He is African American and expected to perform his allegiance to his black roots and to black culture; he is making himself over into his own aesthetic vision, a unique image that just happens to make him look more white than black. None of these discourses is unproblematic, yet, paradoxically, it is the unresolved conflict between them that may function to preserve a conceptual space for ethical engagement. In the absence of a single commonsensical (and ideological) explanation for why someone would change their racialized body as Jackson has, the very ambiguity of the act presses us toward investigating individual motivations and relations of power.

In the case of sex change, medical discourse has a historically contingent but nonetheless forceful hegemony that posits wanting to change sex as a disease of the individual, not a cultural condition, best explained by features inhering in individuals rather than by intersubjective accounts and reference to structures of power. Radical feminists have rightly been quick to challenge this model, as Raymond and Morris both did in my earlier examples. These critics, however, push too hard in the opposite direction: those who change their sex (and thereby deny their XX or XY heritage, so to speak) are either traitorous or appropriative. Their motivations are entirely in the realm of the political and can never be justified in feminist terms. But this position inverts rather than challenges the very same problematic attitude to the individual that it sought to undercut. On a particular psychiatric view, those who suffer from GID are victims pulled along by an inherent mental disorder; but a contrary feminist position risks portraying them as Machiavellian architects of the gender landscape. The rhetorical deployment of the transracial analogy against transsexuals thus tends to attribute political naivete or (self-)deception to those who seek to change sex (and equally problematically praises those who maintain a stable racial identity for their ability to distinguish individual capitulation from challenges to systemic oppression).

Few, however, would claim that transsexuals are part of a systemic conspiracy to maintain sex–gender dichotomies, or that no one who has changed sex is aware of the oppressive consequences of sex–gender systems. Indeed, some of the most powerful political writings on the constraints of western gender systems on individual freedoms come from transgendered commentators.⁴⁷ It seems implausible to suggest that anyone would go as far as to change sex only because they self-consciously aspire to appropriate or benefit from a novel gender identity, while people of color knowingly and unanimously resist race change because they share an analysis of its role in sustaining racism. Furthermore, my examples suggest that many people do disavow (parts of) their racial heritage and change their racial reception to find or accommodate themselves to a new niche in a racialized and racist world.

Instead of attributions of transparency and equivalence, feminist thinkers need to pay closer attention to context in making ethical diagnoses. Only a fully contextualized account that recognizes the different ontologies of race and sex will be adequate to the task of ethically evaluating race and sex change, including by drawing the kinds of policy conclusions that Overall articulates. Perhaps more important, this argument

points toward a richer ethics that reflects on the decisions *all* gendered and racialized subjects with commitments to feminist politics face about self-presentation and transformation from within a space marked out by full appreciation of our conditions of possibility.

NOTES

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1. Cressida J. Heyes, *Self-Transformations: Foucault, Ethics, and Normalized Bodies* (New York: Oxford University Press, 2007)

2. The categories “trans surgeries” and “cosmetic surgeries” are both capacious and internally diverse, which contributes to the difficulty of theorizing this particular analogy. Sex reassignment surgery (actually a set of procedures that may include vaginoplasty, labiaplasty, orchiectomy, clitoroplasty, etc. in MTFs, and phalloplasty, inserting testicular implants, or metoidoplasty for FTMs) is the archetype for trans surgery, but the category also includes breast augmentation, tracheal shave, facial feminization, and male chest construction. Cosmetic surgery is a contested term that can include breast augmentation, facelift, rhinoplasty, breast reduction, liposuction, and so on.

3. Critics also charge that cosmetic surgery is all these things and that trans surgeries are just the same, as well as various other kinds of comparisons or contrasts, but the most common claim, and the one I focus on, is that trans surgeries and cosmetic surgeries are disanalogous along these axes.

4. David Valentine, *Imagining Transgender: An Ethnography of a Category* (Durham, N.C.: Duke University Press, 2007).

5. Viviane Namaste, *Sex Change, Social Change: Reflections on Identity, Institutions, and Imperialism* (Toronto: Women’s Press, 2005).

6. The World Professional Association for Transgender Health (WPATH, formerly known as the Harry Benjamin International Gender Dysphoria Association, Inc. [HBIGDA]) is a professional organization devoted to the understanding and treatment of so-called gender identity disorders.

7. I don’t mean to suggest here that the *only* reason anyone might have for endorsing a psychiatric model is strategic. Clearly, many experts endorse it because they believe it is the best scientific explanation for transsexuality, and many transsexual people endorse it because it offers a plausible rationale for their lived experience.

8. Eve Kosofsky Sedgwick, *Epistemology of the Closet* (Berkeley: University of California Press, 1990, 40–44). Here there is a possible comparison with debates in feminist theory around so-called strategic essentialism, as well as with debates about whether biomedicalizing mental disorders in general might reduce stigma. For her insights into the latter that will form her doctoral dissertation project, I am grateful to Angela Thachuk.

