Complicating Normal: How Trans People Simultaneously Challenge and Reproduce Heteronormativity

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Complicating Normal: How Trans People Simultaneously Challenge and Reproduce
Heteronormativity

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ABSTRACT

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This thesis examines the interactions between trans people and structural heteronormativity. Twenty-five in-depth interviews were conducted with self-identified trans people to assess how interviewees feel they’ve been affected by structural heteronormativity across the institutions of marriage, family, healthcare, education, and work. Interview questions further examined whether interviewees feel they challenge or reproduce structural heteronormativity. Analytic induction was used to analyze the interview data. Results demonstrate that all interviewees identify that they challenge structural heteronormativity and slightly more than half of interviewees identify that they reproduce structural heteronormativity. However, further analysis of the data suggests that some interviewees may challenge or reproduce heteronormativity at an individual level and had no effect or sometimes the opposite effect at the structural level. These findings were highly dependent on whether interviewees identify themselves as out or stealth as a trans person.

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CHAPTER 1: INTRODUCTION

Gender inequality is a ubiquitous and long standing phenomena experienced, to some degree, by all people. Inherent in the term inequality, there are implications of power and privilege which create a hierarchal order of gender. This hierarchy positions White, heterosexual men at the top and all others below, though their positions are dependent on intersections with gender, sexuality, race, and class. One of the key mechanisms for sustaining gender inequality is “heteronormativity.” Heteronormativity is the assumption of heterosexuality as what is normal within members of a given society (Warner, 1993). The expectation that everyone is heterosexual manifests itself in the institutionalization of heteronormativity. The structural implementation of laws and policies that delegitimize non-heterosexual behavior perpetuate inequalities between genders and sexualities in the United States.

Literature regarding the impact of heteronormativity has focused primarily on the perpetuation of inequalities between heterosexuals and lesbians, gays, bisexuals, and otherwise non-heterosexuals (LGBQ). LGBQ individuals are disadvantaged by the institutionalization of heteronormativity and struggle to challenge heterosexual privilege or create alternatives. Perhaps the most salient present example is of state laws which prohibit same-sex marriage. However, as a tool for understanding overall gender inequality, the concept of heteronormativity needs to be broadened to address the unique statuses of trans people. The term “trans” refers those who do not necessarily fit traditional constructs of sex and gender, but rather blend sex and gender to establish unique, transitional gender identities. This includes those who identify as a transsexual,
transvestite or cross dresser, genderqueer, or intersexed individuals. While the exact number of trans people is unknown, conservative estimates of the number of transsexuals living in the United States is between .25 and 1 percent of the population (HRC, 2007). This statistic, however, ignores others who may identify as trans who are not transsexuals.

Limited scholarly literature addressing the interactions between trans people and heteronormativity tend to limit their discussions to how trans people challenge heteronormativity. Fewer scholars discuss how trans people may reproduce heteronormativity as well. Trans people may reproduce heteronormativity by displaying typically feminine or masculine appearances or behaviors, especially without being open about their trans status. Trans people may also reproduce heteronormativity by identifying as heterosexual or constructing their stealth identity around upholding heterosexist standards of appearance.

Scholarly research on how trans people challenge heteronormativity is undoubtedly important to gender theory and gender inequality, because it outlines how the negative effects of heteronormativity lead to gender resistance and the potential for structural change. Equally important, I argue, is scholarly research on how trans people reproduce heteronormativity. This is an integral concept to gender theory, because trans people have typically been discussed as resistant to gender dichotomies. However, in many cases trans people do not wish to be gender resistant, but rather to be recognized and interacted with as their identified gender. Distancing themselves from their previous gender thus maintains gender inequality by reaffirming gender differences.
The purpose of my thesis is to contribute to our understanding of the role trans people play in the reduction or reproduction of gender inequality as related to challenging or reproducing heteronormativity. To do so, I begin with a review of the literature on gender performance and the institutionalization of heteronormativity. I examine the literature in the unique context of trans people. Trans people may challenge heteronormativity with their bodies by rejecting gender performance norms in terms of clothing, or through surgical procedures, or by rejecting the gender binary. Trans people may also challenge heteronormativity with their sexualities by identifying as non-heterosexual, by challenging notions of “typical heterosexuality”, or by expressing fluidity within sexuality categories. The performances of trans people occur within institutionalized heteronormativity. I am specifically interested in the roles government policies and societal norms play in the marriage, family, healthcare, education, and work of trans people.

My research questions are 1. What are the interactions between trans people and structural heteronormativity? And 2. How do trans people simultaneously challenge, as well as, reproduce heteronormativity? To answer these questions, I conducted 25 interviews with individuals who self-identified as trans. The semi-structured interviews ranged from 60 to 150 minutes in length and were structured around the following themes: identity (e.g. transitioning, passing, living as trans) and institutions where structural heteronormativity is common (e.g. marriage, family, healthcare, education, and work).
My results reaffirm the need to address trans issues within the broadened context of gender inequality. Trans people continue to struggle to be acknowledged and respected as members of the United States population and are often overlooked as viable research participants for sociological studies outside of gender resistance theories. My data illuminates how trans people self-identify and interact with structural heteronormativity. My contribution to the underrepresented body of scholarly literature on trans gives agency to the trans population and strengthens the growing body of sociological literature on heteronormativity.

In the following chapters, I first review relevant literatures in Chapter 2 including gender theory, trans identities, and heteronormativity. Next, in Chapter 3 I discuss my research methodology in detail and provide a description of my research sample. An overview of my interview data is given in the results Chapter 4. Chapter 5 provides the results of my content analysis of the data. Key findings demonstrate that interviewees felt they both challenged and reproduced structural heteronormativity, though these interactions were theorized to occur at both an individual and structural level. Findings also demonstrate that within the context of gender performance theory, interviewees may challenge or reproduce gender inequality. Finally, Chapter 6 concludes my thesis with a discussion of strengths and weaknesses of the study, scholarly contributions, and policy implications.
CHAPTER 2: THEORETICAL CONSIDERATIONS

This chapter reviews scholarly research relevant to my argument that trans people simultaneously challenge and reproduce heteronormativity. Building upon a theoretical framework of gender performance theory (West and Zimmerman, 1987; Butler, 1990), I first critically review the literature with attention to how the concepts relate to trans people. After laying the gender foundation, I review previous research on defining trans people. I argue that previous literature has grouped different trans identities as either biologically or socially constructed. This is followed by a description of different types of trans identities from both the biological and social perspectives. The second section of this chapter reviews literature regarding the institutionalization of heteronormativity within various organizations (marriage, family, healthcare, education and work) and how assumptions about heterosexuality may affect trans people. The third, and final, section of this chapter discusses how trans people navigate the heteronormative social world through passing and social interactions.

2.1 Theoretical Framework

When researching trans people, scholars must go beyond conventional notions of the “sex” and “gender” binaries. Scholarship on the social construction of gender is noted in Goffman’s *The Presentation of Self in Everyday Life*. Goffman (1959) uses the theatrical notion of performance to parallel how individuals present themselves in terms of cultural expectations. Adler and Adler (1987) continue this parallel and emphasize that if the performance is done well, the audience (society) will view the actor (individual) how they intended to be viewed. The theory of gender as a performance conducted
through social interaction was further developed by Butler who posited gender as a performance or “gender performativity” (Butler, 1990).

The biological term “sex” refers to genetic (XX) females and genetic (XY) males. Sociologists use the concept “gender” to reference how someone identifies (e.g. woman, man, or other) and subsequently, the associated behaviors of the identified gender (e.g. femininity, masculinity, androgyny, etc.) (Lorber, 1994). Dozier (2005) theorizes that biological sex and associated secondary sex characteristics are ways in which gender identity can be signified, though not the only ways.

West and Zimmerman (1987) argue that, in contrast to sex, gender is not something that defines an individual with a set of predetermined characteristics such as hormones or secondary sex characteristics. Rather, gender is how an individual identifies as a woman or man in social interaction using social cues. This concept is known as “doing gender” (West and Zimmerman, 1987). West and Zimmerman theorize that all people are always doing gender by demonstrating behaviors which signify masculinity or femininity (i.e. clothing, gestures, etc.). Because this is a constant interaction, West and Zimmerman argue that gender cannot not be done, because people are always delineating themselves from others through gendered behaviors, thus reaffirming the gender binary and the continued existence of gender inequality.

The trans community provided a major contribution to West and Zimmerman’s (1987) theories on gender as a performance as they cite the case of Agnes, a trans woman (Garfinkel, 1967). Sociologist, Harold Garfinkel, documented Agnes’ transition from a man to a woman, noting her extensive daily routines to appear undoubtedly as woman to
others (Rogers, 1992). When Agnes’ preparation and performance of femininity successfully allowed her to be perceived by others as woman, Garfinkel discussed this in terms of accomplishing gender or gender accomplishment (Garfinkel, 1967). Agnes’ story provided a substantial part of West and Zimmerman’s (1987) logic of doing gender.

Garfinkel (1967) and West and Zimmerman (1987) have since encountered critiques for positioning Agnes’ story as grounds for emphasizing gender differences and the innate desire to be perceived as either a man or a woman (Denzin, 1990; Connell, 2009). Connell (2009) reflecting on Agnes’ story as confirmation of doing gender should not be without an acknowledgement of the ways in which she challenges gender as a trans woman. Deutsch (2007) criticized West and Zimmerman for giving the impression that gender inequality will cannot be mitigated. By always signifying that one is either a man or a woman, as West and Zimmerman (1987) conceived, people, in effect, are always reaffirming gender differences and gender inequality.

Deutsch, in contrast, emphasized that social interactions do not require that a person transmit their gender without question and argued that interactions can become less gendered and can subsequently produce changes which serve to mitigate gender inequality. Take the workplace for example. Workplaces are inherently gendered, with certain fields identified as typically masculine or feminine (Kanter, 1977; Williams, 1989). Constructionists would argue that women entering a typically masculine field will “feminize” and “devalue” the field, thus reproducing gender differences (Deutsch, 2007: 118). In contrast, Deutsch argues that women entering a typically masculine field have the potential of making the field less gendered by challenging gendered assumptions of
employee capabilities. Deutsch argues that these types of social interactions lead to structural change; for example Title IX, which forbids discrimination based on sex. Deutsch argues that, “we reserve the phrase ‘doing gender’ to refer to social interactions that reproduce gender difference and use the phrase ‘undoing gender’ to refer to social interactions that reduce gender difference” (Deutsch, 2007: 122). Previous to Deutsch’s publication, Judith Butler (2004) published a book entitled * Undoing Gender*. Though citing the same criticism against West and Zimmerman (1987) for emphasizing gender differences and the inevitability of gender inequality, in contrast to Deutsch (2007) Butler used the term “undoing gender” to formulate an argument for gender binary to be completely eradicated. Finding some middle ground, Barbara Risman (2009) redefined undoing gender as occurring any time the gender binary is challenged. West and Zimmerman (2009: 118), countered the “undoing gender” theorists with the assertion that gender is “not so much undone as redone.” West and Zimmerman felt that saying gender could be “undone” implies that it can eventually be eliminated. Instead, they support Deutsch’s idea that structural changes which reduce gender inequality can occur in response to social interactions, but that gender can never be completely undone (West and Zimmerman, 2009).

An ideal place to examine this theoretical debate between doing and undoing/redoing gender is in researching trans people, because they are a direct challenge to the gender binary, falling somewhere between male and female (Kando, 1972). This coincides with Risman’s definition of undoing gender (2009). As the doing/undoing/redoing terminology was founded on the story of a trans woman, the
debate continues to be discussed in relation to the trans community. Catherine Connell (2010) teased out this debate while studying trans people in the workplace. Given the established definitions of doing, undoing/redoing gender, Connell (2010) found that trans people simultaneously seemed to be doing them all. This theory is based on how her interviewees identified their work-related gender practices. Connell argues that the trans people in her study did gender at work displaying such behaviors as gender appropriate clothing and undid or redid gender at work when being open about their trans status and challenging co-workers’ ideals of gender norms.

