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Queer Youth in the Province  
of the “Severely Normal”

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Queer Youth in the Province  
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*For Debra and Ryan*



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# Introduction

Rudolf, one of Alberta's queer youth, wrote the following:

I hated junior high. Even though I had not admitted to myself that I was gay until grade nine it seems that everyone else figured it out before me and then discriminated against me. I found a poem that I wrote around that time. It's not that good a poem because it was written by a thirteen-year-old, but it explains how I felt.

## **Discrimination**

The hatred of differences within humans.  
A terrible crime when committed.  
A serious problem of the human race,  
caused when two different individuals conflict.

One – a poor soul whose disturbed and troubled state receives little sympathy.  
One – an inventor of mistreatment whose own ideas of superiority have been passed down from  
his or  
her forebearers.  
Discrimination.  
When committed, it causes great pain.

Discrimination.  
The problem revolves around opinions of others.  
Why does it happen?  
Everyone is and deserves the same.  
Why must it happen?  
Why?  
*It is horrible!*

Discrimination.

A problem that must be stopped.

Discrimination.

One of the factors that helped to create our sick and toxic society.

Discrimination.

A part of the predicament in which our world is.

Discrimination.

Almost unsolvable.

Discrimination is.

This book is an account of how queer youth in Alberta in the 1990s negotiated expert, legal, and popular discourses about sexuality, many of which overwhelmingly denied the value of their lives. Alberta is still the only Canadian province distinguished by state-sanctioned homophobia. Yet Alberta is also the home of some important initiatives with respect to queer youth in schools, such as the Calgary Board of Education's "An Action Plan for Gay/Lesbian/Bisexual Youth and Staff Safety" (1996). And, of course, most young people in Alberta have access to popular culture that extends well beyond the provincial boundaries through television, movies, videos, the Internet, books, and magazines, all of which provide a range of representations of queer people.

I am interested in how youth identities are constructed through dominant and often competing discourses about youth, sexuality, and gender, and how queer youth living in Alberta in the 1990s negotiated the contradictions of these discourses. In part, this is a project of "surfacing" what Foucault (1979, 81) refers to as "subjugated knowledges" in order to demonstrate that queer youth are indeed present in Alberta.

The 1990s in Alberta, Canada, were marked by active provincial government contestation of the legal rights of sexual minority citizens; this was juxtaposed with expanding lesbian and gay rights at the federal level. In Canada, federal and provincial governments are both interdependent and autonomous. Provincial governments provide local, regional representation from a provincial capital city, while the federal government, located in Ottawa, represents the Canadian state. While Canadian law is based on a British parliamentary system, the adoption of the Charter of Right and Freedoms in 1982 made Canada into a more hybrid legal culture with an American type of constitutionally entrenched bill of rights (Stychin 1995). Provincial human rights codes were to be realigned with the new federal charter, but a grey area relating to protections for sexual minority Canadians allowed for exclusion within both federal and provincial codes. A series of court challenges taken to the Supreme Court of Canada resulted in inclusion of protections for gays and lesbians in the existing charter (Yogis, Duplak, and Trainor 1996). The province of Alberta remains unique in the Canadian

mosaic of ten provinces and three territories for its continued refusal to realign its human rights code or to extend human rights protections by reading homosexuality as a protected category into the provincial human rights code.<sup>1</sup> Provincial premier Ralph Klein has defended this position by indicating that “severely normal” Albertans do not support such measures.<sup>2</sup>

It is worth noting that Alberta is an oil-rich province whose dominant identity and brand of politics is informed by a frontier mentality that focuses on rugged individualism entwined with an ethos that insists that Albertans are misunderstood by an eastern, centrist, urbane, large, and biased federal government. While the content of debates within federal politics shifts, in the minds of many Albertans regional-federal friction is serious enough to surface and to justify calls for western separatism – a desire to pull away from “nanny state politics,” which, among other things, are thought to include human rights codes. As well, Alberta’s historical legacy includes a brand of religious conservatism – Christian fundamentalism – that shares a thirty-five-year history with Alberta’s Social Credit Party, which was in power from 1932 to 1968.<sup>3</sup> Christian fundamentalism, although reduced to minority status in the province, continues to co-exist alongside the fiscal conservatism of the newer provincial Progressive Conservative party, which came to power in 1968 and continues to govern to this day.<sup>4</sup> The struggle over human rights protections for lesbians and gays is one of a series of struggles produced by the contradictions between the interdependence/autonomy of the regional-provincial government in relation to Canadian federalism.<sup>5</sup> This struggle also concerns determining what constitutes a proper, “normal” Alberta identity and who rightfully belongs within the Alberta community/mosaic.

During the 1990s Alberta was the home of the widely circulated *Alberta Report*, a weekly magazine that, in almost every issue, represented gays and lesbians as disgusting deviants.<sup>6</sup> *Alberta Report* had a considerable impact on the discussion regarding who constitutes a legitimate Albertan. While in many ways a fiscally marginal magazine, *Alberta Report* had a significant impact on discourses about social values. It was regularly engaged in its letters page by university presidents, academics, politicians, and other prominent citizens (Fraser, 21 October 1996, 3; Grundy, 28 October 1996, 3). Copies of *Alberta Report* were often provided free of charge to schools, libraries, and many businesses. As well as being a ubiquitous presence in Alberta, remarkably, *Alberta Report* had the most complete and comprehensive coverage of queer issues in the province during the 1990s. Unlike the mainstream media, *Alberta Report* took (the perceived threat of) sexual minority peoples seriously. From a few articles in 1992, representations of homosexuality rise to a crescendo of hatred in a series of frenzied diatribes that occurred leading up to, during, and immediately following the Supreme Court decision on *Vriend*. Studying queer issues as they are presented in this magazine,

which I do in the final chapter of *Queer Youth*, offers a unique understanding of both mainstream and queer culture and politics in 1990s Alberta.

### **A Note on Queer**

Despite its use as a pejorative to refer to sexual minority people, “queer” has been reclaimed both as a political strategy and as a method of inquiry. “Queer” gained intellectual capital at a conference theorizing lesbian and gay sexualities held at the University of California, Santa Cruz, in February 1990. The conference was based on the premise that homosexuality is no longer defined either by opposition to or homology with a dominant, stable form of sexuality (heterosexuality) or as merely transgressive or deviant in relation to a proper or natural sexuality. Participants were invited to reconceptualize male and female homosexualities as social and cultural forms in their own right, even if undercoded and dependent upon more established forms of sexuality. As such, “queer” suggests both a rupture in and the continuity of lesbian and gay identities.

“To queer,” as a political strategy and as a method of inquiry, is to problematize identity categories by exposing how the assumptions upon which they are based are normalizing, reifying, homogenizing, naturalizing, and totalizing. Queering of sexuality, then, can and is performed not only by anyone in the street, the cabaret, the legislature, or the academy who refuses to take seriously the straight-gay binary but also by those who disrupt notions of stable gay and lesbian identities. When “lesbian” and “gay,” as identity categories, are regarded as opposites to “heterosexual,” the effect is not only to fix a notion of a normal sexuality within a two-sex, two-gender, one-sexual orientation system but also to set the characteristics of the “deviant” homosexual. To queer is to expose the assumption that gender, chromosomal sex, sexuality, and sexual desire cohere and that once one has information about one of these, it is possible to know with certainty about the rest (Jagose 1996, 3). To queer is to see heterosexuality not as the original, or that from which homosexuality deviates, but, rather, to see hetero- and homosexuality as mutually productive of one another. This is why Sedgwick (1990, 1) argues that not only do the social consequences of the hetero-homo divide affect “a small, distinct, relatively fixed homosexual minority” but that they are also of “continuing, determinative importance in the lives of people across the spectrum of sexualities.”

To queer is to notice, call into question, and refuse heterosexuality as the natural foundation of social institutions. As Warner (1994b, xiii) writes, “realization that themes of homophobia and heterosexism may be read in almost any document of our culture means that we are only beginning to have an idea of how widespread those institutions and accounts are.” Because heteronormativity permeates all social institutions (family, religion, work, leisure, law, education), challenging or queering this order has the

effect of challenging common sense ideology pertaining to what it means to be a human being.

Used as an adjective, as in queer research, queer youth, or queer researcher, “queer” suggests that the person or the work takes seriously the project of noticing, questioning, and refusing how the notion of “the normal” is produced (Shogan 1999). I refer to the young people in this study as queer youth rather than as sexual minority or gay and lesbian youth because, by virtue of responding to my advertisements, these young people indicated that they questioned and refused how they had been categorized in mainstream Alberta. While many of them did not have the language to signify that they refused the categorizations that fix sexual minority people as deviant and shameful, their boldness in meeting with me to tell their stories in the face of adversity is significant enough for me to see them as queer.

While this work would not have been possible without assuming the position of queer researcher (noticing, questioning, and refusing assumptions of heteronormativity), this is not without its risks. As David Halperin (1995, 138) indicates, queer researchers are often placed in a double bind in which they risk not being heard because of their perceived deviance: “And if to speak as a gay man [queer] about a topic that directly implicates one’s own interests is already to surrender a sizable share of one’s claims to be heard, listened to, and taken seriously, then to speak not as the designated representative of a subcultural minority but as a dedicated critic of heterosexual presumption is surely to put the remaining share of one’s credibility at risk.”

The double bind here involves writing from within a heteronormalized culture in which the queer researcher is both the subject of what she writes and the objectified deviant. To refuse to be designated as representative token, while insisting on one’s status as a critic of heteronormative culture, risks undermining one’s authority as a researcher. The question at its most basic is whether one can be queer and scholarly at the same time. Disallowing the critical queer scholar to function within an authorized category assumes the same logic that de-authorizes, de-legitimizes, and silences social deviants. The “truth” of “deviant” existence is accomplished through the use of objectifying and pathologizing terms. Thus the conundrum of the queer researcher is “the inescapably vexed, treacherous, and volatile politics of any attempt ... to write about the meaning of a socially deviant life” (Halperin 1995, 134).

### **The Research**

Immersion in queer culture is difficult when there is no geographic place that one can locate as “queer.” Unlike Spradley’s (1979) homeless men, who can be located as a group within particular geographic places in inner city areas and streets, queer people are dispersed and yet everywhere. Nor are queer people contained by race, class, gender, religion, age, physicality, or

nation. Warner (1994b, xxv) writes that notions of community and culture are, in fact, problematic for queer people: "Much of lesbian and gay history is about noncommunity, and ... dispersal rather than localization continues to be definitive of queer self-understanding." Adam (1996, 121) refers to this as a colony away from an original homeland, likening it to a diasporic community. However, unlike Jewish peoples, for example, queer people have no collective homeland from which we have been dispersed. Dispersal, non-community, and lack of home are some of the defining features of queer living, often especially so for queer youth. The location of queer people – the diasporic space – is often the closet. Even though I was interested in how these queer youth negotiated their school lives, I did not engage in participant observation in their schools because most of them occupied a diasporic space there, and my presence would have threatened it.

It was possible, however, to use participant observation as a method of examining heteronormative culture (i.e., that from which queer people are dispersed) and, in particular, the ways in which that culture structures life for queer youth in and out of the closet. I was, then, in the unique place of being an ethnographer in the classical sense. I was permitted the peculiar advantage of observing heteronormative culture from the vantage point of a queer person. I was an outsider, a traditional ethnographer, in this heteronormative world: "a stranger in a strange land." Ethnographic methods did allow me to explore queer culture, and, in particular, ethnographic interviews provided a way for me to do an in-depth exploration as an insider of a culture without a place.