9. Cisgender: identifying with a gender that matches one's initial assigned sex; someone who experiences hir gender as consonant with hir socially assigned gender. This increasingly popular term is backformed from "transgender," where "trans" means crossing or changing, while "cis" means the same as, on the same side as.

10. This usage of "ethical" clearly has roots in both existential and Foucauldian philosophy; it is not an ethics that takes a stand in relation to consequentialist or deontological ethical theories, although the questions raised in this essay have connections with virtue ethics.

11. The distinction between sex (biological maleness and femaleness) and gender (socially constructed masculinity and femininity) has no obvious analog in the case of race, where both embodiment and social role are captured by the same ambiguous term. In this essay, I follow popular usage and mostly talk about changing "sex" rather than "gender," although the kind of transformation I am discussing confounds the sex–gender distinction. Thus, I occasionally use the term "sex-gender" when I want to reinforce that both embodiments and intersubjective presentation are at stake. It also is worth noting a different elision between race (historically variable taxonomies that in contemporary North America typically include internally diverse categories such as white, black, Asian, Hispanic, and First Nations) and "ethnicity"—one's affiliation with a certain cultural or ancestral group not necessarily coterminous with race ("Irish American," "Jewish," "Vietnamese Canadian," etc.). Some ethnicities have, at various times, been thought of as races (e.g., Jews), while different ethnic groups have crossed between racial categories as their local status changes. In this essay, I use examples and arguments that capture popular understandings of "race" in contemporary North America, but the slipperiness of the concept again causes race sometimes to run into ethnicity.

12. The terms "race change" and "transracialism" also appear in a related literature that investigates the historical and contemporary phenomena associated with racial masquerade, mixing, and interculturality in the United States. See, for example, Susan Gubar's book *Racechanges: White Skin, Black Face in American Culture* (New York: Oxford University Press, 1997), and Leon E. Wynter. *American Skin: Pop Culture, Big Business, and the End of White America* (New York: Crown, 2002).

13. I use the term "genealogical" here in its Foucauldian sense, to imply a critical history of a particular identity formation that shows the contingency of our current self-understandings and encourages us to "think ourselves differently."

14. Janice Raymond, *The Transsexual Empire: The Making of the She-Male* (New York: Teacher's Press, 1994 [1979]), xvi; emphasis in original. For an extended consideration of Raymond and other feminist accounts of transsexuality, see Cressida J. Heyes, "Feminist Solidarity after Queer Theory: The Case of Transgender," *Signs* 28, no. 4 (2003): 1093–1120.

15. Bonnie Morris, *Eden Built by Eves: The Culture of Women's Music Festivals* (Los Angeles: Alyson, 1999), 173 (emphasis in original) and 173–74.

16. Heyes, "Feminist Solidarity."

17. Cass Sunstein, "Analogical Reasoning," in *Legal Reasoning and Political Conflict* (Oxford: Oxford University Press, 1996), 73.

18. Christine Overall, "Transsexualism and 'Transracialism'." *Social Philosophy Today* 20, no. 3 (2004): 184 and 185.

19. *Ibid.*, 185–86.

20. *Ibid.*, 186.