2.2 Trans People

*Trans* has preceded a number of terms with regard to human gender, sexuality, and identity. This section addresses the historical development of the term “transgender”. Though historical scholars did not necessarily delineate between “sex” and “gender,” I have interpreted where “gender” is the more appropriate term, because the author is referring to a social identity, rather than a biological category.

Originating from the perspective of a disconnection between the gendered body and mind, those who have expressed the desire to transition gender identities have been well documented in the literature since 1886 with Richard von Krafft-Ebing’s *Psychopathia Sexualis with Special Reference to Contrary Sexual Instinct: A Medico-Legal Study*. In this study, Krafft-Ebing outlined his constructs of psychosexual disorders. Among them, was what he called the “metamorphosis sexualis paranoica” – those who had such a strong conviction of body and what could be interpreted as gender identity incongruence, they were willing to go to great measures to outwardly reflect their
internalized gender. Krafft-Ebing thought the conviction with which these individuals believed they were rightfully members of the opposite gender was a serious psychological problem. Furthermore, if these individuals were willing to transform their outer appearance in a “mutilation” of either the physical or social self, Krafft-Ebing thought these individuals to be so disturbed as to call them “psychotic” (Krafft-Ebing, 1886).

The term “trans” wasn’t ascribed to individuals with body and gender identity incongruence until Hirschfield (1910) coined the term “transvestism.” Hirschfield used transvestism to describe people of any gender or sexuality who had a sexual interest in dressing like a member of the opposite gender. Hirschfield, however, did not feel that linking transvestism exclusively to sexual desire accounted for the drive to identify as another gender as a consistent status. Rather than posit these individuals as disturbed as Krafft-Ebing (1886) suggested, Hirschfield (1910) theorized that gender identity and the physical body may not be congruent at birth, but should be resolved to prevent individuals from becoming disturbed. With this conviction, Hirschfield influenced legislators to implement policies allowing legal name changes in Germany and performed the first documented sex reassignment surgery (Hirschfield, 1910). Harry Benjamin, M.D. in his 1966 book, The Transsexual Phenomenon, introduced the term “transsexualism.” Benjamin did not support Hirschfield’s (1910) term “transvestism” as it was defined in connection with fetishistic desire. In support of Hirschfield’s (1910) identity dialog, Benjamin (1966) coined the term “transsexualism.” Transsexualism
described those who not only had the desire to wear the clothes of the other gender, but fully identify and appear as the other gender.

Further categorizing trans people, trans author, Virginia Prince, claims to have coined both the terms “transgenderism” and “transgenderist” (Prince, 1969; Prince and Doctor, 1997). Transvestitism, she argues, denotes a person who temporarily cross dresses as someone of the opposite gender. Transgenderists, rather, denotes a permanent and daily state of identifying as the opposite gender. If sex reassignment surgery is performed, then the person would be termed a transsexual (Prince and Doctor, 1997: 591). These terms were strictly used to distinguish between transsexuals (a biological construction) and cross dressers (a social construction). Prince asserted that there was a gender identity spectrum upon which transgenderists fell somewhere in the middle. The development and explanation of these terms was key to understanding trans people as a term including more than one identity. However, the term “transgender” wasn’t used as an umbrella term until trans activist Holly Boswell’s 1991 article “The Transgender Alternative.” Well cited within sociological research, Boswell (1991) defined transgender as inclusive of a gender identity spectrum and deemed it inclusive of all people who felt their gender was incongruent with their biological sex. Boswell presented the revolutionary idea that gender identity is not only non-dichotomous, but a fluid identity where individuals can identify themselves at any point between man and woman (Boswell, 1991).

While the previous section provides a historical background on how trans people have been studied, this section will focus on who identifies as trans. The body of
literature rarely agrees on which gender identities should and should not be included under the trans umbrella. Davidson (2007:60) highlights this by stating, “The category transgender has no singular, fixed meaning. Rather, it is inclusive of identities and experiences of sex and gender variance, changing, and blending.” Greene and Croom (2000) attempt a more categorical definition and assert that the term transgender includes: transsexuals, transvestites or cross dressers, androgynous persons, and intersex individuals. Aligned with Prince’s teasing out of categories, one way scholars have examined the complexity of the trans concept is to look at underlying assumptions of the construction of trans identities. In the literature, these identities have been divided into biological constructions (transsexuals and intersex) and social constructions (cross dressers, transvestites, and genderqueer persons). The biological constructions of trans identities focus on physiological and bodily challenges to conventional notions of gender. In contrast, the social constructions of trans identities focus on more behavioral challenges to conventional notions of gender. This will be further described in the following section.

2.2.a Biological Trans Identities

The term *transsexual* refers to men and women who feel there is incongruence between their gendered body and their gender identity and, as such, have an overwhelming desire and need to live their lives as members of the other gender, thereby achieving congruence (Israel and Tarver, 1997; Stryker and Whittle, 2006). This is a biological trans identity, because transsexuals often feel they were born into a wrongly gendered physical body. Transsexuals can be either male-to-female (MtF) or female-to-
male (FtM). For example, MtFs are individuals who were legally described as males at birth, but identify and ultimately wish to pass as women. Though surgery is not required to be transsexual, many transsexuals opt to have surgery to mitigate characteristics of their birth sex and their gender identity. MtFs are more common among transsexuals, because more feasible options exist for those opting to have genital construction surgery (Fausto-Sterling, 2000).

There is a large body of literature regarding offensive terms by which to refer to transsexuals. There are terms which are blatantly offensive; most notably, Blanchard’s scholarly use of the term “she-male” to describe MtFs (Blanchard, 1993). Terms which have been traditionally used, such as MtF and FtM, have recently been rejected among trans people as well. Serano (2007) asserts that MtF and FtM imply an incomplete transition by labeling trans people by their previous gender first and their identified gender second. Serano prefers the terms “trans men” and “trans women”. Serano emphasizes the importance of the space between the words “trans” and “men” or “women”, asserting that saying “transmen” or “transwomen” implies a third and fourth gender or something outside of the dichotomies of men and women. Rather, she argues that the terms “trans men” and “trans women” signifies the completion of transition by successfully passing as men or women, with a separate “trans” which individuals can add or drop as they feel comfortable, rather than having it literally and figuratively tied to their gender identity (Serano, 2007).

*Intersex* is also a biologically constructed trans identity and has been described as a condition in which an individual is born with ambiguous genitalia, mismatched
genitalia to biological sex, or a mixture of sex chromosomes or chromosomal attributes (Lorber and Moore, 2007). Fausto-Sterling (1993) estimated that 1.7% of the population was somehow intersexed. However, this estimate has been critiqued and later estimates asserted that intersexed individuals more realistically make up only 0.02% of the population (Sax, 2002). Fausto-Sterling may have been accounting for the fact that many individuals may not know they are intersexed. If they have no clear genital markers or side effects, medical assessment may not be sought or need to be sought by the individual. There are many different types of intersex conditions, all of which are extremely rare. While detailing the range of intersex condition is beyond the scope of this thesis, Kleinfelter’s syndrome and Complete Androgen Insensitivity Syndrome are important to briefly detail as two of my research subjects identified themselves as having these conditions.

Found in approximately 1 in 1,000 births, individuals with a genetic make up of XXY are born with the intersex condition, Kleinfelter’s Syndrome (Gold, 2001). Kleinfelter’s Syndrome is the most prevalent of the known intersex conditions. Despite having what appears to be the genetic make-up of both sexes, individuals with Kleinfelter’s Syndrome live as males with little question of ambiguity, though the testes and penis are generally small. However, questions may be raised later after puberty when these individuals may develop breasts as a secondary sex characteristic of the second X chromosome or discover they are sterile (Lanfranco, Kamischke, Zitzmann, and Nieschlag, 2004). Because these side effects may be minimal or go unnoticed, those with Kleinfelter’s syndrome may never know they are intersexed.
More rare than Kleinfelter’s Syndrome, estimated at approximately 1 in 13,000 births, Androgen Insensitivity Syndrome (AIS), is a condition where a biological male XY is unable to process androgens and therefore displays feminine appearances and behaviors (Gold, 2001; Breedlove and Hampson, 2002). With complete AIS (CAIS), affected individuals have rudimentary testicles in their abdomen which may become cancerous after puberty. Though, these individuals will have feminine genitalia and even develop secondary sex characteristics such as breasts, they will never menstruate and are sterile. Often, those with CAIS do not know they are intersexed until they become concerned with the late (absent) onset of menstruation and seek medical advice. Others unfortunately are not aware until the inchoate testes in their abdomen become cancerous.

Most intersexed individuals are at odds with their biological sex, because their bodies at birth do not necessarily match their biological sex. Therefore, children may be raised as a gender contrary to their physical sex or raised as a gender contrary to their gender identity. Though these individuals are not always in disagreement with their legal sex assignment and how they identify, children born with ambiguous genitalia may be subjected to “normalizing” procedures which affect gender identity and body congruity among a multitude of other issues which will be discussed in a later section (Maharaj, Dhai, Wiersma, and Moodley, 2005).

2.2.b Social Trans Identities

In contrast to the biological perspective of trans identities, the social perspective of trans identities characterizes identities which are not a biological challenge to conventional gender norms, but rather behavioral challenge. These identities are a
behavioral challenge in the sense that, while the body is not physically changed, clothing or mannerisms deemed masculine or feminine are often used to achieve the trans identity. Socially constructed trans identities include cross dressers or transvestites and genderqueer persons.

There is a long standing debate as to whether the terms *cross dresser* and *transvestite* are synonymous based on the motives for wearing the clothing of the opposite gender. A social notion, both terms arguably imply those who, “dress in other-gender clothing for emotional satisfaction and/or erotic pleasure” (Greene and Croom, 2000; 140). However, it is argued that a transvestite is a type of cross dresser who dresses in the other gender’s clothes on a more permanent basis to embrace both masculinity and femininity (Evans, 1993). Ekins (1997) argues that cross dressing could be a long term gender identity or an occasional identity. As noted above, Doctor and Prince (1997), consider cross dressers and transvestites to be synonymous terms, which imply a temporary display of a trans identity.

The cross dresser category also includes drag queens and drag kings. Though commonly stereotyped as a non-heterosexual effort, drag is a performance of gender that is not necessarily indicative of sexuality (Alexeyeff, 2000). Kumbier (2002) describes drag performances as hyper gendered. Drag queens are usually (not always) men who might queen in sequins and over the top make-up and stuffed bras. Drag kings are usually (not always) women who perform a hypermasculine self to the extent of “sporting exaggerated penises” (Kumbier, 2002). Brown (2001) asserts that dragging is a temporary performance done for an audience, rather than a permanent trans identity.
Rather than dressing in gender opposite clothing as cross dressers and transvestites do, androgynous persons opt for gender neutral clothing (Bornstein, 1995; Greene and Croom, 2000). Androgyny is a biological term referring to a person who is neither distinguishably masculine nor feminine in appearance or behavior. However, feminist and queer literature have adopted the term “genderqueer” to describe people for whom their gender or sexual orientation does not neatly fit social binaries. Therefore, those who identify as genderqueer may identify as either gender, neither gender, or a completely different gender and may prefer to be referred to with gender defiant pronouns such as, “ze” or “hir” (Macgillivray, 2004).