In the fall of 1997 I began advertising in alternative presses – Edmonton's *Times.10*, *Womonspace*, and Calgary's *Outlooks* – for queer youth to contact me if they were interested in telling me about their experiences as a queer young person living in Alberta. I was particularly interested in their experiences in school. I also attended meetings of queer youth groups in Edmonton and Calgary, where I invited members to participate in the research. The first contact came via mail in late September; others followed by phone and e-mail. I arranged to meet each person for coffee so that we could get to know one another and to ensure that the relationship would be sustainable for at least two two-hour sessions. Several potential subjects did not show up for our arranged coffee, and several others decided not to participate. Half of those who continued with the project were from Calgary or Edmonton, Alberta's two major cities. Of the twelve participants, only three were female (in both Calgary and Edmonton, there were fewer girls than boys participating in youth groups).

One youth decided to communicate via e-mail while the rest met with me on at least two occasions. The Edmonton interviews were conducted in offices and coffee shops around Edmonton. The Calgary interviews were more difficult. The first set included a coffee shop and the University of

Calgary campus. The second set was conducted at the local AIDS network office, and the third was conducted at the International Hotel. If the lobby staff thought anything about the series of young men passing through my hotel room, each for approximately an hour and a half, no one said anything to me. I met each young man in the lobby, and after the interview I escorted him back there, where I would meet the next one – six in a row on one weekend.

During the interviews each young person told a story about his or her life in Alberta. Important as this was, however, my responsibility to these young people involved more than telling their stories. I also felt the need to show that, while many of them had been victimized, they were not victims. Many of them expected that I would take their stories and “do something” (Virginia, 1998; Jack, 1998; Oscar, 1998). They wanted me to put pressure on educational institutions and government to change things so that what had happened to them wouldn’t happen to others. This was a lot to expect from a research project, particularly one located in Alberta, with its particular brand of homophobic inertia. But, then, as Jagose (1996, 111) indicates, when it comes to attaining political goals, it is “far from clear that writing a paper, or developing an analytical framework, is any less effective than various other gestures.”

### **Understanding Discourse**

My project is to show how the various dominant discourses about gender, sexuality, and youth that circulated in expert, legal, and popular forms were negotiated by queer youth living in Alberta in the 1990s. A discourse is a regulated system of knowledge (in this case, knowledge about gender, sexuality, and youth) supported by social institutions, which constrain what can be spoken, how it may be spoken about, and who can speak it. Discourses produce positions from which people can speak as well as related social practices. In Chapter 1, for example, I am interested in how gender discourses work to keep intact the assumption that there is a coherency between sexed bodies, behaviour, and sexual desire and practice; in Chapter 2 I explore how mainstream youth studies assume the heterosexual subject; in Chapter 3 I look at how Canadian legal discourses have produced sexual minority legal status; and in Chapter 4 I address how ultra-conservative popular discourses, such as that produced by *Alberta Report*, actively work to produce what can legitimately be said about “the homosexual.”

Since I focus on dominant notions of what counts as gender, sexuality, and youth, my concern is to make apparent the prominent features of these discourses rather than to systematically document singular examples of them. This is particularly so in Chapter 3, where my project is to outline the features of legal discourse in Canada that facilitated what can be said about who counts as a sexual minority. This discourse analysis contrasts with a

traditional historical approach to the material, which might, for example, document all the legal cases pertaining to sexual minority issues.

For a number of reasons I do not present the stories of Alberta's queer youth as a coherent whole. Since I wanted to make sense of these stories in relation to expert and popular discourses, I present the interview material intertextually. As well, a coherent, linear presentation of the youth stories would assume that the experiences they recount are somehow straightforwardly accessible and knowable. They are not.

I pursue a number of writing strategies in this book. Theoretical, legal, and expert accounts take up a disproportionate portion of the chapters in relation to the voices of the youth. This is in order to demonstrate the relentlessness and heaviness of the discourses that these young people must negotiate. In the first three chapters the voices of queer youth are juxtaposed with academic discourses that purport either to be about young people or to shape the world in which they live. In Chapter 4 these voices are placed in relation to accounts from the *Alberta Report*, the weekly magazine that devoted itself to documenting events and decisions related to the lives of queer people in Alberta.

As well, the juxtaposition of voices "queers" expert and popular discourses that so unproblematically fix identities, such as "girl," "boy," "youth," "homosexual," and "expert." In some cases these categories are called into question when what the youth have to say contradicts what expert discourses say about gender, youth, and sexuality. In other cases, the youth voices disrupt these categories by substantiating research that has not countenanced their existence. In Chapter 4 queer youth voices resist and expose the mean-spiritedness of the representations of queer people in *Alberta Report*.

In all four chapters it has been important to me to represent the stories of these young people as more than "painful stories of subjection and pathos" (Britzman 1995, 68). It would have been easy to yield to the statistics on suicide and stories of harassment and abuse and to describe how these accounts constitute the stories of these young people's lives. However, as the youth voices in *Queer Youth* convey, their lives are not consumed by pathos.

Eve Sedgwick's *The Epistemology of the Closet* (1990) is based on a number of axioms, the first of which is that people are different from each other. She observes that "it is astonishing how few respectable conceptual tools we have for dealing with this self-evident fact" (22-3). By situating the voices of the youth in this text in the way that I do, I hope to demonstrate that, even though these people have faced common difficulties as queer youth, they do differ from one another. Each has a personal life history, differently intersected by religion, family, race, class, gender, physicality, ethnicity, and a range of other differences. The fragments of their voices are intended to disrupt closure or certainty and to represent the partiality of lives that refuse to be trapped in totalizing academic and popular discourses. By offering

partial stories and fragmented voices, I resist fixing their identities and, instead, insist on constant and ongoing identity formation. Refusing to fix either them or their experiences is the very least that I can do for the queer youth who shared some parts of their lives with me so that this book might be written.

### **Organization of *Queer Youth***

Chapter 1, “Gendering: Troubled Theories, Troubling Identities,” explores how discourses of gender and sexuality affect gender non-conformist children and youth. The existence of experts (amounting to an industry) to contend with gender non-conformity is an effect of the cultural imperative that physicality must cohere with expected social behaviours and that these, in turn, must line up with sexual desire and sexual practice. The stories of queer youth expose not only how bodies, behaviour, desire, and sexual practice align in a number of different combinations but also the desperation of a culture that would consent to behaviour modification, surgery, and, in extreme cases, death to achieve conformity.

In Chapter 2, “Production and Consumption of Youth Identities: Understanding Youth in the Context of Youth Studies and Popular Culture,” I examine how social science research has produced the category “youth” and how queer youth negotiate the subject positions constrained by this category.

Chapter 3, “The Social-Legal Production of Sexual Minorities in Canada,” explores how legal discourse has produced what can be said about sexual minority status in Canada and how, in doing so, it has positioned what counts as an illegitimate sexual minority. I look at how Bill C-23 and other laws and legal decisions maintain a notion of who counts as “normal” and “abnormal” members of a community, even as legal possibilities are opened up for sexual minorities. Also, in looking at three cases that focus on teachers and three stories drawn from ethnographic interviews with queer youth, I examine how legal discourse has affected education in Canada.

In Chapter 4, “Queer Identities and Strange Representations in the Province of the Severely Normal,” I identify some of the discourses about homosexuality and gender that circulated in Alberta from 1992 to 1998. I do this by examining representations of homosexuality espoused in *Alberta Report*, by elected officials, and by other citizens in the province. In this way I highlight the culture of moral panic around homosexuality in Alberta that confronted the province’s queer youth.



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Queer Youth in the Province  
of the “Severely Normal”



# 1

## Gendering: Troubled Theories, Troubling Identities

Identity is not as transparent or unproblematic as we think. Perhaps instead of thinking of identity as an already accomplished fact, which the new cultural practices then represent, we should think, instead, of identity as a “production,” which is never complete, always in process, and always constituted within, not outside representation. This view problematises the very authority and authenticity to which the term “cultural identity” lays claim.

– Stuart Hall, *Cultural Representations and Signifying Practices*

Humans are born into a world with already existing notions of what it means to be embodied as male or female. As philosopher Marilyn Frye (1983, 22) writes, “We are socially and communicatively helpless if we do not know the sex of everybody we have anything to do with.” Since, in most cultures, it is inappropriate to show one’s genitalia in order to assist communication and other social interaction, pronouncement of sex is made through clothing, comportment, gestures, adornment, speech, and other behavioural manifestations. Together these behavioural markers are often referred to as gender.

While what counts as proper gender behaviour fluctuates with trends in popular culture, what does not change is the conviction that there are but two acceptable ways to display gender and that these reflect that there are but two sexes. Moreover, these two sexes are assumed to be complementary: bodies of one type not only manifest behaviours associated with that body type but they also desire and engage in sexual relations with other bodies that are thought to complement them sexually and behaviourally. This story of biological determinism that links sex, gender, sexual desire, and practice is the dominant gender discourse within our culture.

So important is the story about the coherence of bodies, behaviour, sexual desire, and practice that if someone's body does not line up with gender behaviour (or sexual desire and practice), there are elaborate mechanisms to intervene, correct, and in many cases punish those who do not conform. I elaborate on some of these interventions later in the chapter. Here, however, it helps to recall what Michel Foucault (1979) had to say about disciplines, examination, conformity, and normalization.

Gender can be thought of in much the same way as Foucault thought of disciplines (Shogan 1999). Disciplines establish standards of achievement, behaviour, or performance for specified tasks in relation to the physical and social spaces within which these occur. Everyone engaged in or by a discipline is measured in relation to these standards and ranked in relation to each other. In education, for example, teachers and other specialists assess students' abilities or behaviours. As "experts" they observe and judge students in relation to the standards established for a particular subject matter. Their observations and judgments are part of an examination process that produces information about an individual's placement in relation to established standards and in relation to others. This information makes it possible to isolate individuals so that their weaknesses can be corrected. Participants are subjected to interventions designed by teachers in order to close the gap between the deficient skill or behaviour and that imposed by the standard. As Foucault (1979, 172) indicates, examinations make it possible "to know them; to alter them."

The examination is also central in influencing people to conform to gender standards and norms. The experts in the case of gender are ubiquitous: family, friends, church leaders, and teachers who observe and judge gendered behaviour and intervene with rewards and punishments to exact conformity. There are also credentialed experts who, when consulted, use institutional authority to utilize sophisticated techniques of behaviour modification to normalize behaviour. In education each student becomes more like other students as deviations from the standard are corrected and an individual's behaviour or skills come closer to what is required. Through repeated interventions everyone is moved closer to the standard, or norm. Likewise, repetition of behaviour and skills of gender comes to consolidate and to solidify notions of normal, "real" gender.

An effect of the examination is the production of information about how participants behave or perform in relation to standards and how they respond to corrective measures. This information contributes to the body of knowledge of the discipline and serves to reposition what counts as standard behaviours or skills. Knowledge about individuals in relation to standards is also produced when participants are required to talk about their experiences. In what Foucault refers to as the confessional, participants tell,

or perhaps write, their experiences and an authority records the information along with his or her expert interpretation of it. This is followed by an intervention “in order to judge, punish, forgive, console, and reconcile ... and [to] ... produce ... intrinsic modifications in the person who articulate[d] it (Foucault 1980b, 61-2).