21. *Ibid.*, 190.
22. This orthodoxy deserves more parsing than I can manage here; it has also been challenged in recent debates. See the web forum on “Is Race Real?” at <http://raceandgenomics.ssrc.org/> (accessed February 11, 2006).
23. As summarized in Adrian Piper, “Passing for Black, Passing for White,” in *Passing and the Fictions of Identity*, ed. Elaine K. Ginsberg (Durham, N.C.: Duke University Press, 1996), 251.
24. Linda López McAlister, “My Grandmother’s Passing,” in *Whiteness: Feminist Philosophical Reflections*, ed. Chris Cuomo and Kim Q. Hall (Lanham, Md.: Rowman and Littlefield, 1999), 23.
25. *Ibid.*, 24.
26. Overall, “Transsexualism and ‘Transracialism,’” 184.
27. López McAlister, “My Grandmother’s Passing,” 21.
28. Eugenia Kaw, “‘Opening’ Faces: The Politics of Cosmetic Surgery and Asian American Women,” in *Many Mirrors: Body Image and Social Relations*, ed. Nicole Sault (New Brunswick, N.J.: Rutgers University Press, 1994), 241–65.
29. Quoted from the “Frequently Asked Questions” page of the website of one of the most prominent West Coast plastic surgeons performing Asian blepharoplasty: <http://www.asianeyelid.com/> (accessed May 10, 2005).
30. Diana Dull and Candace West, “Accounting for Cosmetic Surgery: The Accomplishment of Gender,” *Social Problems* 38, no. 1 (1991): 59.
31. Amina Mire, “Skin-Bleaching, Poison, Beauty, Power, and the Politics of the Colour Line,” *Resources for Feminist Research* 28, no. 3/4 (2001): 13–38.
32. For example, Sarah Lucile Eichberg, “Bodies of Work: Cosmetic Surgery and the Gendered Whitening of America,” Ph.D. diss., University of Pennsylvania, 2000; Eugenia Kaw, “Medicalization of Racial Features: Asian American Women and Cosmetic Surgery,” *Medical Anthropology Quarterly* 7, no. 1 (1993): 74–89; Kaw, “‘Opening’ Faces”; Sander L. Gilman, *Creating Beauty to Cure the Soul: Race and Psychology in the Shaping of Aesthetic Surgery* (Durham, N.C.: Duke University Press, 1997).
33. Kathleen Zane, “Reflections on a Yellow Eye: Asian I(Eye/)Cons and Cosmetic Surgery,” in *Talking Visions: Multicultural Feminism in a Transnational Age*, ed. Ella Shohat (Cambridge, Mass.: MIT Press, 1998), 164.
34. Overall, “Transsexualism and ‘Transracialism,’” 184.
35. Viviane K. Namaste, *Invisible Lives: The Erasure of Transsexual and Transgendered People* (Chicago: University of Chicago Press, 2000), 235–63.
36. It is possible to obtain sex-reassignment surgery (SRS) with minimal psychiatric evaluation if one is willing to travel (e.g., to Thailand) and to pay out of pocket, although all “reputable” surgeons will insist on a psychiatric diagnosis and letters of recommendation from other medical practitioners before performing genital surgeries.
37. American Psychiatric Association, *Diagnostic and Statistical Manual of Mental Disorders*, 4th ed. (Washington, D.C.: American Psychiatric Association, 2000), 576. The criteria do not explain how one might separate a cross-gender identification derived from “perceived cultural advantages of being the other sex” from any other kind, although this is surely a project that—even if one believes a priori that it is possible—requires extraordinary epistemic skill.

38. For a detailed critique of this diagnostic language, see Ellen K. Feder, "Disciplining the Family: The Case of Gender Identity Disorder," *Philosophical Studies* 85 (1997): 195–211; and Judith Butler, "Undiagnosing Gender," *Undoing Gender* (New York: Routledge, 2004), 75–101.

39. See Cressida J. Heyes, "Can There Be a Queer Politics of Recognition?" in *Recognition, Responsibility, and Rights: Feminist Ethics and Social Theory*, ed. Robin Fiore and Hilde Lindemann Nelson (Lanham, Md.: Rowman and Littlefield, 2003), 59–71.

40. Ladelle McWhorter, "Sex, Race, and Bio-Power: A Foucauldian Genealogy," *Hypatia* 19, no. 3 (2004): 48.

41. This story was pursued by ABC's *Nightline* in a 2001 documentary, in a 2004 episode of *Law and Order* when a defendant characterizes his racism as a mental illness to bypass a murder charge, and by Canadian TV news in 2003, among many other examples. For a psychiatric defense, see Alvin Poussaint, "They Hate. They Kill. Are They Insane?" *New York Times*, August 26, 1999.

42. Toril Moi, *What Is a Woman? And Other Essays* (Oxford: Oxford University Press, 1999), 21–22.

43. For example, Riki Ann Wilchins writes: "To get [sex-reassignment] surgery, you have to mount what I call an Insanity Defense. *I can't help myself, it's something deep inside me, I can't control it.* It's degrading. . . . In a civilized society, wanting what you want and getting help should not require you to accept a psychiatric diagnosis, produce a dog-and-pony show of your distress, and provide an identity to justify its realness" (Riki Ann Wilchins, in *Read My Lips: Sexual Subversion and the End of Gender* [Ithaca, N.Y.: Firebrand, 1997], 191–92). By contrast, Viviane Namaste argues against the "conservative" consequences of this position on the grounds that removing GID from the *DSM* will eliminate SRS from health insurance coverage (Viviane Namaste, "Addressing the Politics of Social Erasure: Making the Lives of Transsexual People Visible," interview in *New Socialist Magazine*, at <http://www.newsocialist.org/magazine/39/article04.html> (accessed February 14, 2006)).

44. Joanne Meyerowitz, *How Sex Changed: A History of Transsexuality in the United States* (Cambridge: Harvard University Press, 2002), chs. 6 and 7.

45. Namaste, *Invisible Lives*, 190–234.

46. Ian Hacking, "Making Up People," in *Reconstructing Individualism: Autonomy, Individuality, and the Self in Western Thought*, ed. Thomas C. Heller Morton Sosna, and David E. Wellbery. (Stanford, Calif.: Stanford University Press, 1986), 234.

47. For example, Kate Bornstein, *Gender Outlaw: On Men, Women, and the Rest of Us* (New York: Vintage, 1995), and Leslie Feinberg, *Trans Liberation: Beyond Pink and Blue* (Boston: Beacon, 1998).