Trans identities have been biologically and socially constructed in the literature and can be tied back to the theoretical framework of gender. It can be argued that those who have biologically constructed trans identities strive to “do” gender (West and Zimmerman, 1987), whereas those who have socially constructed trans identities strive to challenge the gender binary and “undo” or “redo” gender (Bornstein, 1995; Deutsch, 2007; Risman, 2009; West and Zimmerman, 2009).

Transsexuals and the intersexed have been considered biologically constructed identities in the literature, because of their physiological challenges to conventional gendered norms of men and women. Transsexuals feel they were born into the wrong physically gendered body and desire to identify and physically appear as the opposite gender (Israel and Tarver, 1997; Stryker and Whittle, 2006). Transsexuals have a drive to do gender and to do gender well enough to pass as their identified gender, though it is not congruent with their biological sex (Serano, 2007). This is further biologically
categorized by the surgical treatments transsexuals often undergo to achieve the ability to pass (Fausto-Sterling, 2000).

Comparatively, intersexed individuals have been biologically constructed, because of the intricate physiological phenomena that occur when someone is intersexed. An intersexed individual may have been born with ambiguous sex characteristics and assigned a sex which conformed to the appearance of the genitals at birth or based on genetic sex (Lorber and Moore, 2007). Sometimes, intersexed infants are subjected to procedures to make their genitals look more appropriately masculine or feminine (Maharaj, Dhai, Wiersma, and Moodley, 2005). Subsequently, intersexed individuals have a genetic sex, a reared gender based on sex assigned at birth, and a gender identity – all of which may or may not be congruent. Thus, it is unknown whether intersexed adults will construct their gender or how they will do or undo/redo gender at some point. However, it may be argued that gender is “done” for them at birth, by normalizing the genitalia and being raised as a biologically constructed gendered child, thus emphasizing gender differences (Butler, 2004).

Cross dressers and genderqueer individuals have been considered socially constructed in the literature, because there is not a drive to physiologically appear as the opposite sex, but rather to behaviorally appear as the opposite sex through clothing and mannerisms. Cross dressers and genderqueer persons have little desire to perform to the conventional notions of gender norms. Instead they emphasize the idea of blending and “bending” or challenging the idea of two genders (Lorber, 1994; Deutsch, 2007). Because this upsets the gender binary and therefore mitigates gender differences, cross dressers
and genderqueer individuals could be said to be “undoing” or “redoing” gender (Deutsch, 2007; Risman, 2009; West and Zimmerman, 2009).

Whether biologically constructed or behaviorally constructed, trans identities are intricately connect to gender theory. As Connell (2010) theorized, trans people seem to be simultaneously doing, undoing/redoing gender. In the next section I examine the development of the term “heteronormativity” and how it has become institutionalized in the United States.

2.3 Institutionalized Heteronormativity

Embedded in society is the assumption that heterosexuality is universally normal and that men and women are naturally attracted to one another, both physically and emotionally. Rich (1980), termed this assumption “compulsory heterosexuality.” Rich understood compulsory heterosexuality as a facilitator of social inequality as it relates to men’s social and economic privilege. Beyond perpetuating inequalities between genders, compulsory heterosexuality perpetuates inequalities between heterosexuals and non-heterosexuals. The concept was re-termed “heteronormativity” by Michael Warner (1993) – a compact term which still emphasizes the notion of heterosexuality as what is normal, but recognizes that the inequalities heteronormativity perpetuates are among sexualities and genders. Heteronormativity has increasingly been a central topic of discussion among scholars in gender, sexuality, and inequality. Yep (2003; 11) states

Heteronormativity is everywhere. It is always already present in our individual and collective psyches, social institutions, cultural practices, and knowledge systems.

To better understand heteronormativity and reflect upon how it may affect trans people, I
will provide illustrations of its presence in several social institutions, including: marriage, family, healthcare, education and work.

Heteronormativity is epitomized by the institution of marriage and the assumption that it must consist of a husband and wife, a man and woman (Danby, 2007; Ward and Schneider, 2009). The 1996 Defense of Marriage Act (DOMA) established that U.S. states were not required to recognize relationships between same-sex couples as marriages, regardless of legal marriage performed in another state and also describes marriage as legal union between one woman and one man (Koppelman, 1997). Currently, only five U.S. states (New Hampshire, Massachusetts, Connecticut, Iowa, and Vermont) have legalized “same-sex” marriages. Likewise, legal same-sex marriages will only be recognized in ten states (the five previously listed, New York, California, Rhode Island, New Mexico and Washington, DC) (Lavely, 2007). Some non-heterosexual couples have no desire to claim the word marriage, viewing it as an ultimate conformity to heteronormative standards (Warner, 1999; Stiers, 1999). Equal rights activists feel that same-sex marriage should be granted as at least an option and given the same state and federal recognition as heterosexual marriage. Austin (2005) states, “Civil unions, in my view, constitute something akin to the deceptive notion that separate is equal.” There is inherent inequality in the notion of being barred from a legal status based on heteronormative laws (Phelan, 2001).

Though traditionally reflected upon regarding gay and lesbian couples, same-sex marriage laws prohibit the marriage of some trans couples. The attainment of a marriage license requires proof of sex, which is generally provided by birth certificates. In some
states, trans people are able to change their legal sex on their birth certificate, in other states, such as Ohio (where my interviewees are from) trans people are prohibited from changing their birth certificates (The Ohio Constitution). This means that a trans man born in Ohio would not legally be allowed to marry a woman regardless of gender identity or sex reassignment surgery, because his birth certificate would legally classify him as a woman.

Beyond marriage, heteronormativity has been at the heart of the debate regarding children in families with non-heterosexual parents. Margaret Somerville (2003), a renowned scholar of law and medicine, argues that it is unethical to allow children to be raised by anyone other than their biological parents, because, “[C]hildren need a mother and father” (Somerville, 2003: 6). In a family law review, Gallagher and Baker (2004) claim, “A substantial body of evidence suggests that family structure matters and that children do better, on average, when they are raised by the household of their own mother and father” (Gallagher and Baker, 2004: 180). These arguments are made against non-heterosexual parents. However, other theorists argue that stability within the home is more important than sexuality of the parents (Bradley, 2007). Each U.S. state has its own policies regarding non-heterosexual adoption. Most states allow single non-heterosexual individuals to adopt, but become more strict as partners become involved and the family becomes increasing socially perceived as non-heteronormative (Lavely, 2007).

Heteronormative sanctions not only bring about inequality in terms of who can and cannot adopt children, but also affects the support children in non-heterosexual families can receive. First, unmarried partners are ineligible for estate benefits from a
deceased partner, in all but two U.S. states (Koppelman, 2002). Since non-heterosexual marriage is largely prohibited, these laws discriminate against non-heterosexual couples. Children of a non-legal parent are also ineligible for estate benefits, which can be financially devastating to surviving members of the family (Bradley, 2007).

Second, children can only get health insurance through parents who have “legal rights” to them (Cahill and Tobias, 2007). This “legal” parent must be a biological parent or an adoptive parent. As outlined in the previous discussion about adoption policies and non-heterosexual families, some U.S. jurisdictions do not allow joined non-heterosexual parents to adopt children or allow a second same-sex parents to adopt children at a later time. This means that in many cases, children cannot take advantage of health insurance policies which may be significantly less expensive if not provided by the legal parent. Likewise if the legal parent becomes deceased, the surviving non-legal parent is not able to add the children to their health insurance or any other health insurance program (Cahill and Tobias, 2007). Also, if a non-legal parent dies, children are barred from collecting Social Security Survivor benefits (Social Security Administration, 2003; Cahill and Tobias, 2007).

Third, non-legal parents are also denied the benefits of the Family and Medical Leave Act (FMLA) (Ross V. Denver Dep’t of Health and Hospitals, 1994). Therefore, when an adopted child is placed in the home, or if a child becomes terminally ill, the non-biological or non-adoptive parent has no guaranteed protection from termination of employment for seeking time-off. These restrictive adoption laws are an issue for trans people, especially those who cannot change their birth certificate, because couples who
appear to be same sex (i.e. a trans woman and a biological women), would actually be
heterosexual according to state laws and couples who appear heterosexual, would
actually same-sex according to state laws (Lavely, 2007). This discussion is important to
trans people, because though trans people may or may not identify as (non)heterosexual,
given their gender fluid appearances, heterosexuality may be ambiguous and pose
obstacles to the adoption process.

Another institution that reinforces heteronormativity is health care and, more
specifically, health insurance. Most employers provide health insurance benefits only to
married spouses of the employed. Because only ten states will recognize legal non-
heterosexual marriages (Lavely, 2007), such policies deny health insurance to non-
heterosexual couples (Ash and Badgett 2006).

Health insurance also does not cover sex reassignment or hormone therapies for
trans people wishing to modify their bodies for gender identity congruence, because the
surgeries are considered optional (Bockting and Avery, 2005). Some insurance
companies cite the medical guideline “do no harm,” asserting that surgeries which result
in extensively damaged tissues, as sex reassignment surgery may, are harmful
(Brownstein, 2009). Proponents of sex reassignment surgery, however, argue just the
opposite - that sex reassignment surgery may be necessary for the well-being of the trans
person (Brownstein, 2009).

The “do no harm” guideline is also central to current debates about procedures
performed on intersexed children. Intersexed children are often pathologized at birth if
their genitalia are ambiguous. This physical ambiguity prompts doctors to perform
aesthetically “normalizing” procedures, sometimes without parental consent (Maharaj, Dhai, Wiersma, and Moodley, 2005). In rare cases, surgeries are necessary for intersexed children if life-threatening circumstances arise. Most often, though, surgeries are performed for unnecessary aesthetic purposes, which raise serious legal and ethical concerns (Maharaj, Dhai, Wiersma, and Moodley, 2005). As stated by Ross and Need (1989), surgery may result in assigning the wrong gender for how the children will later identify and reduced sexual function and scarification. Furthermore, health insurance will cover the normalizing procedures at birth, but should the child seek a genital reassignment or further procedures as an adult, health insurance deems these unnecessary cosmetic surgeries (Bockting and Avery, 2005).

In the institution of education, heteronormativity is reinforced in schools through sex and gender education aimed at heterosexual men and women (Fine, 1988; Bay-Cheng, 2003). Rare mentions of non-heterosexual relations are usually quickly stigmatized or delineated from the norm and trans people are usually left out completely when speaking about gender (Elia, 2000). C.J. Pascoe (2007) chronicles homophobia and heteronormativity in one high school in her book Dude, You’re a Fag. In the school in her study, the word “fag” was used to criticize male students who displayed less than masculine behaviors (Pascoe, 2007). This use of a homophobic slur as an insult mechanism is something teachers often ignored or participated in.

Institutionalized heteronormativity extends beyond schools in to the workplace. Trans employees face discriminations based on the perception of gender by their
employer and their expression of their trans identity within the workplace (Schilt, and Connell, 2007). As Findlay (1999:3) described:

They may not be hired because of how they look; told they are not entitled to dress in a particular way; forbidden to cross dress or transition on the job, be refused the use of the appropriate washroom while they are transitioning or cross dressed, be harassed by coworkers or the boss, or fired.

Claims may be made that transitioning on the job in regards to appearance or restroom use is distracting, intimidating, or offensive to other employees. Though it may seem trivial to outsiders, passing and acceptance in restrooms is crucial to trans people. Storrow (2002: 155) states,

The fear that transsexuals will wreak havoc in the workplace by making other employees uncomfortable in the restroom fuels a hysteria that greatly impedes any progress to be made in the area of equal employment opportunity for the transgendered.

Some companies cite dress code violations punishable by severance as though the appearance of an employee somehow affects their qualifications (Findlay, 1999; Connell, 2010).