In Volume 1 of *The History of Sexuality* Foucault outlines how, through the confessional, sexuality has become identified with the whole truth about a person and therefore occupies a strategic site for the regulation of individuals and populations. Implicit in this is the assumption that individuals attain self-knowledge by confessing to experts who interpret their confession for them. It is also assumed that it is possible to improve the confessor by interventions designed to bring her/him closer to disciplinary standards. Later I discuss the process of labelling an individual as having a “gender identity disorder.” This labelling is the result of observing and judging the individual in relation to gender norms, but it is also the result of having the person talk to an expert who interprets this information according to the standards of the American Psychological Association’s *Diagnostic and Statistical Manual of Mental and Physical Disorders-IV (DSM-IV)*. Experts label those who confess that they are not able to meet the standards of normalized gender as “disordered” (*DSM-IV* 1994, 246). When interventions are successful, normalization is the result. Experts often perform these interventions but so does everyone else since we must know another’s sex to be able to socially interact and communicate. “In a society of normalization” (Foucault 1980b, 107), we are all disciplinarians (Bartky 1990). Normalization is an effect of the “constant pressure to conform to the same model, so that they might all be ... like one another” (Foucault 1979, 182).

As a discipline, gender is embodied, not easily thrown off, even when one understands that it is a cultural story. The disciplinary embodiment of gender makes gender feel “natural” to most people. Consequently, the prevailing story that gender entails a coherence of bodies, behaviour, desire, and practice persists despite influential work by some theorists of gender who have attempted to disrupt the assumption that behaviour naturally follows from bodies. Among these are psychoanalyst Sigmund Freud (1856-1939) and early feminists such as Simone de Beauvoir (1908-86). Freud was one of the first theorists to understand gender to be constructed through a long and conflict-ridden process rather than to be fixed by nature. Language was central for Freud, and in one of his early works, published in 1891, the human mind is defined as a “succession of inscriptions of signs” (Weeks 1985, 129). Over decades Freud implicitly worked out the precarious but complex construction of adult masculinity and, to a lesser extent, femininity. His early, critical displacement of biology in the formation of gender and sexuality was an insight that was before its time and was of

great importance to later understandings of gender, sex, and sexuality (Weeks 1985).

The key moment for Freud is the Oedipus complex, a time in adolescent development during which boys desire their mothers and hate their fathers. The crisis arising from this complex is acted out through a boy's rivalry with the father for the mother and his terror of psychic (not physical) castration as a punishment. Freud contended that homosexuality was not a simple gender switch because many male "inverts" retain masculine dispositions. He hypothesized that, rather than being absolutely masculine or feminine, humans are bisexual, with masculine and feminine characteristics coexisting in everyone. He further worked out, through his famous "Wolf Man" case, that the Oedipus complex was underpinned by a pre-Oedipal narcissistic masculinity. This involved, among other things, desire for the father and jealousy of the mother. Clinical evidence to support a pre-Oedipal "femininity" in boys as a result of identification with and jealousy of the mother followed in the 1920s and 1930s as others took up Freud's theories.

For Freud, wishes and desires are central to the human experience of satisfaction, and these are linked to memory traces of previous experiences of satisfaction that are fulfilled through reproducing them. As well, Freud developed a structure of personality that included the unconscious, formed in relation to the Oedipal crisis by internalizing parental prohibitions that judge, censor, and present ideals as well as by a prompt to break the law. Through this structure of personality, Freud postulated the displacement of a unitary human consciousness. In other words, for Freud, "to be human is to be divided" (Weeks 1985, 131). Just as important, Freud theorized that the internalization of prohibitions occurred through a mechanism he called "repression," which is directed against sexual desires in particular. Thus, for Freud, sexual desires and sexuality have a crucial role in psychical conflict and, therefore, in personality. Significantly, Freud saw the super-ego as gendered (Connell 1995) even though his ideas regarding masculinity and femininity were unproblematic. While Freudian theory is radical in some important ways, Freud spent most of his life backing away from the radical potential in his earlier work and was unable to escape from the hegemony of dominant gender discourse. A dichotomous gender system remained intact as the ideal to be attained through the process of becoming an adult. Gender is regarded by many developmental and educational psychologists as "the outward manifestation and expression of maleness or femaleness in a social setting" (Rice 1999, 167).

This conflation of sex and gender was called into question with second wave feminism. Philosopher Simone de Beauvoir's (1973, 301) aphorism, "one is not born a woman, but, rather, becomes one," provided an impetus for other thinkers to imagine that biology and behaviour are not inextrica-

bly linked, that a female body could be masculine and a male body could be feminine. A more contemporary rendering that posits sex as biological and gender as social is reflected as “a more general term encompassing all social relations that separate people into differentiated gendered statuses” (Lorber 1994, 3). Lorber continues: “I see gender as an institution that establishes patterns of expectations for individuals, orders the social processes of everyday life, is built into the major social organizations of society, such as the economy, ideology, the family, and politics, and is also an entity in and of itself” (1).

Despite this insight, considerable feminist work has proceeded as though gender is tied to sex. There is an acknowledgment that sex is “the biological status of being male or female,” while gender, in contrast, refers to the “social categories of male and female” (Arnett 2000, 130); however, the assumption persists that females are aligned with femininity, even if what counts as femininity changes socially and historically. This is why a book like Judith Halberstam’s *Female Masculinity* (1998) is rare in feminist scholarship. Moreover, the separation of sex and gender by many contemporary feminists still takes for granted a two-sex, two-gender system and assumes that bodies, by virtue of being in the realm of the biological, are not affected by the social.

Poststructural and queer feminist theorists have taken another look at this assumed split between the biological and the social and have argued that what is understood as a sexed body is produced by what is understood about gender. Prominent among these is Judith Butler. Like biological determinists, Butler argues that sex and gender are indistinguishable. However, unlike, biological determinists, who think that physicality and behaviour can be reduced to sex, Butler thinks that physicality and behaviour are both manifestations of gender.

For Butler (1990, 139), gender is a “corporeal style, an act ... which is both intentional and performative, where “performative” suggests a dramatic and contingent construction of meaning” (emphasis in original). Following Foucault’s lead on how discipline is embodied, Butler argues that gender is a process of repetitive, performative acts. What comes to count as a male or a female sexed body is a result of repetitive performances of gendered gestures, movements, and comportment. “What I would propose ... is a return to the notion of matter, not as a site or surface but as a process of materialization that stabilizes over time to produce the effect of boundary, fixity, and surface we call matter” (Butler 1993, 10, emphasis in original). Gendered performances establish the boundaries of what are regarded as sexed bodies; hence Butler’s assertion that gender and sex are not distinct categories.

Playing with the double meaning of “materialize” and “matter,” Butler (1993, 23) argues that, although bodies are material, it is important to notice

which bodies “come to matter” in a culture. “To ‘concede’ the undeniability of ‘sex’ or its materiality, is always to concede some version of ‘sex,’ some formation of ‘materiality’ ... What will and will not be included within the boundaries of ‘sex’ will be set by a more or less tacit operation of exclusion” (10-11).

While Butler (1990, 76) makes a claim for the universality of gendering processes, she also makes clear that this does not mean that gender “operates in the same way or that it determines social life in some unilateral way cross-culturally.” Rather, gender “operates as a dominant framework within which social relations take place” (76) but resists universalizing claims because “distinct articulations of gender asymmetry” operate “in different cultural contexts” (35). Within a particular cultural context what counts as proper gender performance becomes the normalized version of gender for that culture.

Gender performances produce not only what come to count as sexed bodies but also notions of what sexual practices are appropriate to these sexed bodies. The dominant discourse, which indicates that one can read gender and sexual practice from sex, posits everyone as either heterosexually male or female. Like the gender dichotomy that only countenances males and females, sexuality is limited to the hetero and the homo. As Eve Sedgwick (1990, 8) writes:

It is a rather amazing fact that, of the very many dimensions along which the genital activity of one person can be differentiated from that of another (dimensions that include preference for certain acts, certain zones or sensations, certain physical types, a certain frequency, certain symbolic investments, certain relations of age or power, a certain species, a certain number of participants, etc. etc. etc.), precisely one, the gender of object choice, emerged from the turn of the century, and has remained, as the dimension denoted by the now ubiquitous category of “sexual orientation.”

While gender as a “*regulated process of repetition*” (Butler 1990, 144, emphasis in original) is materialized in bodies, gender is not the only way that bodies are materialized. Gender articulates with multiple, competing, contradictory bodily demands and, hence, is open to intervention and resignification (33). Indeed, as Butler indicates, gender necessarily fails: “To be a good mother, to be a heterosexually desirable object, to be a fit worker, in sum, to signify a multiplicity of guarantees in response to a variety of different demands all at once ... produces the possibility of a complex reconfiguration and redeployment” (145). It is because of the necessary failure of gender that there is an opportunity to vary its expected repetitions and, as a consequence, push the boundaries of what counts as sexed bodies,

sexual practice, and desire. There is, however, also a price to be paid for failure to meet gendered expectations, even when such failures are inevitable. These are the punishing, interventionist effects of a culture that demands gender conformity.

### **Gender Identity Disorder**

It is my belief that by looking at what society pathologizes, we can see the clearest common denominator of what society demands of those of us who wish to be considered normal. It is also my belief that, although most children do not undergo formal gender training to the extremes ... almost every child receives this training informally, often at the hands of the most liberal of parents and teachers.

– Phyllis Burke, *Gender Shock: Exploding the Myths of Male and Female*

In Volume 1 of *The History of Sexuality* Foucault used the term *scientia sexualis* to refer to a systematic discourse in which the confession is transformed into science. *Scientia sexualis* focuses on the “rigorous analysis of every thought and action ... related to pleasure ... which supposedly holds the key to individual mental and physical health and to social well-being” (Dreyfus and Rabinow 1983, 176). Medicine, psychiatry, and pedagogy produced sexual norms against which experts were able to identify the hysterical woman, the masturbating child, and the sexual pervert. Scientific discourses of “sexual perversion” produced “the homosexual” as a species (Foucault 1980b, 43). Through the confessional technology of *scientia sexualis* sexual behaviour was classified as normal or pathological, and “once a diagnosis of perversion was scientifically established, corrective technologies ... could and must be applied” (Dreyfus and Rabinow 1983, 173).

In the latter part of the twentieth century *scientia sexualis* has produced an extensive codification of sexual disorders that are published alongside other “disorders” in the *Diagnostic and Statistical Manual of Mental Disorders*. The *DSM* initially listed homosexuality as a category of mental illness. In 1973, with increasing pressure from lesbians, gays, and others, mental health practitioners sought to eliminate homosexuality as a mental illness. In 1980 homosexuality was removed as a category of mental illness from the *DSM* (Burke 1996, 27). However, with the removal of homosexuality came a new category – “gender identity disorder.” As indicated earlier, gender identity disorder (GID) in childhood is regarded as a “pathology involving the Core Gender Identity ... consistent with one’s biological sex” (Sedgwick 1993,

158). The notion of GID relies on the gender-constructivist research of John Money and Robert Stoller, so that “the *depathologization* of an atypical sexual object-choice [is] yoked to the *new pathologization* of an atypical gender identification” (Sedgwick 1993, 158, emphasis in original). The effect is to produce ever-younger cases of psychopathology, which, although this is not explicitly stated, are linked to the risk of adult homosexuality. The following excerpt from the *DSM-IV* desk version is the product of the logic of dominant gender discourse, which has the effect of producing gender pathologized bodies.