Though there are no federal laws which prohibit gender identity discrimination in the workplace, 13 states have passed laws which do (Connell, 2010). In the 1980s it was argued that Title VII of the Civil Rights Act of 1964 did not protect trans people from workplace discrimination (Currah, Juang, and Minter, 2006). In the case of Ulane v. Eastern Airlines in 1984, a trans pilot was denied protection under Title VII, because the court ruled that sex discrimination under Title VII referred to discrimination, “against women, because they are women and against men, because they are men” (Chow, 2005: 208). It was decided that the wording of the law did not pertain to the trans pilot because
it did not apply to individuals with an ambiguous sex or individuals with a “sexual identity disorder” (Chow, 2005).

With the controversy surrounding Ulane v. Eastern Airlines, the Supreme Court soon began to extend the interpretation of Title VII. In 1989 the case of Price Waterhouse v. Hopkins, the law was extended to protect a woman from sex-stereotyping who was denied a position because she was not feminine enough (Barrett & Morris, 1993). The Supreme Court ruled that Title VII covered discrimination based on both sex and gender (Chow, 2005). Where lawsuits raised by trans people against employers were frequently dismissed, they are now going to trial and are successful more often under the extension of Title VII. However, as Damon Martichuski (2006:953) explains:

The ‘noxious practice’ of discrimination in employment because of sexual orientation continues largely unabated, although sixteen states and the District of Columbia have statutes that expressly protect against sexual preference discrimination in employment.

This may affect trans employees, because their sexuality is often questioned by those who are aware of their trans status (Schilt and Westbrook, 2009).

The institutionalization of heteronormativity directly affects trans people by dictating how family structures, such as, marriage and the adoption of children can be constructed, what medical treatments are deemed necessary and unnecessary, and what protections are in place for discriminations in schools and the workplace. Tying the institutionalization of heteronormativity back to the gender framework, Leslie Feinberg (1992) linked the term “transgender” to the economic system of capitalism. Feinberg’s pamphlet, *Transgender Liberation: A Movement Whose Time Has Come*, argues that the need to specifically define gender is capitalist ideal which needs to be overthrown by
gender-resistance (Feinberg, 1992). Feinberg’s argument was seeded in the social structure of who or what gets to decide what is typically masculine and feminine. Feinberg argued that the government and social institutions reinforce a gender binary and often times force citizens to be categorized as male or female. However, Feinberg argued, those who are gender-resistant, such as out trans people, can overthrow this power structure by challenging the binaries and refusing to adhere to gender expectations (Feinberg, 1992; 1999).

2.4 Challenging and Reproducing Heteronormativity

Though trans people may challenge heteronormativity by not neatly fitting into the gender and sexuality binaries, arguably, trans people also reproduce heteronormativity. For transsexuals there is an overwhelming motivation to pass as the gender they identify as to avoid stigmatization. To “pass” means to appear and behave so typically as a man or a woman, that people have little question about the gender of the person in social interaction (Gagne, Tewksbury, and McGaughey, 1997) Trans people who wish to blend seamlessly into the community could be said to be “stealth” (Meyerowitz, 2010). Trans people who are stealth do not fully disclose their trans identity to everyone. At first, transsexuals take great care in presenting a gendered self that conforms to the heteronormative assumptions of what attractive men and women look like. It is not uncommon for those undergoing sex reassignment surgeries to ask to look like famous people who exemplify the perfection of their genders (Bloom, 2004). Margrit Eichler (1987) criticized trans people for desiring to look so typically gendered, emphasizing that it perpetuated oppressive gender differences. This desire to appear and
behave as a typical man or woman reaffirms gender differences, and thus demonstrates how trans people can *do* gender (West and Zimmerman, 1987) and reproduce heteronormativity and gender inequality.

Trans people also challenge heteronormativity with their sexuality. By definition, heteronormativity exalts heterosexuality as what is culturally acceptable. This is reiterated by the heteronormative marriage laws (Ward and Schneider, 2009). Trans people, however are difficult to theorize as either heterosexual or non-heterosexual. As such, when others express romantic interest in a trans person, they often question their own sexuality when the trans person reveals their identity (Westbrook and Schilt, 2009). This would arguably mitigate gender differences and undo gender as romantic partners realize they can be attracted to someone whose gender does not fit conventional gender norms (Deutsch, 2007). At the same time, whether identifying as heterosexual or non-heterosexual, trans people who marry reproduce heteronormativity by engaging in a typically heterosexual practice which is denied to others (Ward and Schneider, 2009).

Trans people can also challenge heteronormativity and undo or redo gender by having the ability to recognize gender inequalities. This is perhaps even more readily than non-trans people, given their unique perspective having lived as both a man and a woman (Deutsch, 2007). This perspective allows trans people to recognize and challenge the sometimes unrealistic heteronormative expectations of gendered bodies and behaviors. Likewise, trans people can undo gender with this perspective by recognizing and challenging inequalities between men and women, specifically in the workplace (Schilt, 2006). Experiencing double standards, sexual harassment, and comparable worth issues
in the workplace gives trans people the ability to recognize gender inequality and raise awareness and encourage structural change (Deutsch, 2007; Connell, 2010).

Connell (2010) also found that being out as trans in the workplace serves to further challenge heteronormativity and undo or redo gender. In her study of 19 trans people and employment, Connell found that those who were out in the workplace were “policing” by coworkers on appropriate gendered behaviors. Though the trans people are reproducing heteronormativity by attempting to conform to gendered standards, heteronormativity is also being challenged, because their trans status is known and being tolerated and even aided by others despite their gender not fitting heteronormative standards. Deutsch (2007), Risman (2009), and West and Zimmerman (2009), would argue that this social interaction is undoing or redoing gender by minimizing gender differences by demonstrating tolerance of a trans coworker.

This literature review has addressed gender as a theoretical framework, the evolution of trans terminology, who identifies as trans, how scholars have constructed trans identities, the institutionalization of heteronormativity, and how trans people challenge and reproduce heteronormativity. The next section will outline how my study was conducted to address whether interviewees felt they have been affected by heteronormativity and if they feel they challenge or reproduce heteronormativity.
For this study, in 2009-2010 I conducted 25 in-depth, semi-structured interviews, in person, with adults who self-identified as trans people. I chose to conduct semi-structured interviews to allow participants to speak as freely as possible about their experiences as trans people. Taking an in-depth interview approach, allowed me to obtain detailed information from respondents without being constrained by the need to meet variable criterion required by quantitative research. This is referred to as an analytic induction approach (Znaniecki, 1934; Robinson, 1951). This approach is commonly used by social scientists to compare social phenomena in search of themes.

The only requirement to be eligible for participation was that the individual self-identify as trans. I began with three personal contacts who identified as trans people and used a snowball or reputational sampling technique for further recruitment of participants (Neuman, 2006). This technique involved giving my contact information to participants at the end of each interview to be given to prospective participants. I did not engage in active recruitment beyond the first three interviews. Instead, with this sampling method, I waited to be contacted by individuals who were interested in becoming participants of this study. With consideration that respondents may not be open about their trans status or “stealth” (Meyerowitz, 2002; Connell, 2010), signed consent forms were not obtained. Rather, consent was indicated by the participant’s willingness to continue with the interview and be audio recorded.

Due to the semi-structured nature of the interviews, sessions lasted anywhere from 45 minutes to 90 minutes. I began the interview with a description of my study and
defined heteronormativity as, “Heteronormativity is the assumption and expectation of heterosexuality within members of a given society. It is what is culturally acceptable and reinforced by policies and cultural norms; for example, expectations of how men and women should look or behave sexually.” For the structured portion, participants were asked general demographic questions, how they define themselves as trans, and how long they’ve identified as such. Beyond demographic questions, to address my research questions, I asked questions about identity and the institutionalization of heteronormativity. Questions occasionally needed clarification, in which case, they were rephrased to interviewees, sometimes with examples. Interviewees were sometimes asked to expand on their answers. For example, when asking interviewees if they felt their trans identity was an issue in the workplace, further questions may have included, “What about with co-workers?” or “What about with skill evaluations?” Occasionally, discussion needed to be lead with probes. Probes generally consisted of literature citations which aided the understanding of the question. Some probes were not necessary in every interview.

The use of the snowball sampling technique yielded a surprisingly demographically diverse pool of participants. This is a rather abnormal result, as research supports that snowball sampling techniques tend to yield demographically homogenous participants (Esterberg, 2002). All interviewees lived their adult lives, before and after transition, in Ohio. Twenty-two of the 25 participants were born in Ohio. Table 1 demonstrates some participant self-identified demographic data. The names of participants were changed, either to pseudonyms they picked themselves or to
pseudonyms I created. The age of participants ranged from 19 to 62 years with an average age of approximately 30 years and a median age of 26 years. Eleven participants were students, 4 of whom were “non-traditional students” in terms of age (Kasworm, 1990). Nine of the 11 students were members of a LGBT club at a mid-size university in Western Ohio. The other 14 interviewees who did not identify as students were employed full-time. Eleven participants identified as White, 6 as African American, 4 as bi/multi racial, 2 as Hispanic, and 2 as Asian. Fourteen participants identified as trans women, 6 as trans men, 3 as genderqueer, and 2 as intersex-genderqueer.

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Race/Ethnicity</th>
<th>Education</th>
<th>Occupation</th>
<th>Gender Identity</th>
</tr>
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<td>Transwoman</td>
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<td>Student</td>
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<td>Bachelors</td>
<td>Journalist</td>
<td>Intersex - XXY/</td>
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<tr>
<td></td>
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<td></td>
<td></td>
<td>Genderqueer</td>
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<td>Masters</td>
<td>Manager</td>
<td>Transman</td>
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<tr>
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<td>Student</td>
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<tr>
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<tr>
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<td>Mixed (African American/White)</td>
<td>In College</td>
<td>Student</td>
<td>Transman</td>
</tr>
</tbody>
</table>
When preparing to conduct this study, I was concerned about difficulties in recruitment and participant openness, because I do not identify as a trans or genderqueer individual. The intentions of researchers who are “outsiders” can often be perceived as manipulative in the sense that the researcher is sharing intimate details about a group, without the ability to identify or empathize with the group’s struggles or to medicalize, or stigmatize the group, which has unfortunately been the case with past outsiders studying trans people (Merton, 1972; Meyerowitz 2002; Namaste 2000). As the investigator, I took a neutral, objectivist stance throughout the interview. I provided information through the use of literary citations where needed, but did not feel comfortable portraying a more relational role due to my outsider status. Recruitment response was slow as the first interviews were completed. However, as more interviews were conducted and my credibility as a non-threatening researcher was further established, recruitment response grew.

Interviews were recorded with a digital recording device, which were directly uploaded to a secure location on a computer and destroyed upon the completion of transcription. Ohio University’s Institutional Review Board reviewed and approved this study prior to my entrance to the field (OUIRB approval 09X214).

Inductive content analysis was used for the interview data and was comprised of three steps (Boyatzis, 1998). First, the interview data was open coded. During this time, themes were sought out in the participant’s statements and categorized. For example, all statements about understanding gender inequality from a new perspective after transition were categorized and labeled as “flip-side inequality.” Likewise, statements about
changing perceptions of qualifications by employers after transition was categorized and labeled as “perceived qualifications.” Second, these themes were then axial coded, which means that thematic linkages between categories were formulated. For example, “flip-side inequality” and “perceived qualifications,” were combined into a larger category called “shifting power dynamics”. Finally, these themes were selectively coded, which involved looking for similarities or differences between categories. At this point, analytic generalizations about the data could be made with reliability.
CHAPTER 4: RESULTS

For this research study I sought to answer two questions: 1) What are the interactions between trans people and heteronormativity? And 2) how do trans people simultaneously challenge and reproduce heteronormativity?