A. A strong and persistent cross-gender identification (not merely a desire for any perceived cultural advantages of being the other sex). In children, the disturbance is manifested by four (or more) of the following:

- (1) repeatedly stated desire to be, or insistence that he or she is, the other sex
- (2) in boys, preference for cross-dressing or simulating female attire; in girls, insistence on wearing only stereotypical masculine clothing
- (3) strong and persistent preferences for cross-sex roles in make-believe play or persistent fantasies of being the other sex
- (4) strong preference for playmates of the other sex.

In adolescents and adults, the disturbance is manifested by symptoms such as a stated desire to be the other sex, frequent passing as the other sex, desire to live or be treated as the other sex, or the conviction that he or she has the typical feelings and reactions of the other sex.

B. Persistent discomfort with his or her sex or sense of inappropriateness in the gender role of that sex.

In children, the disturbance is manifested by any of the following: in boys, assertion that his penis or testes are disgusting or will disappear or assertion that it would be better not to have a penis, or aversion toward rough-and-tumble play and rejection of male stereotypical toys, games, and activities; in girls, rejection of urinating in a sitting position, assertion that she has or will grow a penis, or assertion that she does not want to grow breasts or menstruate, or marked aversion toward normative feminine clothing.

In adolescents and adults, the disturbance is manifested by symptoms such as preoccupation with getting rid of primary and secondary sex characteristics (e.g., request for hormones, surgery, or other procedures to physically alter sexual characteristics to simulate the other sex) or belief that he or she was born the wrong sex.

- C. The disturbance is not concurrent with a physical inter-sex condition.
- D. The disturbance causes clinically significant distress or impairment in social, occupational, or other important areas of functioning. (*DSM-IV* 1994, 246-8)

Gender identity disorder is a relatively unknown category to those who do not work within clinical psychology and psychiatry. Yet Canada is home to the largest GID institute in North America: the Clarke Institute in Toronto. Every major city in Canada has its own clinic, usually attached to a large teaching hospital. According to freelance researcher Phyllis Burke (1996), GID is a large and ever-expanding field of both psychiatric and psychological clinical practice. These clinics inform the narratives of many queer youth and function as context for the youth interviewed for *Queer Youth*. Before I get to their stories, however, I describe some of the “cases” that Burke uncovered in her work. She tells the stories of children forced by parents and teachers to conform to gender standards.

### Becky

Seven-year-old Becky was identified by experts as having “female sexual identity disturbance” (Burke 1996, 5), which became manifest as “deviant gender behaviour” (Rekers and Mead 1979). What did Becky do to be pathologized in this way? According to Burke (1996, 5): “Becky liked to stomp around with her pants tucked into her cowboy boots, and she refused to wear dresses. She liked basketball and climbing ... She likes to play with her toy walkie-talkies, rifle, dart game and marbles. She stood with her hands on her hips, fingers facing forward. She swung her arms, and took big, surefooted strides when she walked.”

The “cure” for Becky’s “disorder” consisted of 102 sessions of behaviour modification in the clinic and ninety-six sessions in her bedroom, including a bug-in-her-ear device through which she was instructed about proper play with toys. She was rewarded for playing with “feminine sex-typed” toys and behaviour and for rejecting “masculine sex-typed” toys and behaviour. The year was 1978 and Becky’s treatment was under the auspices of a new federally funded US program. Toys played with, assertiveness, rough-and-tumble play, confidence, and defiance combined with a lack of interest in appearance and typical girl behaviour and toys are, according to *DSM-IV*, hallmarks of female gender dysphoria. A telling infraction was the refusal to wear dresses (Burke 1996; Scholinski 1997).

As Burke (1996, 19) indicates, “rather than being ‘cured,’ constant monitoring destroyed Becky’s self-esteem. Becky’s desires and feelings had been worn down, split off from her everyday world, only to become hidden within

a secret and shamed place inside her. Becky valiantly strove for acceptance and to do what was necessary in the face of overwhelming odds. She wanted to earn back love, and if that meant choosing the pots and pans over the soft-ball mitt, so be it."

Rekers, Becky's psychiatrist, has stated that gender identity disorder can be determined by comparing a child with same-sex, same-aged peers in athletic skills such as throwing a ball and percentage of baskets made from the free throw line. As Burke (1996, 205) comments, "I ... hate to think that a child's diagnosis of mental health ... depend[s] on basketball shots made, or not made, from the free throw line." Rekers still works in the area of GID and has written articles on identification, assessment, and treatment of childhood gender problems; rationale for intervention in childhood gender problems; and descriptions of clinical and therapeutic interventions spanning the 1970s through to the 1990s (Rekers and Lovaas 1974b; Rekers and Mead 1979; Rekers and Morey 1990; Rekers, Rosen, and Morey 1992; Rekers, Sanders, and Strauss 1981). His contribution to *scientia sexualis* has guided the work of hundreds of workers in both research and clinical practice, and it has earned tens of thousands of dollars that have been put towards funding research and clinical initiatives (Burke 1996).

### **Kraig**

At age five, Kraig, an anatomically normal male, became part of the Feminine Project at the University of California, Los Angeles (UCLA). This project was advertised widely in schools as well as on local television shows because it required a ready pool of feminine boys. Kraig had the misfortune of having his mother watch a television show in which a colleague of Rekers, Richard Green (1987), explained the phenomenon of the effeminate boy and how the UCLA project might help him. Another man on the show explained that playing with dolls turns a boy into an adult homosexual. Kraig's mother became alarmed and began a year-long battle to convince Kraig's father that their son needed treatment. Finally, after an incident in which Kraig was putting his little sister's clothing on her stuffed animal, Kraig's father became angry, spanked him, and agreed that he needed therapy. Kraig's treatment began with a genital exam to ensure that he was unambiguously a biological male. Next, Kraig was sent to Rekers to begin his ten-month behavioural program. He was included in the GID because he "continually displayed pronounced feminine mannerisms, gestures, and gait, as well as exaggerated feminine inflection and feminine content of speech. He had a remarkable ability to mimic all the subtle feminine behaviors of an adult woman ... He appeared to be very skilled at manipulating [his mother] to satisfy his feminine interests" (Burke 1996, 35).

Because of these baseline behaviours Kraig was believed to be at risk not only for “adult transsexualism, transvestism and some forms of homosexuality” but also for “depression, arrest, trial and imprisonment in association with his possible future as a transsexual” (Burke 1996, 34). Further reasons postulated for Kraig’s treatment were that his playmates would scorn him and that it would be easier to change the child than the society (Rekers and Lovaas 1974). Kraig’s diagnosis was also based on his parents remembering that he once wore a shirt on his head, pretending he had long hair, and that he engaged in some mop and towel play. One night he wore his father’s T-shirt to bed and, upon catching his reflection in a mirror, decided he was wearing a dress. These occasions were taken as evidence that Kraig cross-dressed. Mostly, however, when he wanted to play with toys he would pick up a doll or play with teacups as easily as he would a car. At the centre of everyone’s concern was the fear that he would become an adult sexual deviant. While all this occurred in 1974, Rekers (1995) still refers to Kraig as a foundational case in his *Handbook of Child and Adolescent Sexual Problems*. This handbook continues to be used in both clinical and research settings investigating GID.

### Stanley

In 1986 three-year-old Stanley began treatment at the Psychoanalytic Institute in New York. Stanley was diagnosed with GID, and for him and his family this meant analysis five times a week for five years. Stanley was treated because, otherwise, “he would have developed into an adult homosexual” (Haber 1991, 107). “He liked kitchen toys, dolls and carriages. When he was two years old, he wanted to put on nail polish. He liked Cinderella, Wonder Woman and Princess Diana. He groomed and dressed dolls. He also had many childhood ailments, including sore throats, earaches, fevers and allergies. He received frequent allergy shots, and was on significant amounts of medication, which might explain why he ‘avoided sports’ and rough-and-tumble play” (Burke 1996, 100).

Stanley’s greatest love was his grandfather, who lived with Stanley and his family and with whom he spent large amounts of time. After a short but serious illness Stanley’s grandfather died without returning home from hospital. This devastated young Stanley. In his five-year analysis, Haber reported Stanley’s behaviours in terms of his atypical gender behaviour and his future sexuality (Burke 1996, 103). In keeping with psychoanalytic theories, Stanley was thought to be harbouring castration anxiety, defending against damage caused by the loss of his mother as well as loneliness. Stanley’s grandfather was also suspect in Stanley’s psychopathology. The grandfather was married to a “vital working woman” and did light house cleaning while his wife worked.

## Measuring for Gender Dysphoria

Cross-dresser plans to switch to alternative school in Gresham, Oregon. A self-described “gay boy cross-dresser says he plans to transfer to an alternative school after being suspended for wearing women’s clothes and a bra stuffed with socks.”

– *Columbian*, 5 May 2000

The development of measurement tools is an important area of research in GID. The Machover Figure-Drawing Test and IT Scale for Children are used to determine gender dysphoria and its severity. With the Machover Figure-Drawing Test the child is given a piece of paper and asked to draw a person. If a girl draws a boy or a boy draws a girl, then they are considered to have gender problems. The IT Scale for Children involves an exercise in which the child is shown a stick figure and, from various cards, is asked to pick appropriate toys, accessories, and clothing for it. If the child makes masculine choices, then s/he gets points; if the child makes feminine choices, then s/he does not get any points. Girls are expected to score very low on this test, while boys are expected to score high.

The Barlow Gender-Specific Motor Behaviour Form looks at body movements such as sitting, standing, and walking to determine normal masculine and feminine movements. Buttocks hold a special place in the Barlow Form: “if the distance between the buttocks and the back of the chair was four inches or more” points are given for masculinity (Burke 1996, 8). Close proximity of buttocks to the back of a chair is scored as feminine. This test is based on a seven-point scale.

GID maintains its status as science through these test instruments, which, in keeping with scientific principles, measure behaviours so as to provide consistent, reliable results. In their 1995 text Zucker and Bradley outline, in detail, the numerous assessment and test instruments available to GID specialists. According to them, “these assessment measures are the most readily accessible for clinical assessment ... all have shown at least some discriminant validity; that is they have distinguished gender-referred children from normal, sibling and/or clinical controls” (Zucker and Bradley 1995, 60-3). No doubt consistent, reliable results are obtained, but the foundational assumptions upon which these are made are solidified and naturalized based upon categories that are questionable. Assumptions about gender, sex, and sexuality, meanwhile, are left intact and unproblematic. The *scientia sexualis* of GID subjects children and youth to behaviour modification, drug therapy, shock therapy, and psychoanalysis (with “severe” cases being institutionalized), all in a concerted effort to shift non-conforming behaviours towards gender-appropriate performances (Burke 1996; Scholinski 1997).

The technologies of surveillance and intervention employed in producing correct gender seriously compromise notions of gender as naturally occurring, even while relying on these notions.

Displays of hyper-masculinity or hyper-femininity are considered a success even when, in most circumstances, these behaviours are socially inappropriate. For example, treatment is considered successful for feminine boys when “the boys become more verbally and physically aggressive toward their mothers” (Burke 1996, 54). For “gender-troubled” girls, therapists promote the use of makeup and a preoccupation with older males, who may be close family friends or part of the therapy team, as the pinnacle of successful treatment (Burke 1996). It goes without saying that, in other circumstances, it would be problematic to encourage girls to sexualize their behaviour with adult males, particularly those in a fiduciary relationship. For both girls and boys, disdain for the “opposite” gender is a hallmark of appropriate behaviour, even while the very best outcome is that children and youth diagnosed with GID become gender-appropriate heterosexual adults.

Theories and practices associated with GID were solidified during the same period that saw the emergence of second wave feminism. As feminist thinking worked towards opening possibilities for girls and women and towards the radical potential of liberating boys and men from their gender-rigid roles, GID worked to reify and rigidify gender. Both, however, depended upon essentializing notions of gender. While feminist thinking has moved beyond essentializing gender, GID discourse proliferates increasingly fossilized theory, therapy, and research.

Often parents – especially mothers, grandparents, and other loved ones – are blamed for gender inappropriate behaviours, even though it is most frequently relatives who, in the “best” interests of the child, turn children in for therapy. On other occasions, parents are not aware that their child is being treated for GID as this occurs within a school setting, with a teacher relying on outside assistance to “contend” with gender dysphoric problems present in the classroom (Burke 1996). The eradication of behaviours that might lead to later homosexuality is at the core of treatment for GID, even though experts are uncertain about the “causes” or outcomes of this “disorder.” Zucker indicates, for example, that “we do not have any definitive studies that demonstrate one way or the other that treatment for GID in a child causes a heterosexual outcome or that cross-gender play in a child signals a homosexual childhood” (Zucker in Burke 1996, 100). Richard Green (1987), writing about the “sissy boy syndrome” and the development of homosexuality, supports psychological intervention with children not because these protect against homosexuality but because, he claims, parents have a legal right to seek treatment for gender dysphoric children and youth. Most chillingly, as we have seen, therapists Rekers and Lovass (1974) offer

as their rationale for treatment the proposition that it is easier to change the child than the society in which s/he lives.

The discourse of GID is often confusing and contradictory, informed as it is by both biological and social constructionist arguments. What is not confusing about GID discourse, however, is the fear it perpetuates around the idea of children and youth growing up to be homosexual. This desire to eliminate homosexuality is not, of course, unique to experts of gender identity disorder. Even as parents claim to be amazed at the apparent ease with which their children conform to gender expectations, “something akin to gender terrorism aimed at children” operates to discipline children, youth, and all of us into gender conformity (Burke 1996, 125). When the influence of family, school, and friends fail, there are GID clinics to turn to; and, if therapeutic methods to “cure” gender identity disorder fail, there is the opportunity for sex reassignment surgeries.

### **Beyond GID: Sex Reassignment Surgery**

To “make” a man is to test him: to “make” a woman is to have intercourse with her. Like the dissymmetry of reference in Spanish between a “public man” (a statesman) and a “public woman” (a whore), “making a man” and “making a woman” mean two very different things, culturally speaking.

– Marjorie Garber, “Spare Parts:  
The Surgical Construction of Gender”

In a technological twist on “making” gendered bodies, specialists in the surgical suite constitute another manifestation of the normalization of masculine male bodies and feminine female bodies. Through surgery and hormone therapies a man can be made from a female body and a woman from a male body. When GID therapy is unable to “make” sissy-boys and tomboy-girls into gender appropriate persons, sex assignment surgery can make sissy-boys into women and tomboy-girls into men, thus succeeding in matching bodies with behaviours. Kessler and McKenna, writing in 1978, indicated that “genitals have turned out to be easier to change than gender identity ... we have witnessed ... the triumph of the surgeons over the psychotherapists in the race to restore gender to an unambiguous reality” (120). According to Shapiro (1991, 252), transsexualism constitutes a fundamentalist approach to the relationship of sex and gender: “an inability to see an anatomical male as anything other than a man and an anatomical female as anything other than a woman.”

In Canada the prerequisite for reassignment surgery is a diagnosis of GID. Without this diagnosis surgery is not insured through provincial health

care and would be out of financial reach for most people. Sex reassignment surgery is not regarded as vanity surgery: “gender dysphoria” is regarded as life-threatening, requiring life-altering surgery. According to this logic, which is rooted in biological determinism, male brains are trapped in female bodies and female brains are trapped in male bodies. As Judith Shapiro (1991, 251) comments, “Whatever the reasons for it, even if we cannot ultimately specify what causes it, individuals can simply be recategorized, which has the considerable advantage of leaving the two-category system intact.” Those with suicidal tendencies or who are gender non-conformists are the most suitable candidates. Being suicidal is further evidence of psychopathology, with the social realities of homophobia and heterosexism being somehow absent from the analysis. Once again, it is easier to fix the individual, this time through radical surgical procedures, than it is to fix the society.

Surgery to alter a body so that it lines up with the two-sex, two-gender, one sexual orientation system demonstrates the constructed nature of gender and sexuality. Or is this an instance of fixing up nature’s little mistakes? Yet, if the demand for sex-reassignment surgery can be taken as an indicator, then “nature” seems to be erring at an ever-increasing rate. All too often transsexual surgery upholds the bipolar gender system by encouraging assimilation and erasing difference (MacKenzie 1994). And, of course, the body is not the only way, nor indeed an infallible way, for persons to become gendered. In fact, if we were naturally, essentially sexed, then “sex-change” surgery should not, would not, be necessary.

### **“Sex Assignments” and the Case of the Inter-Sexed**

In the face of apparently incontrovertible evidence – infants born with some combination of “female” and “male” reproductive and sexual features – physicians hold onto an incorrigible belief in and insistence upon female and male as the only “natural” options.

– Bernice Hausman, *Changing Sex:  
Transsexualism, Technology, and the Idea of Gender*

Infants born with ambiguous genitalia, or inter-sexed babies, are subjected to surgical interventions to make them unambiguous girls or boys. Depending on what kind of external genitalia is present, a sex is assigned to the child and then surgical procedures are performed to match the infant’s body to the assigned category (Hausman 1995; Kessler 1998).

The very label “inter-sexed” attests to the stubborn grip of a two-sex system. As Hausman (1995) shows in her analysis of medical, scientific, and narrative discourse on inter-sexed people and transsexuality, the range of hormonal, gonadal, and chromosomal variation among inter-sexed babies

defies the idea of two sexes. The imperative of two sex/genders requires that inter-sexed babies become male or female. The idea of what constitutes the “best sex” for that baby is based on body morphology, most often on the size of the infant’s penis (Kessler 1998), and on its perceived psychological makeup, which is derived from the work of Money (1968 [1994]; Money and Erhardt 1972). “After all, there can be no *true* sex if no single kind of sex (chromosomal, gonadal, hormonal, among others) can be invoked infallibly as the final indicator of sex identity” (Hausman 1995, 78-9, emphasis in original).

That “inter-sexed” babies might actually indicate that there are many sexes is not countenanced. Ambiguously sexed bodies are disappeared at birth or shortly thereafter. Gender discourse begins its work from these early and influential moments. Inter-sexed babies call into question the naturalness of maleness-masculinity and femaleness-femininity, and so surgical procedures are required – *at birth* – to assign unambiguous gender to ambiguous bodies. As Kessler (1998, 32) writes: “Accepting genital ambiguity as a natural option would require that physicians acknowledge that genital ambiguity is ‘corrected’ not because it is threatening to the infant’s life but because it is threatening to the infant’s culture.” Ambiguous internal or external genitalia, chromosomes, or hormones are not life-threatening. The assignment of a sex category to the inter-sexed baby occurs prior to most socialization, and the surgical procedures are effects of rigid social constructs. These surgical procedures reveal the rigidity of gender rather than the naturalness of gender categories.

What is clear from sex-reassignment surgery, whether for infants or for adults, is the societal interest in altering bodies so that they match up to a two-sex, two-gender, one sexual orientation system. The implication is that, if one can achieve the correct body for one’s brain, then one will have the appropriate desires for the opposite sex/gender mate and for gender appropriate sexual performances. Discourses on wrong body/brain configurations assume that a brain that desires the same sex is displaying a behaviour, a desire, that belongs to the body of which the desiring brain is not a part. Unfortunately for the credibility of this discourse, some of those transitioning still desire the “wrong” sexual behaviours with the “wrong” kind of people. Queer icon Pat Califia, former leather dyke, is now Patrick Rice-Califia, a female-to-male who is in the beginning stages of transitioning and contemplating marriage with a gay man. And queer theorist Eve Kosofsky Sedgwick (1993) confuses categories when she identifies as a gay man married to a straight male academic. What can this mean in the context of a two-sex, two-gender, one sexual orientation system?

Rather than reflecting the diverse and multiple ways in which people act and live in the social world, gender discourse misrepresents and distorts

human life, producing bodies in such a way that some match rigid requirements while others are categorized as defective, diseased, and mentally ill. However, the dangers to those who are pathologized are far greater than are the dangers to those who are misrepresented. For some gender non-conformists, the penalty for “deviance” is death.

### **When All Else Fails: Remembering Brandon Teena**

Brandon Teena (formerly Teena Brandon) and two companions, a young single-parent woman and a young black man, were murdered on New Year’s Eve 1993. On Christmas Eve 1993, exactly one week prior to his murder, Brandon Teena was brutally raped and assaulted by two former friends. The *Omaha Gazette*, in a sensational article entitled “Dressed to Kill,” proposed that male clothing worn by a female body was central to Brandon Teena’s murder. Brandon Teena’s clothing did have something to do with why he was murdered, but this is not the whole story. Brandon Teena’s murder is a sign of how deeply troubled our society is over gender ambiguity and homosexuality.

As the section on gender identity disorder conveys, many people will go to extreme lengths to eradicate both gender ambiguity and homosexuality. GID clinics attempt to erase unacceptable behaviours through psychotherapies. Sex assignment of gender ambiguous infants eradicates “naturally” occurring ambiguous bodies. Sex reassignment of adults is designed to alter “mistakes” so that gender conformity is maintained. Taking the logic of gender rigidity to its conclusion, Brandon Teena’s murderers erased gender ambiguity and the spectre of homosexuality by erasing Brandon Teena himself.

Teena Brandon was a sickly child who preferred to play with boys’ toys and to dress in shorts, jeans, and shirts, unlike her ultra-feminine older sister. As Brandon Teena in his teen years, he successfully dated young women, passing as male, offering further evidence (within the discourse of gender conformity) of psychopathology. Not only was he gender dysphoric, but his passing as a male was also evidence that he was a “pathological liar.”

Brandon Teena’s evasions or distortions about his body with most of his girlfriends varied after his early successes with girls. One of the young women Brandon Teena dated wrote, “he was a dream come true.” At times he said that he was a hermaphrodite; at other times he claimed that he was transitioning from female to male (FTM). The truth was that Brandon Teena was genitally female and could not afford surgery. When two male friends of his last girlfriend discovered Brandon Teena’s secret, they raped and assaulted him in order to, in their words, “put her in her place.” And they beat him severely to ensure that he did not press charges of rape and assault. The police officer who took Brandon Teena’s “complaint” did not press charges and did nothing to protect him until it was too late. While

Brandon Teena was evasive and often lied about various things, his statement on public record expresses his clear and unambiguous wish to press charges and to go to court. After Brandon Teena tried to press charges the two young men murdered him and two other people.