To address how trans people are impacted by the ubiquity of heteronormativity, I asked questions regarding if and how trans people have been affected by the institutionalization of heteronormativity. With this in mind, I focused primarily on government policies and societal norms regarding marriage, family, healthcare, education, and work and whether these institutions presented issues for interviewees given their trans identity.

4.1 Marriage

Results on marriage were complex. Nine of the 25 interviewees were married, including 7 trans women and 1 trans man. Four of the married trans women transitioned after marriage. The initial question was, “Do you feel that, given your trans identity, marriage laws will be or have been an issue or that you will be or have been affected by marriage laws?” Whether interviewees felt they would be/had been affected by marriage laws varied by four themes: age, ability to pass, sexual orientation, and confusion with the laws. Six of the youngest interviewees between the ages of 19 – 23 said they’d never thought about whether marriage was an issue until the questioned was raised in the interview. Among these six, Ami, a 20 year old unmarried trans woman said:

I never really thought about it. I’m only 20. I’m new to this body, I’m passing, I’m gorgeous, and marriage isn’t even on my radar. Will it be someday? Maybe, but for now I’m just living it up finally getting to be on the outside who I’ve
always been on the inside.

Six trans women and one trans man worried that their ability to successfully pass may be/was an issue with marriage laws. For Louise, a 62 year old married trans woman, her ability to pass almost prevented her from marrying her partner. She said:

Marriage was an issue for me and my husband. Even though I’m post-op and have changed all my [legal documents], I lived 46 years as a large, Black man. I make a very manly woman at best. When my husband and I wanted to get married, the marriage license people challenged my birth certificate that said I was a woman and wouldn’t let us apply. We got the license, but had trouble finding anyone who would marry us. It was a mess.

Likewise, Eve, a 26 year old unmarried trans woman said:

I’ll probably never try to get married. I’m not out to anyone but my close family, but still, I would be afraid to get invested in [a wedding] and have the minister be suspicious. What if I don’t pass as well as I think I do? Am I required to tell him I wasn’t born a woman?

Eight of the respondents including 6 trans women and 2 trans men identified themselves as non-heterosexual and were concerned with Ohio’s current marriage laws which define marriage to be, “between one man and one woman” (The Ohio Constitution). Mel, a 22 year old unmarried trans man said:

I mean, I know that Ohio doesn’t allow same-sex marriage and my partners are men. So marriage isn’t really an option for me, so I just try not to think about it as part of what normal people do.

From a more empowered approach, Rebecca, a 52 year old married trans woman said:

Even though I transitioned to being a woman, my romantic interest was still in other women. I knew that Ohio didn’t allow same-sex marriage, but at the same time Ohio also doesn’t allow you to change your sex on your birth certificate. So, because I was born in Ohio, I couldn’t change my birth certificate, so I was legally still a man. So, my wife and I were allowed to get married – even though, for all intensive purposes, we looked like two women. We even both wore dresses. The laws are so confusing.
In fact, an overwhelming number of respondents agreed with Rebecca. Fifteen trans women, 2 genderqueer people, and 2 trans men expressed confusion with the marriage laws in the state of Ohio. Tasha, a 26 year old trans woman said:

I knew I couldn’t change my birth certificate in Ohio, but I thought that I would just need to pass as a woman to marry [my partner]. But, because I couldn’t change my certificate it’s considered a gay marriage even though I’m a woman and he’s a man.

Similarly, Mia a 33 year old unmarried intersexed and genderqueer person said:

If the marriage laws say marriage is between a male and a female, then what about me? I’m both male and female, neither manly [nor] womanly, and hell if I know whether I’m straight or gay by their standards.

4.2 Family

How interviewees felt their trans identity has affected or would affect their family structure was addressed by asking the question, “Do you feel that, given your trans identity, your ability to have or adopt children will be or has been affected?” Responses varied by themes similar to those of marriage: age, desire for children, appearance, sexual orientation and Ohio adoption laws, and confusion with the laws.

Six of the interviewees already had children. Four trans women identified that they had children, while the trans men who were married also identified that they had children. The same 6 interviewees who said they had never considered marriage issues, said that they had also never or were too young to have thought about having children. Another 3 trans women, 1 genderqueer person, and 1 trans man said they had no desire to have children. One trans woman and 1 genderqueer person expressed concerns with their appearance and the ability adopt or have children. Tameka, a 28 year old trans woman without children stated:
I want to be able to adopt children someday, but I worry that if I don’t pass well enough they’re going to think I’m some sort of freak who wouldn’t be a good parent.

Elisa, a 32 year old genderqueer person without children expressed similar concerns:

I wondered if [the adoption agency] having a problem figuring out whether I’m a man or a woman cause them to not let us adopt? I wondered if because I look like I do if they would think I’m an unfit parent?

Ohio law does not allow non-heterosexual couples to adopt. Ohio law does, however, allow a single parent of any gender or sexuality to adopt and, in most cases, allows a second parent of any orientation or gender to adopt at a later time. Six interviewees including 4 trans women, 1 genderqueer person, and 1 trans man expressed concern with the laws regarding same-sex adoption. Mia, a 33 year old, intersex person without children who identifies as genderqueer stated:

I can’t have children and [my partner] is sterile as well. We’d have to adopt, but Ohio only allows single parent gay adoption. So, what? Do I pretend [my partner] isn’t my partner anymore? Just until I get the adoption approved? This is supposed to be our child, not my child and then her child too as an afterthought. And again – it’s not technically a same-sex partnership, I’ve got an XY and she’s a born woman, my birth certificate just says I’m a woman too.

Sicily, a 24 year old trans woman without children questioned:

I haven’t really thought all that much about having children since I’m not in a serious relationship or anything, but could I even adopt? I don’t know because even though I’m a woman and I have boyfriends, I don’t think the government considers me straight, so I don’t think I could.

Five trans women and 1 genderqueer person expressed confusion with the Ohio adoption laws. Hilary, a 49 year old trans woman without children expresses generally what those who were confused with the laws questioned:

So, if Ohio doesn’t allow same sex adoption, but we look like a same sex couple, would we still be able to adopt? I mean, we’re both women, but I was born a
man? So can we adopt? We could get married if we wanted to, so I don’t see why we couldn’t [adopt children]. Unless they would think our family is unfit to raise children, because we’re two women. Can they do that?

4.3 Healthcare

Next, I inquired about heteronormativity in healthcare. The question I asked interviewees was, “Do you feel that you will be or have been affected by healthcare or health insurance policies, because of your trans identity?” All 25 interviewees said they felt they have had or may have problems with health care and health insurance policies. Common themes included: psychological counseling prior to transition and health insurance coverage for transitioning surgeries or hormones.

Seven trans women, 3 trans men, and 1 genderqueer person took issue with the requirement that trans people must undergo psychological counseling prior to any hormone therapy or surgery. Amaya, a 20 year old trans woman declared:

I think it’s unfair that we have to go to counseling before getting hormones or surgeries. Like we don’t already feel bad enough not getting to be who we are, but we have to be treated like we’re a bunch of crazies.

Dawn/Don, a 48 year old genderqueer person said:

You know, not that I ever really wanted to have surgeries, but more so than just embodying my genderqueer identity, there’s no way in hell I’d let some shrink tell me I’m mentally ill for being assigned the wrong body. No way in hell and none of the transitioned people should either.

Three other trans women and the remaining 3 trans men supported the counseling requirement. Eve, a 26 year old trans woman said:

I mean, we have to do counseling before we can change, but I get why we have to. It’s a big decision. It’s expensive. It’s not easy sometimes. You got to be completely sure it’s what you want.
Ty, a 21 year old trans man said:

At first I thought [going to counseling] was stupid, but now I’m glad I had to do it. Mostly because they make you live as a man for a long time so you know what you’re in for. I know people who ended up not getting surgery because they couldn’t handle what people would say and stuff. It’s a scary time, but important for you to be sure.

Eleven trans women, all 6 of the trans men, and both of the intersex persons who identify as genderqueer expressed concerns with health insurance coverage of hormone treatments and surgeries. Delia, a 20 year old trans woman said:

Not a lot of insurance companies do anything for [trans people]. It’s so expensive, but it’s necessary. My insurance company covers some things, because I did the counseling and everything. If [my insurance company] didn’t cover anything, I don’t know how I’d pay for it, but I would get the money however I could – even if that meant I had to do things I wasn’t proud of. It’s that important.

BJ, a 22 year old intersex person who identifies as genderqueer said:

Health insurance wouldn’t cover corrective surgery on my [genitals] even though it wasn’t my choice to have the surgery when I was a baby done at all. The doctors fucked it up, they should have to fix it.

Elisa, a 32 year old genderqueer person, said a combination of all these issues was the primary reason why ze hasn’t fully transitioned, stating:

If I could change my gender, I would. But, I absolutely refuse to have to participate in counseling and treated like a sicko. Not to mention, my insurance doesn’t cover anything and the surgeries and meds are beyond expensive to become trans.

4.4 Education

To address heteronormativity in education, I asked interviewees, “Do you feel that, given your trans identity, the education system has been an issue?” Three themes emerged from the responses to this question: student status at the time of transition, sex and gender education in schools, and the allowance/prevalence of LGBT groups in
schools. Eight trans women and 1 trans man said that they transitioned well after having been in a school setting, so they had not experienced any issues personally. However, 6 of those 9 along with 6 other interviewees felt that sex and gender education in schools was an issue. Ty, a 21 year old trans man said:

I think health classes contribute to intolerance. When they do sex ed, they only talk about hetero sex and when they talk about bodies and genders they only talk about men and women. They leave LGBT out of everything.

Eleven of the interviewees, including the 5 trans women and 5 trans men who were college students at the time of the interview and 1 genderqueer person, said there was a lack of LGBT groups at schools. Dawn/Don, a 48 year old genderqueer college instructor and activist said:

I think there’s a big issue with LGBT groups and alliances. Most high schools won’t have them and won’t allow them. Colleges tend to have Gay Straight Alliances, or Rainbow Alliances, but a lot don’t. These groups are important for increasing awareness and tolerance and there just aren’t enough of them.

Frankie, a 19 year old trans man said:

At my school there’s a GSA [Gay Straight Alliance] group, which helps. I have friends who don’t have one on their campus. That’s crazy. Our GSA was one of the first and still one the only places I’m out as a transsexual.

4.5 Work

Finally, I asked interviewees about heteronormativity and work. For this I asked, “Do you feel that your trans identity is an issue in the workplace. Ten of the students were not employed and were rather full-time students. Of the remaining 15 interviewees, 7 were stealth at work and 8 were out as trans at work. Six trans women and 1 trans man were stealth at work and all 5 genderqueer persons and 2 trans women were out at work.
The only theme for those who were stealth was the fear of being called out as trans and having their abilities questioned. Jess, a 25 year old nurse and trans woman, said:

People don’t know I’m trans at work. I feel like if they ever found out, my abilities as a caring and effective nurse would be questioned. Not to mention, if patients found out, they might reject me being there. I think I’d get fired. I know they can’t do that because I’m transgendered, but they can if patients and co-workers refuse to work with me. That could put lives of patients at risk.

Bruce, a 36 year old manager and trans man said:

No one at work knows I was born a female. I keep it this way, because I’m in a higher up position in my company. If someone found out, I know they’d bring me down. I don’t want to lost my position and I don’t want to lose my power. My being a transsexual has nothing to do with the ability to do my job.