Brandon Teena's story displays, in graphic detail, the deep and widespread intolerance and hostility towards, and individual and community inability to deal with, gender ambiguity and homosexuality. The community of Falls City, Nebraska, is a microcosm of larger societal anxieties and confusions regarding these issues. The confusion, intolerance, and ambiguity spawned by gender-rigid behaviours and attitudes are manifested at every stage of the authorities' interaction with Brandon. When the police uncovered his gender, they referred to him as "her" and used sexist language and assumptions while interrogating him during his complaint. Other examples demonstrate the very real structural problems that gender ambiguity creates: Brandon was "outed" when he was placed in the female side of a jail, and court records dishonoured his identification as male by using feminine gender pronouns.

As documentary filmmakers Susan Muska and Greta Olafsdottir discovered during their four-year investigation of *The Brandon Teena Story* (1998), the community in which the story unfolds is "more tolerant" of gender confusion but completely intolerant of the spectre and reality of homosexuality. The phrase "more tolerant" is dubious, given the way the narrative unfolds. The filmmakers find that many people accepted Brandon Teena on a personal level because they thought no one else knew. However, once "it" became public knowledge, complicity with Brandon Teena's secret was no longer possible.

Even as claims are made for a certain kind of tolerance towards gender ambiguity, the shallowness of that tolerance is unmasked once everyone knows and is forced to speculate about the link between gender ambiguity and their relation to Brandon Teena. The closet of silence that shrouds gender ambiguity and its queer cousin homosexuality, keeping them privatized and personalized, could not tolerate the gaze and scrutiny of public knowledge. This was especially acute for those who felt strongly about their own gender-conforming identities and sense of heterosexual selfhood. Brandon Teena posed a threat to all his girlfriends, who denied they were lesbian when they had to acknowledge that Brandon Teena was a biological female. For most of the community this constituted homosexuality.

Brandon Teena's last girlfriend, Lana Tisdale, and another friend are still ostracized as lesbian. Tisdale's friend, who is also Lotter's (one of the murderers) sister, never had any sexual contact with Brandon Teena but seemed to be guilty by association. In another twist, murderer Thomas Nissen was called a fag for raping Brandon. According to his girlfriend, the threat that

this “pejorative” constituted to his sense of a masculine self was one of the reasons he decided to murder Brandon Teena. His sense of masculinity had already been seriously threatened through previous prison time, during which he was repeatedly raped and abused. Nissen’s sense of his gender was threatened by the townspeople’s questioning his “desire” during the rape of Teena as well as by his own rape in prison by other males. For the members of this Nebraskan community the threat posed by the spectre of homosexuality and ambiguously gendered females and males is so great that they are still in denial and refuse any responsibility.

For some, the threats to social norms and to one’s intimate sense of identity are so dire that appropriate remedies take the form of radical and horrific actions. Being a man involves “making” a woman by taking her sexually, even if he takes her (as the murderers took Brandon Teena) against her will. Yet Brandon Teena is a “better” man than is either of his murderers because he pleases his female partners, while Lotter’s and Nissen’s relationships with women were weak and troubled, often consisting of forced sexual relations. Brandon Teena’s murderers are fighting, hurting, drinking, male-bonded guys, and they are autocratic in their beliefs regarding gender and sexuality. So, too, was Brandon Teena as he successfully performed and outperformed them in many of the things related to masculinity. His murderers’ sense of themselves was profoundly disturbed when they realized that the guy they let into their guy zone was, in their view, not really a guy. Everyone else, including Tisdale’s mother, was fooled as well. The community of Little Falls was hoodwinked as effectively as were Brandon Teena’s previous girlfriends. None of them was able to discern the “real” men. They were vulnerable to the enemy: those who successfully pose as men and therefore undermine “real” men. A normal man, vulnerable to an enemy, has to be brave enough to seek out and encounter that enemy in what might become a struggle for life or death. In Brandon Teena’s case the struggle to maintain gender social norms was a death struggle.

The extreme homophobia of the murderers and the community towards Brandon Teena was acted out in the form of his execution. Eradicating Brandon had the immediate effect of removing the threat posed by his body. Killing him restored balance to the murderers’ sense of their masculine selves and to an anxious and distressed community. Equilibrium was restored with the death of the gender/sexual deviant. Yet Falls City continues its struggle with the events that made up Brandon Teena’s life and death.

The flimsiness of conventional gendered identity and sexual practice was exemplified by Hilary Swank’s performance as Brandon Teena in the film *Boys Don’t Cry* and her subsequent performance as a conventionally feminine woman when she received her Oscar award for best “actress.” Swank’s movie performance and her performance at the Academy Awards ceremony

reveal the performativity of gender while also consolidating the common-sense notion that both Brandon Teena and Hilary Swank have a “real” gender behind the performance of masculinity.

Gender violators are variously punished, criminalized, psychopathologized, or, in the case of Brandon Teena, disappeared from public site/sight through murder. As Burke (1996) puts it, gender terrorism disciplines the majority of people into displaying conforming behaviour. Those who mostly get it “right” have an easier time forgetting the processes of gendering and come to believe they were born that way. Those who are different in childhood and adolescence may be subjected to a diagnosis of GID and concomitant therapies to eliminate gender inappropriate behaviours and, if these therapies are “successful,” adult homosexuality.

Verbal and physical threats operate to discipline those unruly enough to “flaunt” their deviancy. For adult homosexuals “reparative therapy” purports to transform them into former, or recovering, homosexuals (Nicolosi 1991). If this treatment fails, then reassignment surgeries are available to ensure that bodies and gender appropriate behaviours match. Finally, in order to maintain the myth of heteronormative hegemony, the mutilation and execution of gender ambiguous/queer persons effectively disappears them from the body politic.

Even as heteronormativity appears to be a totalizing system, there are many interstitial spaces and cracks in the essentializing foundations of gender performances. Working, living, and breathing life into and in these spaces, queer bodies proliferate in spite of the relentless discourses of gender conformity. It is to some of these spaces that I now turn, with narratives framed by stories from queer youth in Alberta schools. These youth are subjected to the heaviness of the discourses of gender that insist on a coherency of bodies, behaviour, and sexual practice, yet they have found spaces in which to trouble the demands of conventional gendered identities.

### **Queer Youth in Alberta’s Schools: Some Stories**

#### **The Case of the “Queer Young Dyke”**

The early years of Jill’s life were spent on a First Nations reserve close to a large city. Jill was the eldest of six children, and she often spent time taking care of her younger siblings, making sure they were cared for when her parents were not available. Often, Jill had to defend herself and her siblings, and by age six she was a highly skilled fighter who often became engaged in fist-fights with other kids, whom she described as bullies. Jill started school on the reserve and recalled liking it. However, she missed most of Grade 1 because she had to take care of her younger siblings. Sometimes her “uncle” would look after them as well. On one of these occasions, her uncle raped her. Jill’s father died in hospital when she was seven years old, and her

mother died about two years later. Jill and her siblings were separated and placed in foster care. Jill and one of her younger brothers went to the same foster home, which was located far away from their birth home and extended family.

Jill's foster family was a boisterous and engaging group, and both she and her brother quickly fit in. However, Jill was stigmatized in school as a "Native" in foster care. School professionals labelled her as incapable of learning and, throughout her school years, tried to place her in classes far below her achievement level. She was also labelled as difficult and disruptive. Her foster (and later adoptive) mother was a strong advocate for Jill and challenged the assessment of her learning abilities. However, she was unable to overcome her own and the school's assessment of Jill's "unfeminine" behaviour. Jill's love of rough-and-tumble play, which, "in psychological terminology, is the hallmark of the male child" (Burke 1996, 5), identified her as a gender non-conformist. Jill reported that teachers were all "weird about me ... they did not really like me and were afraid of my behaviours, especially when I did not act like a proper girl. I didn't even know how to act like a proper girl!"

I asked Jill how she knew the teachers were uneasy about her non-feminine behaviour, and she told me that they told her to act more like a girl. Meanwhile, Jill's adoptive mother admonished her to act like a girl, to keep herself clean and tidy, and to wear dresses more often. She also counselled Jill to talk "like a girl." As Jill demonstrated for me, this was to be accomplished by raising the pitch of her voice, something she still could not do easily. Jill reported to me that she had tried to reason with her foster/adoptive mother, explaining that she could not engage in the activities she loved if she was wearing dresses. These activities included "basketball, soccer, and climbing trees; and, oh yes, I loved fighting." Jill felt she had to fight as she and her brother were constantly teased because they were in foster care, because they were "Native," and because their last name was the name of an animal. Jill won all of her fights because she was not afraid, was highly skilled, and was bigger than those she fought. Not only were some of her teachers "weird" about her but, according to Jill, "some of them were afraid of me, I think because of my fighting but also because I was too big and they thought I was stupid. Some of the kids called me a stupid squaw, but I think some of the teachers felt the same way."

When she turned nine years old her foster parents adopted Jill and her last name changed: "I was thrilled because no one could make fun of my last name anymore, but I still had to fight all the time about other things." Still, life was secure and Jill loved her adoptive mother because she fought teachers and counsellors, even a principal, on behalf of her and the other children in the foster home. Through her adoptive mother's influence, Jill worked hard at school and, while never an outstanding student, progressed

through grade school. Her adoptive mother provided her with love, care, security, and the protection that she needed. The only point of contention between Jill and her foster mother was over her tomboyism: "She was always on my case about being more like a girl and staying clean, wearing these dresses she bought, stop playing ball ... but she really liked me, she adopted me and loved me; that's all that mattered."

Jill's adoptive mother worried that Jill's behaviours would get her into trouble at school and later on in life because, as she tried to explain to her, she would not know her proper place. As for Jill's adoptive father, he did not figure in her narrative.

At one point two fourteen-year-old boys and a fifteen-year-old girl were placed as foster children in her home. Jill, age thirteen, was drawn into a mini-gang made up of these three and herself. For about six months they did everything together. One night, one of the boys went into Jill's room and raped her. Jill tried to tell her adoptive mother who told her "to please not tell her this thing, she could not bear hearing this stuff." However, the boy was quickly removed from the home and the gang fell apart, with everyone blaming Jill. Around this time, Jill's adoptive mother was becoming very religious and went to what Jill described as a "very Christian church, not one of your regular ones but one of those alliance ones or something." Increasingly, Jill's adoptive mother put pressure on all the kids in her care to attend church. She became more fervent in trying to get Jill to act like a girl and started telling her that she would never tolerate her if she was bad and wanted to be with other girls.

Around age twelve or so, over a two-year period, Jill became increasingly aware of her attraction to other girls. She still preferred to play and fight with the boys, but "I wanted to kiss and hug with the girls, especially the really cute ones." The cute girls, for Jill, were the ones who were physically active and smart. On many occasions she tried to tell her adoptive mother about this attraction but, as with the rape, she said she could not bear to hear what Jill wanted to tell her. Jill became increasingly agitated about this. "I love my mother," Jill said, "I wanted her to know about who I really am and I did not want to lie to her or mislead her because she saved me." Jill knew this was a highly contentious issue but she also knew that her attraction to other girls was a big part of "who I am." Jill was fourteen and a half when she came out to her adoptive mother. This woman packed Jill's bags when she went to school the next day and put them on the doorstep. Jill was not allowed in the house after that. She was forced into state care, where "I had to fend for myself, I was alone again ... I had lost my second mother." Not only was Jill not allowed to enter what had been her home, but her adoptive mother refused to see her and would not let her have any contact with her younger brother. According to Jill, "She said I was a bad influence."

Over the next few years Jill became increasingly alienated at school. She was constantly in fights and she flunked out. Her social workers and school counsellors did not know what to do with her. Teachers and students were either indifferent to her, afraid of her, or actively harassed her. Some teachers refused to have her in their classes, while students called her queer, a bull-dyke, or a lezzie. Others gave her a wide berth in the hallways and/or refused to sit close to her in class. Jill hated school and quit attending on a regular basis. She became defined as a problem student and was transferred from one school to another. An incident in one of her high schools stands out against the constant harassment and marginalization she felt at the others. Some kids ganged up on Jill after school and wanted to beat her up. She got away and reported the incident and perpetrators to a school counsellor. The school counsellor advocated on Jill's behalf and ensured that the perpetrators were disciplined. Jill could not remember any other positive incidents that occurred after she had been kicked out of her adoptive home.

She attempted suicide several times and landed in a psychiatric ward. The attending psychiatrist referred her to another psychiatrist, who was in charge of a program specializing in individuals whose troubles were perceived to arise from confusion about gender identity. During counselling, over a period of several months, the psychiatrist convinced Jill that she had "a male brain stuck in a female body" and that, through surgery and hormone treatments, this disjunction could be fixed. The psychiatrist told Jill "that all of [her] problems were because of this male brain thing." At first Jill went along with the psychiatrist, but in a feat of great bravery she was able to reject the starched white authority of *scientia sexualis* that, in addition to schools and family, has such a central place in the production of gender appropriate bodies. At the eleventh hour Jill refused to begin hormone treatments and instead insisted that she was not confused about her gender; rather, as she said, she was a "queer dyke." Jill was released from this program and went back into alternative state care.

From the time she was kicked out of home until the time of our interview, Jill's personal turmoil increased. State care was in the form of residential group homes, but with her suicide attempts and other misdemeanours (like fighting and theft), Jill was in and out of lock-up facilities. In one facility Jill was playing basketball with other girls in the gym and one girl accused her of feeling her up during a physically close moment. She yelled at Jill: "[You're] nothing but a stupid dyke! Keep your hands off me!" Jill punched the girl in the face, breaking her nose and knocking out one of her teeth. Although Jill was disciplined for fighting, the other girl did not receive any censuring; thus, Jill was also effectively disciplined for inappropriate gender and sexual behaviour, even though she denied that her actions bespoke any sexual intention: "I was just playing basketball and sometimes you touch the other

players during intense play ... there was nothing sexual about it. As a matter of fact I hated her guts before that and loved pasting her in the face."

Jill did not complete high school. She reported that she has been raped at least once a year since her uncle raped her and that she has come to expect this. She was very matter of fact. Jill also reported that she is beaten up regularly because she is so "butch" looking. She fights back, she says, giving as good as she gets. She also confessed to attempting suicide on at least nine separate occasions. Several of these attempts occurred in the lock-up facility where she received counselling. After one such attempt she was referred to the psychiatrist who was knowledgeable about GID.

At the time of our interviews Jill worked security for a small local company. She was in a committed relationship with Ellen, another young woman her age who had also dropped out of school. Ellen was estranged from her birth family and did not work. She took care of Jill emotionally and both agreed, in a joint interview, that Jill was fragile. Ellen had pulled Jill out of several suicide attempts, which were not reported.

Jill missed her siblings and tried reconnecting with her extended birth family. She also visited her father's grave on the reserve. She was angry at her birth mother for dying but dreamed about her constantly. She missed her adoptive mother "dreadfully" and tried to reconcile with her repeatedly, with no success. The last time Jill phoned her adoptive mother did not recognize her voice. This devastated Jill. Her adoptive mother told her that she did not want to see her until she gave up her "lifestyle" and started acting like a girl. In Jill's words, "I still don't know how to act like a girl. I can't do it. Acting like a girl is not who I am. I can't wear a dress or talk differently. Yet, I am a girl."

### **The Case of Jack, The "Sissy-Fag Queer"**

He came home one day and asked me, "What is gay? Some boys said I am gay" ... they put him in a headlock, dragged him down a deserted concrete stairway, then sliced wildly at his leg, severing his femoral artery.

– *Edmonton Journal*, 7 December 2000

That BC teenager who killed himself over "fag" taunts had been called "geek" because he had good grades, "four eyes" because he wore glasses and "fag" because he had a high voice and liked the company of girls.

– *Toronto Star*, 2 April 2000

Jack remembered his schooling and growing-up years as a continuous struggle to hide the fact that he was different. He passed as white although he is Métis from a two-parent, middle-class family. He had one older sister, whom he adored with all his heart. "She was so perfect, so beautiful, so much my very most favourite person ... next to my mother of course," Jack told me. He loved "my little ponies" and his younger girl cousins. He had a large stuffed animal collection with which his mother and aunt indulged him. Jack knew to hide his toy preferences during his first year of school. He was physically quite active at this time, thin and wiry. Although he preferred being with girls and playing with girls' toys, he also loved to play games outside and to ride his bike.

Jack's first year of school was traumatic. During the fall his beloved older sister was killed in a car accident on her sixteenth birthday. For Jack and his mother, the ensuing two years were extremely difficult as they tried to face life without their sister/daughter. Jack still mourns her loss and finds the fall, with its smell of decaying leaves, a very emotionally difficult time of year. Jack's father's work kept him away from home for long stretches of time, and Jack rarely mentioned him.

As a result of his sister's death Jack missed a significant amount of school during Grade 1. He and his mother would sleep in on school days, and his mother would not make him go to school late. She seemed tired and distant during this period and spent most of her time in his sister's bedroom. The result was that Jack's Grade 1 marks were poor, and he was held back while his cohort group moved on to Grade 2. Jack felt like he never fit in after that. He recalled that he was not invited to birthday parties or other after-school events. His former classmates made fun of him because he was "stupid." From Grade 2 to the end of Grade 5 Jack became a bully. He was given two- and three-day detentions for hitting other kids. One kid required five stitches after Jack hit him over the head with a bicycle chain. Jack also put on weight at this time. He did not want to go anywhere and withdrew into his house with his mother. He continued to gain weight and to beat on other kids. None of his teachers asked him why he hit other kids, but if they had, Jack would have said that it was because they teased him about his weight. He did not tell anyone that, from a very young age, he was called a "faggot" and would beat up other kids for this as well. The name-calling puzzled Jack because he worked hard to keep his love of what he called "girls' toys" a secret.

Over the years Jack and his mother kept his sister's room intact, a shrine to her. When Jack was stressed he went to her room and played with and looked at her belongings, wishing she were alive. He also took his stuffed animals and little ponies into her room and played with them there. Jack

felt safe in her room. His mother, as Jack recalls, remained withdrawn and depressed throughout his time in grade school. She did defend him from neighbours and teachers when he was accused of being a bully. Towards the end of Grade 5, Jack ended his bully stage and decided that he was going to excel at school. He had gained even more weight and described himself as "a fatso, that was me ... I ate and ate and ate all the time, no one stopped me." Since his sister's death he spent increasing amounts of time alone, in a more and more sedentary manner, and spent long hours studying. Jack was able to excel because he had few friends, and once school was out, "I spent little time with any of my peers. Oh, I would walk part way home with some of them." His alienation from friends was related to being left behind in Grade 1, feeling older than his new cohort group, and being harassed and called names. He liked things that most of his male cohorts would not approve of, so he kept "that part of me silent, out of the picture," yet he was still harassed for being different. By the end of Grade 6 Jack was the top honour student in his class and had taken on all kinds of extracurricular activities: "I wanted all the awards, it was not enough to just be the honour student: I wanted to be the best in everything."

Jack knew that most of his teachers were uncomfortable with him. At first, he related this to the fact that he was a bully and that his sister had died. Then he thought that teacher discomfort was related to the fact that he was "a fat kid." Since he kept his like of playing with girls and girls' toys secret, he did not think the teachers knew about this aspect of his difference from other boys. It was not until Grade 6 that he became aware of another dimension to his difference, a "really serious" difference. At this point, Jack determined that teacher discomfort was because he was fat and because he was "showing." "Showing" for Jack meant that others could tell he was different because he liked boys "that way." "That way," for Jack, included kissing boys and living with them in the same house. Yet he played mostly, when he did play, with his girl cousins. "Showing" was also related to the way he walked and talked, which he thought were very feminine. By "feminine" he meant that he kept his arms tucked close to his sides; that he used his hands to emphasize what he was saying; and that he would "mince along" in smallish steps. He also felt that his voice was too feminine, too "girlie-like." Jack demonstrated a "girlie-like" voice for me, telling me that I knew what he meant.

During Grade 6 Jack fell in love with his music teacher, an attractive thirty-year-old man. Jack stared at this teacher whenever the opportunity arose but was increasingly afraid that this was making his difference show even more. He said he knew that he had to keep this difference a secret because no one would approve. Even so, he felt that, despite his academic achievements, his teachers did not approve of him because they knew his secret.

While he worked at not showing, other students must have known because they called him names.

One teacher stood out for Jack. In Grade 6 he discovered that he liked dancing, and the teacher, a woman, encouraged him and complimented him on his grace as a dancer. Jack was thrilled and worked hard at dancing. Unfortunately, other students made fun of him because boys were supposed to hate dancing. Nevertheless, the teacher's approval was a high point in Jack's school years and in his interactions with teachers. The following year, Grade 7, a group of boys pulled Jack's pants down to his ankles while he was getting his books from his locker and whispered "faggot" at him. Up until this time Jack wore jogging pants because they fit comfortably. He now made his mother go out with him and buy two pairs of jeans; he never wore jogging pants again. This incident was a horrific one for Jack and, as he told me about it, the shame and anger resurfaced: "I was so ashamed because I was so fat ... I felt myself turning bright red as I pulled my pants up and looked around to see if anyone else noticed. Afterwards, I was enraged at not being able to say or do anything back. I am still emotional about this incident five years later."

Jack worked harder at "not showing" and losing weight as he now knew what faggot meant and that people would make him miserable because, as he said, "I realized I was one." Jack was a top honours student until Grade 11, yet, for the most part, his teachers avoided him. A Grade 9 teacher physically moved back whenever Jack approached him, leaving Jack feeling "unwanted and repulsive." As Jack says, "he made it clear that he had to acknowledge that I was at the top of the class but that he didn't have to do anything beyond that, even though he made a big deal of inviting and including other students into his inner circle. Oh, he made it clear that he did not like me."

The lowest point in Jack's school years came in Grade 10. Jack had to take physical education and found himself in a class with most of the members of the high school football team. They all seemed to hang around together and gave him funny looks. He was "terrified of showing ... I did not want those guys to know about me." Also, although Jack was working hard at shedding pounds he was still overweight and out of shape. Being in the gym with the football team made Jack extremely nervous: "I broke into a sweat just thinking about phys ed and, in the class, I sweated buckets ... so much that I was constantly mopping my face and my armpits were soaked down to my waist ... it was embarrassing!"