For the 8 who were out at work, three themes emerged: increased sexual harassment, perceived capabilities, and co-workers policing their gender performance. Three trans women and 1 genderqueer person reported increased sexual harassment. Elisa, who is a police officer who identifies as intersex and genderqueer said:

When I first joined this department, I was harassed a lot and now I get shit a lot from men from other departments and sometimes people on calls. I mean they can’t figure out what I am. Am I a man or a woman? When I confuse men like that they decide it’s their job to find out by grabbing my chest or crotch or saying dirty things.

Holly, a 42 year old waitress and trans woman said:

There were two men on staff who were a lot younger than me that constantly asked me about my breasts. More than once, they’d hide around a corner and grab them as I went past. They’ve also told customers that I was interested in them or something and then [the customers] would be really nasty – smack my ass and stuff.

Three said that their skills were questioned when co-workers and supervisors were told or found out they were trans. Tameka, a 28 year old caseworker and trans women said:
When I told my coworkers that I used to have the body of a man, they questioned my ability to work with emotionally sensitive clients. I’ve always done well with my clients and they never questioned it before they knew.

Three said that when their co-workers knew they were trans, those of the same gender would police their gender performance. Holly, a 42 year old waitress, said:

The other girls at work were constantly telling me that I have to use my assets to get better tips. By which they mean that I have to lean over the table of men a little different to give them an eyeful.

Elisa, the police officer said:

Sometimes when we’re on busts or something the men in my department will try to get me to yell in a deeper voice or toughen up or something.

To address how if/how interviewees felt they challenged or reproduced heteronormativity, I asked questions based on the definition of heteronormativity I gave when describing my study to interviewees prior to beginning the interview. I defined heteronormativity as, “Heteronormativity is the assumption and expectation of heterosexuality within members of a given society. It is what is culturally acceptable and reinforced by policies and cultural norms. For example, expectations of how men and women should look or behave sexually and the barring of same-sex marriage in most states.” With this focus, I asked interviewees, “Do you feel that, given your trans identity, you challenge or reinforce/reproduce this concept of heteronormativity?” All 25 interviewees felt that they challenged heteronormativity in some way, while 14 interviewees including 3 genderqueer persons, 3 trans men, and 8 trans women felt that they reproduced heteronormativity in some way.
4.6 Challenging Heteronormativity

Three themes emerged when interviewees spoke about how they challenged heteronormativity: identifying as a gender that defies birth sex, blurring the lines of what is “heterosexual” and challenging gender inequality due to an understanding of the treatment of both genders. All interviewees said their trans identity itself challenged heteronormativity. Olympia, a 23 year old trans woman, said:

I definitely challenge what men and women are supposed to be, because I’m a woman, but I was born a man. When I’ve put on a dress I’ve always felt like a woman, but before I changed, to everyone else I was just a guy in a dress.

B.J., a 22 year old genderqueer person said:

I’m a walking contradiction to typical expectations of how men and women look and act.

Thirteen of the interviewees including all 5 genderqueer interviewees, 2 trans men, and 6 trans women said that they felt their sexualities challenged heteronormativity. Frankie said,

We trannys screw up what heterosexuality is. Though I’m a man and I date women, I was born a woman. So, what does that make me? What is heterosexuality to a tranny?

Jules, a 46 year old genderqueer person said:

When I’m out with my husband, people can’t figure out what I am, so they always wonder – are those two gay men? A man and a manly looking woman? Either way we get looks and comments that demonstrate that we certainly aren’t normal.

Six interviewees including 3 trans women, 2 genderqueer persons, and 1 trans man felt that they challenged heteronormativity by combating gender inequality. Bruce, a 36 year old trans man and business manager said:
I may be a man, but I refuse to harass women. So at [my business], I will not tolerate sexual harassment, because I know what it’s like to be sexually harassed. It’s scary and embarrassing and makes you feel bad about yourself like you brought it on to yourself. I will not tolerate that in my company.

Dawn/Don, a 48 year old college instructor and genderqueer person said:

I not only will not tolerate sexism in my classroom, but I take an active role in talking about gender inequality and why it’s wrong.

### 4.7 Reproducing Heteronormativity

Two themes emerged from the 14 interviewees who felt they reproduced heteronormativity: conforming to gender appearance and behavior norms and marriage.

All 14 of the interviewees who felt they reproduced heteronormativity felt that it was because of how they “did” gender. Rebecca said:

I mean, yeah, I reinforced what men and women are expected look like and act like, because I’m a woman and I wanted to pass as a woman. But, I probably overdid it at first. After surgeries I wore the shortest skirts and lowest cut tops I could. I caked on the make-up and shamelessly flirted with any man who would give me the time of day.

Ty, a 21 year old trans man said:

I really tried to be this ridiculous type of manly. I mean I would tell sexist jokes and ‘adjust myself’ in public. All the kinds of things I thought all men did.

Four of the interviewees felt that they reproduced heteronormativity by marrying. Darrell, a 26 year old trans man said:

Let’s face it, nothing says heterosexual like getting married, when other people are denied that ability.

After conducting 25 in-depth interviews, results showed that interviewees felt that they have been negatively affected by the institutionalization of heteronormativity and feel that they simultaneously challenge and, to a lesser extent, reproduce
heteronormativity with their trans identities. After pulling out the themes discussed in this section, I continued to with axial coding. Axial coding is the step in inductive content analysis that involves relating and grouping themes into larger themes. In the following discussion section, the themes from the results section will be discussed in reflection of the literature and the themes which were axial coded will be included.
CHAPTER 5: DISCUSSION

For this study, I sought to address how heteronormativity affects trans people and whether trans people feel they challenge or reproduce heteronormativity. Results suggest that interviewees felt they will be or had been affected by institutionalized heteronormativity in marriage, family, healthcare, education, and work. Findings also suggest that interviewees felt they challenged heteronormativity and, to a lesser extent, reproduced heteronormativity. Further analysis suggests a, selectively coded, overarching theme that trans people interact with heteronormativity at an individual level and a structural level. At an individual level, interviewees self-describe their interactions with heteronormativity. At a structural level, interviewees’ responses were axial coded to assess how their identified interactions with heteronormativity may be perceived by society. This chapter develops the following themes which emerged from the axial coding process: 1.) Trans people challenging heteronormativity. 2.) Trans people reproducing heteronormativity. 3.) Trans people navigating the effects of heteronormativity.

5.1 Challenging Heteronormativity

By definition, heteronormativity is the assumption of two genders, men and women, who are culturally expected to be innately attracted to one another (Warner, 1993). When interviewees were asked if they felt they challenged heteronormativity, they unanimously agreed that they did, but varied in how they felt they challenged heteronormativity. While all interviewees felt their bodies were a direct challenge to heteronormativity, only slightly more than half of interviewees felt their sexualities
challenged heteronormativity. While all respondents recognized that they challenged the gender dichotomy inherent in heteronormativity, fewer felt their sexualities challenged the sexuality dichotomies inherent in heteronormativity, most likely because a majority of interviewees identified themselves as heterosexual. The “body challenge” and “sexuality challenge” themes were axial coded into a combined theme of “identified challenges to heteronormativity” Georgia, a 20 year old trans woman, provided insight into this:

Sure, I absolutely challenge ideas of what men and women are supposed to look like. Though I’m a woman and have always thought I was a woman, I had to have a lot of surgery to make myself look like a woman. I mess up what gender is, because I was born a dude and now I’m a chick. That’s just how it is. But I don’t challenge the idea of straight being normal. I’m a chick and I’m strictly attracted to dudes. Just dudes.

While understanding that her transition challenges heteronormativity by emphasizing gender fluidity, Georgia identifies as a heterosexual and stealth trans woman, meaning that she is not openly trans to most people and is therefore passing as a female born woman (Meyerowitz, 2010). Georgia then, reinforces the gender and sexuality dichotomies of heteronormativity. Therefore, selective coding reveals that, at an individual level, she feels she challenges heteronormativity, but from a structural viewpoint, Georgia is instead reproducing heteronormativity. From a different perspective, Jules, a 46 year old genderqueer person said:

I call how people think about gender into question every time I walk out in public. I don’t get to, and I wouldn’t anyway, take the route of being out or not. Because I outwardly confuse people so much, ‘Is that a man or a woman?’ my sexual orientation is automatically questioned too - sometimes getting tacked on. Oh, that’s a gay man trying to look more like a woman’, ‘That’s a butch.’ Add to that, when I’m walking around with [my wife], that really makes their intolerant little heads want to explode.
By appearing gender ambiguous and challenging traditional constructs of how men and women should appear, Jules is deemphasizing gender differences and challenging the gender dichotomy emphasized in the definition of heteronormativity. By mitigating gender differences, Jules demonstrates “undoing gender” (Butler, 2004; Deutsch, 2007; Risman, 2009). The concept of undoing gender emphasizes that gender inequality can be reduced through gender resistance. Furthermore, Jules challenges the notion of sexuality binaries, and as such, the normality of heterosexuality, because hir ambiguous gender complicates the ability for others to classify hir as heterosexual or non-heterosexual.

Just as there is some disconnect between how Georgia felt she challenged heteronormativity and how Jules felt ze challenged heteronormativity, there is also disconnect in how scholars interpret challenges to heteronormativity, and how the interviewees identify themselves as challenging heteronormativity. All interviewees felt they challenged heteronormativity with their bodies and genders. This relates back to Deutsch’s (2007) concept of undoing gender. Deconstructing the gender binary by transitioning genders serves to undo gender, because it allows others to recognize gender fluidity. However, not all interviewees identified themselves as out. In other words, some trans people hid the fact that they are challenging gender. Can trans people challenge heteronormativity or undo gender if they are stealth? In Doing Gender, West and Zimmerman (1987) discuss gender as a master status, or the first thing by which people are able to characterize other people. Heteronormativity is about structural perceptions of what is normal based on assumptions of heterosexuality (Warner, 1993). In being so, if gender is a master status and if a trans person is stealth (Meyerowitz, 2010), the
Regardless of being out or not, trans people can and do undo gender and challenge heteronormativity, by confronting gender inequality. The trans people in this study took a unique stance on gender inequality, having experienced it as both men and women or as a genderqueer person (Deutsch, 2007). Because of this, Deutsch argues, gender inequality can be reduced due to an increased awareness of it. Identified instances where interviewees discussed their new perceptions of inequality were open coded as “flip-side inequality.” Furthermore, when these new perceptions were used to combat gender inequality, the data was axial coded as “shifting power dynamics.”

Displaying a shift in power dynamics, Darrell, a 26 year old trans man who is not out to anyone but immediate family said:

> When I hear other men at school talking about sexual conquests and degrading women, I have to say something. I can’t just listen to it. Men like that is the reason why women become heartbroken and abused. I would know, I’ve been there. When I say something, they usually respond by calling me gay, but every once in awhile, I feel like I really get through to someone - without saying anything about why the issues affects me personally.

Through the reflection of his own experiences of sexual harassment by men when he lived as a woman, Darrell not only refuses to participate in this derogatory conversation, but confronts those who engage in it – thus undoing gender according to Deutsch’s (2007) definition. Also by doing this, Darrell took the risk of separating himself from other heterosexual men, which in this example, yielded questions of his sexuality (Pascoe, 2007). Likewise, Eve, a 26 year old trans woman challenges heteronormativity through her personal experiences:
“I hate when I hear people saying homophobic things. I hate when people say “gay” to mean something is whack. I hate when I overhear men calling each other gay when they don’t sleep with every girl they meet. Before I transitioned I lived as a gay man and to all these things, I have to say something and I make sure I say it loud enough that multiple people hear that these people are homophobic assholes.”

Only 6 of the 25 interviewees specifically stated that they challenged heteronormativity through the use of shifting power dynamics. However, through my analysis of the interview data, it was apparent that other respondents combated gender inequality in this way, but did not identify these actions as a challenge to heteronormativity

5.2 Reproducing Heteronormativity

To a certain extent, selective coding revealed that stealth interviewees who stated that they challenged heteronormativity by transitioning and demonstrating fluid gender may, on a structural level, be reproducing heteronormativity. A little more than half of the interviewees gave responses that indicated they reproduced heteronormativity by conforming to typically gendered appearances and behaviors or by marrying. Anticipating that interviewees may not identify themselves as reproducing heteronormativity through modeling gendered behaviors, I asked a question in a separate section of the interviews, “If you’ve had gendering surgeries, who or what influenced how you wanted to physically look after transition?” Responses were opened coded as “modeled appearances” and axial coded with the “identified gendered appearances and behaviors” theme to develop a common theme of “interviewee identified reproduction of heteronormativity through body norms.” In the effort to pass, interviewees discussed how they tried to epitomize gender norms and stereotypes of appearances and behaviors.

Georgia, a 20 year old trans woman said:
When I was finally able to see a surgeon about becoming a woman, I brought in pictures of famous women. I wanted to look like Scarlett Johansson. I wanted to do everything about being a woman to a T. I tried my best to be as feminine as a wealthy Southern belle and as sexually attractive to men as Pamela Anderson. I know I looked like a hooker for the first few months, but I was at least a female hooker.

Georgia didn’t want to resemble an average woman, but to resemble the ideal type. As such, she makes the effort to assert herself as a woman through stereotypically feminine appearances and is thus, doing gender (West and Zimmerman, 1987). Though few people in the world look like movie stars, it is not unusual for trans people to request similarities before cosmetic procedures (Bloom, 2004). Frankie, a 19 year old trans man said:

I didn’t really have anyone in mind that I wanted to look like, just like a man. Hormones don’t make you grow to be 6’2” and 200lbs, but they do make you grow facial hair. That was the best way I could think of to look manly and a lot of girls really dug it.

To Frankie, though ideal masculinity may have been being taller and heavier, he determined that facial hair was an indistinguishably male trait which facilitated his ability to pass. Again, this is an example of emphasizing gender differences to do gender and to pass. Anytime gender differences are emphasized, gender is being done and heteronormativity is reproduced (West and Zimmerman, 1987; Warner, 1993; Gagne, Tewksbury, and McGaughey, 1997; Deutsch, 2007). Georgia is also reproducing heteronormative standards of gender, by emphasizing the desire to be sexually attractive to women. Anytime there is a drive to do gender to be heterosexually desirable, heteronormativity is reproduced (Warner, 1993; Westbrook and Schilt, 2009).

A few interviewees felt they reproduced heteronormativity by participating in marriage. Marriage is perhaps the quintessential display of institutionalized
heteronormativity (Danby, 2007; Ward and Schneider, 2009). Again there was some disconnect between the axial coded theme of identified reproduction of heteronormativity through marriage and the selectively coded theme of individual versus structural reproduction of heteronormativity. On a structural level, heteronormativity would be reproduced if the couple entering into marriage identified as and appeared heterosexual. However, the marriage license process requires legal documentation of sex provided by a birth certificate and trans people born in Ohio are prohibited from updating their birth certificate to their gender of transition (The Ohio Constitution).

Most of the trans people who were married in the study identified as non-heterosexual and appeared non-heterosexual at their wedding. Recall, Rebecca who reported that she and her wife both wore dresses down the aisle. According to formal Ohio law, however, Rebecca is male and therefore her marriage was heterosexual under the law. At an individual level, Rebecca is reproducing heteronormativity by taking advantage of birth certificate laws in Ohio and entering into a typically heterosexual institution, which non-heterosexual couples are denying. On a structural level, Rebecca’s marriage simultaneously challenges heteronormativity, because Rebecca identifies as non-heterosexual and her marriage appears same-gendered.

5.3 Navigating Heteronormativity

Within the institutions of healthcare, marriage, family, education, and work, trans people are constantly navigating structural heteronormativity. In this study the term navigating is being used to describe how trans people interact with institutionalized heteronormativity on a daily basis.
Health insurance policies make transitioning difficult. Not only do trans people have to undergo psychological assessment (a controversial topic among interviewees), but also few insurance companies will pay for any gendering medications or procedures (Bockting and Avery, 2005). Combining open coded theme of “issues with psychological counseling,” “the cost of surgery,” and “health insurance coverage” yielded an axial coded theme of “identified healthcare barriers to transition.” Tameka, a 28 year old trans woman discusses how the lack of health insurance coverage for hormones and surgeries creates obstacles for trans people:

Do you know how much it costs to have sex reassignment surgery? Almost $10,000 for bottom surgery alone! Let alone everything else you have to have done! Not to mention top surgeries, hair removal, hormone pills, counseling, and everything else! A lot of people can’t be who they are because of this.

Sicily, a 24 year old exotic dancer and trans woman said:

You know, I got into dancing at one of those ‘chicks with dicks’ clubs to help me pay for my surgeries. I was going to go to college, but these surgeries were so important and so expensive that I did whatever I had to. Now that I’ve had [the surgeries], I love dancing. These men see me as an attractive woman. [The surgeries] cost so much.

Health insurance companies will deny coverage of most treatments trans people require throughout the transitioning process. Those who support these health insurance policies deem the surgeries an unnecessary mutilation of the body. However, proponents of gendering procedures deem it quite necessary for the well-being of trans patients who wish to have it done (Brownstein, 2009).

Post-transitioning, interviewees were faced with further policy concerns. All interviewees have lived their adult lives, before and after transition, in Ohio. Ohio does not allow same-sex marriage and will not recognize a same-sex marriage performed in
another state (Lavely, 2007). Marriage laws in Ohio require that marriage be between “one man and one woman” (The Ohio Constitution). However, the marriage license application process requires proof of legal sex. While in some states trans people can officially change their legal sex on their birth certificate, this is prohibited for those who are born in Ohio. Because trans people cannot change their legal sex in Ohio, the laws actually favor these non-heterosexual couplings. Darrell, a 26 year old trans man who identifies as non-heterosexual said:

I didn’t think [my partner] and I would be able to get married in Ohio, because we’re a same-sex couple, a transsexual friend of mine told me about how he was able to get married to his husband because his birth certificate said he was a woman still. I didn’t want to use it at first, but we really wanted to get married.

Marriage themes were open coded as “married - identified heterosexual,” “married - identified non-heterosexual,” and “issues with same-sex marriage laws.” An axial theme that emerged from this open coding was “using marriage laws to challenge heteronormativity.” In Darrell’s example, Ohio law would view a trans man as a legal woman (if unable to change birth certificate) and, therefore engaging in heterosexual and, thus legal marriage with their male partner. While the institution of marriage has been labeled as a heterosexual privilege, in this example, Darrel’s marriage challenges heteronormativity by appearing same-sex. It seems that Ohio law confirms Kogan’s findings (2004), which state that marriage laws favor procreative coupling, rather than the actual appearance of heterosexuality.

In the same aspect of building a family, to adopt prospective parents need to supply their birth certificate, and if adopting as a couple, their marriage license (Lavely, 2007). Ohio law allows heterosexual couples and single parents of any orientation to
adopt. However, Ohio law does not allow adoption by same-sex couples (Lavely, 2007). But, once again, Ohio does not allow trans people to alter their birth certificate, so couples who appear same-sex are, by Ohio law, heterosexual.

Institutionalized heteronormativity in the form of marriage and adoption laws make it difficult for trans people to form families of their own. Olympia, a 23 year old trans woman said:

*I can’t get married, I can’t have kids, I can’t adopt kids, so I don’t get to have a family of my own. This is my punishment for not being like everyone else.*

Hilary, a 49 year trans woman recalled when she and her partner wanted to adopt:

*My partner and I really wanted to and still really want to adopt a child. The first time we tried, we provided our birth certificates which showed that we were actually a ‘heterosexual’ couple. They fought us tooth and nail because I was a transsexual. We eventually lost the battle – we kept being told that they didn’t have any children to place or that the children didn’t want to be placed with us. We’re going to keep trying.*

Trans people must also navigate social heteronormativity every day at school and/or in the workplace. In contrast to government policies, in schools and the workplace, trans people must cope with heteronormativity at a more personal level of social interaction. At school, interviewees state that they had been subjected to discriminatory practices such as, heterosexual only sex education programs and the discouragement of LGBT and alliance groups (Fine, 1988; Bay-Cheng, 2003). I anticipated a larger response related to sex and gender education in schools or differential treatment by instructors or colleagues. However, there was a surprising response in which interviewees identified the lack of LGBT and alliance groups as a prominent issue in the education system. Mel, a 22 year old trans man and student revealed:
I think if more schools had groups like [our LGBT group], people would be a little more tolerant of our kind [trans people]. Like, when we do cool games or socials, we usually get a couple new allies to join up with [our group] or at least get to talk to some people who may have never met a transsexual or a queer person and let them know we aren’t freaks. We’re just normal people like them.

Mel’s example demonstrates how LGBT and alliance groups can be used to reduce gender differences and, thus, undo gender (Deutsch, 2007). Mel strives to not only inform others about trans people, but inform others that trans people are normal despite openly challenging heteronormative gender norms.

The workplace, interviewees thought, was the worst place to navigate heteronormativity. Of those who worked full time, 7 were stealth and 8 were out. Those who were stealth feared being outted, which they felt may cost them their jobs or create an uncomfortable working environment. Though individual companies may have policies prohibiting trans and gender identity discrimination, there are no federal laws, which explicitly protect trans employees (Harris, 2002). However, more recently, the Supreme Court has ruled that Title VII can be interpreted to include both sex and gender discrimination (Chow, 2005). The 8 interviewees who were out as trans at work experienced what was axial coded as “uncomfortable working environments” due to the open coded themes of “sexual harassment at work”, “skill evaluations”, and “gender performance policing at work”. Interviewees reported an increase in sexual harassment when coworkers, especially male coworkers, knew their trans identity. Findlay (1999) found that harassment of any kind was likely to occur when trans people were out in the workplace. Other interviewees said that they were questioned or held to unrealistic
standards when co-workers and supervisors were made aware of their trans identity. A few interviewees also felt that co-workers policed their gender performance. Finally, interviewees discussed dealing with judgment by others and discriminating government policies through passing and through activism. If trans people successfully pass, they can blend seamlessly into society, achieving their identified gender as their master status, only to be known by those the trans person is out to (West and Zimmerman, 1987; Meyerowitz, 2010).

Some interviewees also discussed that they get involved in activism, whether it be letter writing campaigns, or their school’s LGBT meeting and fundraisers. Dawn/Don, a 48 year old genderqueer person and activist said:

I go out there and I raise awareness. Awareness of our existence. Awareness of our issues - and I hope that somehow that creates an environment for the facilitation of tolerance and support. I can’t make the government give me what I need, but I can generate support and rally people together to start to get some institutional change - or at least recognition.

This idea of informing the masses of the struggles of a marginalized group is one of the ways in which Deutsch (2007) said that gender can be undone, by using the smallest level of social interaction to inform the consciousness of others for a step toward change (Connell, 2010).

The analyses of the interview data in this study demonstrated that trans people challenge, reproduce, and navigate heteronormativity and do so at an individual and structural level. Where interviewees may have self-identified as challenging or reproducing heteronormativity, often times from a structural perspective the interaction may not be as evident or may be perceived as having the opposite effect.
CHAPTER 6: CONCLUSION

For my thesis, I sought to understand the relationship between trans people and heteronormativity – how trans people are affected by structural heteronormativity and whether trans people challenge or reproduce heteronormativity. Scholarly research discussing the interactions between trans people and heteronormativity is underrepresented, though these interactions are integral to gender theory, especially gender inequality. Trans people have the unique perspective of having experienced heteronormativity and gender inequality as men and women and as heterosexuals and non-heterosexuals while maintaining the effects of race and class. Having lived parts of their lives in different positions of power and privilege, trans people shed new light on theories of gender inequality, performance, and resistance. Previous literature has often theorized trans people as gender resistant challengers to both heteronormativity and gender inequality. However, I argue that trans people also, in some cases, reproduce heteronormativity and gender inequality. This was confirmed through my analysis of 25 interviews conducted with self-identified trans people. Findings suggest that not only do trans people challenge and reproduce heteronormativity and gender inequality, but they do so at both an individual and structural level. Furthermore, sometimes what interviewees felt affected these phenomena on an individual level, may have had the opposite effect at a structural level. This chapter will outline the limitations of my thesis, the contributions to scholarly literature and the trans population by giving agency to trans people, and finally the policy implications of my thesis findings.
Potential limitations of my thesis stem from my sample, my interview structure, and my extended interpretations. Though the sample was diverse in terms of race, all respondents had lived their adult lives in Western Ohio and most were born in Ohio. This means that interviewees, for the most part, reflected on institutionalized heteronormativity in terms of Ohio policies and the conditions of their geographically constrained region. Another potential limitation may be my extended interpretation of how interviewees challenged and reproduced heteronormativity at different levels. Though interviewees identified themselves as challenging or reproducing heteronormativity at a structural level, when analyzed, their interactions were often found to be occurring at an individual level. In fact, findings suggested that sometimes the opposite effect on heteronormativity may be occurring at a structural level. This may be a limitation of this study; because it may demonstrate poor articulation to interviewees that structural heteronormativity is highly dependent on the visibility of heterosexual behaviors and appearances.

Despite these limitations, my thesis is not without contribution to scholarly research and the trans population. The study of trans people should not be overlooked in discussions of gender theory, performance, resistance, and inequality. When applied to trans people, some theorists may argue that they do gender by transitioning and displaying appearances and behaviors which signify their identified-gender. Other theorists may argue that trans people undo/redo gender because the fluidity of their gender and sexuality deemphasizes the differences between men and women. Rather than confirming one theory over the other, the current study, rather, supports Connell’s (2010)
assertion that trans people simultaneously do and undo/redo gender. Also, in doing and undoing/redoing gender, this study finds that trans people also simultaneously challenge and reproduce heteronormativity. Furthermore, these phenomena occurred at a personal and structural level based on whether interviewees identified themselves as out or stealth (Meyerowitz, 2010), which is a finding that previous literature has ignored. While on a personal level interviewees may have felt that they challenged heteronormativity by having transitioned genders, from a structural and cultural perspective, challenging heteronormativity and, as such, undoing gender would only occur if the trans person was out as trans. If the person is out as trans, then others are made aware of their gender resistance, thus openly challenge traditional constructions of masculinity and femininity. If stealth and successfully passing, trans people would be perceived as their identified gender; therefore, both doing gender and reproducing heteronormativity by confirming appearance and behavioral differences between men and women.

An important contribution to the trans population is that my thesis focused on self-identification. In many cases, past literature has applied theories to trans people without interviews to support the applications. In this study, interviewees were not only recruited based on their self-identified trans status, but the purpose of the study was aimed at allowing interviewees to self-identify their interactions with heteronormativity in both their personal and social spheres. Contributing to the literature on trans people, my thesis not only informs readers of inequalities affecting the trans population, but also emphasizes the importance of the inclusion of trans people in sociological research.
Finally, my thesis illuminates some policy implications. Deutsch (2007) and Connell (2010) emphasize the importance of informing the feminist consciousness to facilitate tolerance which may lead to structural change. As such, this study informs readers of trans issues with cultural heteronormativity, thus creating an opportunity for increased awareness and tolerance of fluid gender and sexuality. Increased awareness of trans issues is key to structural change and the implementation of policies. So far 13 states have passed laws which prohibit discrimination in employment based on gender identity (Connell, 2010). Continued research and scholarly publications will continue to contribute to the effort in prohibiting discrimination based on gender identity across institutions.

My thesis provides a valuable foundation for my continued research with trans people. Having addressed marriage, family, healthcare, education, and work all within a single interview, may have limited the discussion of the extent interviewees interactions with heteronormativity within institution. However, it illuminated which institutions were most troublesome for trans people and which were not. For example, response data was relatively limited on heteronormativity in education as compared to the other institutions discussed. In contrast, the discussion of heteronormativity within the workplace yielded multi-faceted issues for trans people, which could be more thoroughly delved into in a future study addressing only trans people and the workplace.
REFERENCES


Appendix A: Institutional Review Board Approval

Project Title: Complicating Normal: How the Transgender Population Simultaneously Challenges and Reproduces Heteronormativity

Primary Investigator: Katherine Kassner
Co-Investigator(s):

Faculty Advisor: Cynthia Anderson

Department: Sociology

Rebecca Cale, AAB, CIP
Office of Research Compliance

Approval Date: 12/22/09
Expiration Date: 12/21/10

This approval is valid until expiration date listed above. If you wish to continue beyond expiration date, you must submit a periodic review application and obtain approval prior to continuation.

Adverse events must be reported to the IRB promptly, within 5 working days of the occurrence.

The approval remains in effect provided the study is conducted exactly as described in your application for review. Any additions or modifications to the project must be approved by the IRB (as an amendment) prior to implementation.
Appendix B: Ohio University Consent Form

Title of Research: How Trans People Simultaneously Challenge and Reproduce Heteronormativity.

Researchers: Katie Kassner Ohio University Graduate Sociology

You are being asked to participate in research. For you to be able to decide whether you want to participate in this project, you should understand what the project is about, as well as the possible risks and benefits in order to make an informed decision. This process is known as informed consent. This form describes the purpose, procedures, possible benefits, and risks. It also explains how your personal information will be used and protected. Once you have read this form and your questions about the study are answered, you will be asked to whether you wish to continue with the study. You should receive a copy of this document to take with you.

**Explanation of Study**

This study seeks to interview adults who identify themselves as trans in any way. This includes individuals who are transsexual, born with an intersex condition, cross-dressers, transvestites, drag kings and queens, genderqueer persons or any other adult who otherwise identifies as trans.

You will be participating in an interview estimated at approximately one-hour. The interviews will be audiotape recorded by the investigator and later transcribed for the purpose of data analysis. The interviews will be conducted at a setting that is mutually agreeable to the participant and the researcher.

The interview will include questions related to your demographics, trans identity, and interaction with heteronormativity. Heteronormativity for the purpose of this study is defined as the assumption and expectation of heterosexuality within members of a given society. It is what is culturally acceptable and reinforced by policies and cultural norms; for example, expectations of how men and women should look or behave sexually. The investigator will remain a neutral source of information for needed clarification of questions or terminology.

**Risks and Discomforts**

There are no known risks of answering these questions during the interview. All identifiable material will be secured and the tapes with the recorded interviews will be destroyed upon the completion of transcription.
Benefits

The anticipated benefit of participation is the opportunity to confidentially and safely discuss feelings, perceptions, and anything else associated with the interview questions. This study is an opportunity for participants to contribute to the limited body of literature on the trans population.

Confidentiality and Records

The recorded information gathered during this study will remain confidential and will be stored in a locked location to which only the investigator has access. There will not be any identifying names on the tapes, and participant’s names will not be available to anyone for any reason. The tapes will be destroyed at the completion of the study. The results of the research will be published in the form of a graduate paper and may be published in a professional journal or presented at professional meetings.

Additionally, while every effort will be made to keep your study-related information confidential, there may be circumstances where this information must be shared with:

* Federal agencies, for example the Office of Human Research Protections, whose responsibility is to protect human subjects in research;
* Representatives of Ohio University (OU), including the Institutional Review Board, a committee that oversees the research at OU;

Compensation

Participants will not receive compensation for participation in this study.

Withdrawal without repercussion

Participation in this study is voluntary; refusal to participate will involve no penalty. Each participant is free to withdraw consent and discontinue participation in this project at any time without repercussion. Should a participant decide to withdraw from the study, all recorded data regarding that individual will be destroyed and eliminated from analyses.

Contact Information

If you have any questions regarding this study, please contact Katie Kassner at kk913108@ohio.edu or katie.kassner@gmail.com

If you have any questions regarding your rights as a research participant, please contact Jo Ellen Sherow, Director of Research Compliance, Ohio University, (740)593-0664.
Appendix C: Interview Guide

In this first section of the interview, you will be asked general demographic questions. Please note that you are free to skip any question which you are uncomfortable with or stop the interview at any time.

- What is your age?
- Were you born in Ohio?
- What is your gender?
- How you identify yourself in terms of race and/or ethnicity?
- What is your educational background? What is the highest level of education you have completed?
- What is your relationship status? (joined, married, unmarried partner, single, etc.)
  - If married, were you married in Ohio?
- Do you have children?
  - If yes, were any of your children adopted?
- What is your occupation or current employment status and position?

In the next section of the interview, you will be asked various questions regarding your trans identity.

- How do you identify yourself as trans?
- How long have you identified as trans?
- If married, did you transition before or after marriage?
- Were you able to change your birth certificate to denote the correct gender?
- Who, if anyone, are you out to as trans?
  - As an (out/stealth) trans person, what do you think of other trans people who are not (out/stealth)?
- If you’ve undergone cosmetic procedures as part of the transitioning process, who or what influenced how you wanted look?
• If passing is/was a goal for you, what has most affected your sense of passing or made you feel successful or unsuccessful?

• What types of problems, if any, did you experience in the transition process?
  o Have those issues been resolved? After transition have new problems or issues arisen?

• How do you feel others view or judge you?

The final section of this interview will focus on institutionalized heteronormativity or heteronormative policies in the United States. As a reminder, heteronormativity is the assumption and expectation of heterosexuality within members of a given society. It is what is culturally acceptable and reinforced by policies and cultural norms; for example, expectations of how men and women should look or behave sexually.

• Do you feel that, given your trans identity, marriage laws will be/have been an issue or that you will be/have been affected by marriage laws? (Ohio law prohibits same-sex marriage upholds that marriage can only take place between a biological male and a biological female as supported by a birth certificate).

• Do you feel that, given your trans identity, your ability to have or adopt children has been or will be affected? If you have adopted children, was your trans status an issue? (Ohio does not allow same-sex partners to adopt)
  o If partnered, were you and your partner able to adopt as a couple? If not, was your able to be added as a second parent at a later time?

• Do you feel that you will be/have been affected by healthcare or health insurance policies, because of your trans identity? Have you required procedures or medications to complete your trans identity? Did health insurance cover these necessities? Did you have to undergo psychological assessment prior to your transition?

• Do you feel that, given your trans identity, the education system has been an issue? Do you think trans people are discussed in schools? Sex and gender education? Did you identify as/are/were you out as trans while you were in school? If so, do you feel that your trans status yielded differential treatment by colleagues or instructors? Did anything else contribute to your level of comfort/discomfort as a student?

• Do you feel that your trans identity is an issue in the workplace? Are you out as trans at work? If not, why? If so, has your trans status affected evaluations of your skill sets/abilities? Have coworkers or supervisors treated you differently? What
is your professional appearance (i.e. clothing, make-up).

- Given this discussion regarding your trans status and the interaction with the institutions of marriage, family, healthcare, education, and work, do you feel that institutionalized heteronormativity has played a significant role in your life as a trans person? Has it been a problem?

- Given your trans identity, do you feel that you challenge heteronormativity in any way?

- Given your trans identity, do you feel that you reproduce heteronormativity in any way?