One day, several weeks into the term, Jack found himself in the boys' washroom with the football captain, a particularly scary person. According to Jack, this guy "talked in a gruff voice and gave me looks that made me feel small and foolish and very afraid like he was going to smash me in the

face if I said or did anything ... I was scared, I just kept thinking oh oh, oh oh ... I'm in trouble now." Jack hurried into a bathroom stall and slammed the door shut. When he came out he quickly ran his hands under the tap and smoothed his hair back so he could make a quick escape. As he was retreating, the football captain roared out, "What do you think you're doing?" Jack replied, "Me-ee? What do you mean?" The football captain roared again, "You haven't washed your hands properly!" Jack responded, "Oh, whatever" and raced out of the washroom.

The next gym class involved learning the rules for and playing basketball. When Jack passed the ball to his classmates, several of them could not seem to hold on to it. It was subtle at first, but over the course of several classes more and more of his classmates would not catch the ball and would begin whispering when play stopped. Jack heard them saying that they would not catch the ball because Jack's unwashed hands had "contaminated" it. With each class, Jack felt that everyone was focusing on him even more than they had previously, and he began sweating profusely. Some of the young men made a point of staring at Jack's armpits, and most of them began to avoid standing anywhere close to him. Whispered comments about his profuse sweating, the contaminated ball, and the fact that he was "one of those" circulated and were loud enough for Jack to hear.

Jack was devastated because he worked hard to ensure that no one knew his secret; he worked against his own "inclinations" in order to avoid "showing." For Jack, "inclinations" referred to the way he walked, gestured, talked, and sat. By this time, Jack was desperate to get out of the phys ed class and went to the school counsellor, who advised him to talk to his mother because, given his outstanding academic record, it was not a good idea to drop any course. He talked to his mother, who said that whatever he wanted was all right with her. Jack was not out to his mother or to anyone else. He went back to the counsellor, who wanted to know why Jack wished to drop the class. Jack was increasingly desperate and refused to answer that question with more than a "because." He quit attending classes.

Finally, the counsellor contacted the gym teacher who was also the coach for the football team. The gym teacher/coach went back to the class and chastised the students for discriminating against "someone like Jack." The gym teacher contacted Jack and told him what he had done. Jack was even more devastated – not only because he had been singled out in this way but also because the gym teacher had not asked him whether such an action were appropriate. Jack felt that he had been outed, with no input as to if, how, or when this would happen. To top everything off, the gym teacher's advice to him was: "Don't let them get you down and get back to class and face them like a man ... otherwise you will be a wimp for the rest of your life." Jack refused to go back to this class and, instead, negotiated a reduced mark. He spent the rest of his high school years avoiding members of the

football team, his former classmates. His high school was large enough that he was able to accomplish this by ducking into rooms and turning his head whenever he saw anyone he wished to avoid.

Jack spent a huge amount of time and energy being vigilant because he never felt safe: "There were some ten of them in the class and chances of me coming across at least one of them every day were enormous. And besides, they were always together, so no matter what the counsellor or teacher said, I did not trust them and always felt afraid they would do something else to embarrass me or try to make me fight. I never felt safe."

In Grade 11 Jack found a friend, a young woman to whom he came out. She was respectful and encouraging. He came out to his mother next, and she told him that she already knew and was okay with this as she loved him, as he put it, "just the way I am." Because Jack had found a friend he did not put so much into his schoolwork; his time was spent elsewhere. "I was thrilled; this was my first real friend ever and I could tell her anything. I was afraid of losing her friendship, but now I have lots of friends, many of them girls because they seem to be more understanding." Jack began volunteering at the local HIV/AIDS centre and found a community that took him further away from schoolwork.

*School just began to feel so irrelevant to my life. I was teased and harassed. I was afraid most of the time. Teachers did not like or respect me even when I had great marks. I never learned anything about myself that was useful. When I found my best friend, even getting good marks was not important. I contemplated dropping out of school.*

Schooling was a constant struggle for Jack as he worked hard to avoid "showing" and to keep himself safe. Even though he had good marks and engaged in student activities, little at school alleviated his sense of alienation and isolation until he found a friend in Grade 11. He remembered observing how other boys were teased because they did not fit in, and he looked for reasons for his difference (i.e., the loss of his sister, his weight) because he was afraid to be like the boys who were teased. Yet he was one of those boys, a fact to which the constant teasing attested. Jack's knowledge of himself as a "sissy" became ever more apparent. And he knew that this was the "absolutely wrong thing to be in school if you were a boy ... I knew I was not a normal boy, but I could not help myself ... most of the time for being a sissy-fag, hey that's what I am ... that's what I was, even if school, teachers, other kids, whoever ... made sure I knew this was wrong, wrong, wrong."

### **Polymorphous Genders: Queer Identities in Formation**

The relentless pursuit of a rigid two-sex, two-gender, one-sexual orientation system continues into the twenty-first century. Yet resistance to the

dominant gender discourse surfaces with a frequency not possible thirty, twenty, or even ten years ago. The explosion of discourse around queer sexualities has greatly facilitated surfacing subjugated knowledges of sexual and gender orientations. Inter-sexed infants and queer transsexuals are evidence of the fact of polymorphous sexes; queer and transgendered youth are evidence of the fact of polymorphous genders. These categories show that Freud's notion of polymorphous sexuality referred not to a stage or phase we all pass through but, rather, to a range of sexual possibilities in which humans may engage. Even as polymorphous sexuality is alive and resisting, such resistance always occurs in relation to dominating and dominant discourses. The two cases of queer youth presented above show how each young person performed in relation to the rigid structuring of gender discourse. Each was hailed by gender discourse, yet each responded to this call differently than did gender conformists. They refused the dominant liberal demand to make themselves identical to those who are gender conforming. Each knew that their performances did not match up to what parents, teachers, and others expected of them. Yet both Jack and Jill refused to alter their behaviours. Jack hid his from public view until recently, while Jill tried but failed to perform femininity, even when faced with severe sanctions from her mother. Each first understood difference through knowledge of gender-appropriate toys, activities, and behaviours.

Even as gender discourse produced Jack and Jill as different from the gender normal, both were inflected with other differences as well. The effects of race, class, and gender are explicit in both narratives. The effects of poverty in Jill's early life were produced by the privileged indifference of a classist and racist society in which those who are poor are left without the resources to raise their children. Both poverty and racism were also manifest in Jill's narrative about her parents. Her father died from the effects of disease and malnutrition; her mother died from a drug overdose. These early traumas inform Jill's identity in multiple ways. Racist practices continued throughout Jill's life and were particularly active throughout her schooling. Today she is still read as Other because she is masculine and looks like she is Aboriginal. In order to understand her life, one must read the effects of gender alongside the effects of other cultural phenomena.

Even if school was a horrific place for Jack, he never knew the insecurities that Jill faced from a very young age. Jack was able to take for granted food, care, and shelter. In large measure, this security allowed him to become a high achiever academically. Jack was able to pass as white and thus never felt the effects of racism. Yet he knew the effects of a fat-phobic discourse. He knew that his body morphology did not match the dominant body configuration of a sleek and fit masculinity. The effects of his failure to conform were manifested in teasing and harassment.

As with Jill so with Jack: in order to understand his schooling years, one must read the effects of gender alongside the effects of other cultural productions. In school, the effects of gender produce Jack and Jill as unintelligible to those around them. According to Jack: "I never fit in anywhere until I found my friend." According to Jill: "This is not my world, no matter where I have been, I have not belonged ... I hated school because no one let me be myself." In their articulations with gender-rigid discourse Jack and Jill became, in effect, unknowable except as deviant Others. This is because inherent in gender-rigid discourse, or heteronormativity, is the spectre of homosexuality.

Through their production as deviant Other, Jack and Jill became the feared homosexual and, therefore, unintelligible. Unintelligible homosexual Others are discomfiting others. The net effect of gender discourse in schools is to relegate unintelligible, discomfiting homosexual Others to the margins, where they are either disappeared or rendered so peripheral that they can be ignored. This othering occurred in spite of the resistance Jill and Jack offered throughout their schooling and growing up years.

### **Heterosexuality: Gender Rigidity and Gender Melancholic Selves**

People picked on him and bullied him and called him a nerd, idiot, and faggot.

– *Edmonton Journal*, 30 April 1999

Detailed investigations during the last few years have led me to the conviction that factors arising in sexual life represent the nearest and practically the most momentous causes of every single case of nervous illness.

– Sigmund Freud, "Mourning and Melancholia"

Melancholic formation of gender sheds light on the predicament of living within a culture which can mourn the loss of homosexual attachment only with great difficulty.

– Judith Butler, *The Psychic Life of Power*

The preceding sections document the relentlessness of dominant gender discourse, which demands the cohesion of sexed bodies, gendered behaviour, and heterosexual desire and practice. There are, of course, other examples. The killings at Columbine High in Littleton, Colorado, and the high school

in Taber, Alberta, are effects of the pathologies of gender-rigid masculine behaviours. In both cases the killers were perceived as threats to a normative masculinity. According to a dozen students at Columbine High, gunmen Harris and Klebold were taunted mercilessly by anti-gay jocks who called them “faggots” and “gay.” The unnamed gunman in Taber was harassed daily at school by “male jocks” who also called him “faggot” and “gay.”

What can one safely state about a culture that daily produces and reproduces acts of homophobia and heterosexism in relation to sexual life? Are homophobia and heterosexism deeply psychic disorders repressed and then displaced onto the bodies of the homosexual Other in daily occurrences of silence, exclusion, and violence? Rigid heterosexuality could be considered as a psychic disorder that is so widespread and pervasive that it infects all of us in the form of the daily production of gendered and sexualized bodies.

It makes sense to understand the heterosexism and homophobia emanating from rigid heterosexuality as a grave and pervasive psychopathology – one that requires strategies and therapies to alleviate its psychic distress and to relieve the daily indignities and violence that it displaces onto homosexuals/queers. Demands of heteronormativity in the production of a rigid heterosexuality involve a process of disordering a self that once was homosexual. As Butler (1997) points out, the lost object of mourning – homosexual attachment – is disappeared from the consciousness of the melancholic heterosexual, who mourns this lost object by acting out against actual homosexuals. Internalized by the ego, the lost object (i.e., homosexual attachment to the same-sex parent) becomes the self that cannot mourn its loss but, rather, that preserves it internally and that constantly plays it out by insisting on the disappearance of the homosexual.

Melancholia, according to Freud, is the unfinished process of grieving for what is lost to the self. Melancholia is thus central to the identity formations that produce the ego. For Freud, the identifications formed through loss (i.e., through grief and melancholia) are those that are internalized and that are preserved in and as the ego. Essential to understanding Freud’s sense of ego development is the idea that the ego is “first and foremost a bodily ego” (Freud in Butler 1997, 132). Given the importance of masculinity and femininity for Freudian theory (as well as for social theory generally), we can assume that the bodily ego is a gendered ego.

The psychopathology of rigid heterosexuality results in there being very few cultural opportunities to mourn lost homosexual attachment. Cultural disavowals of homosexuality are so strong that the heterosexist or homophobic finds few opportunities (other than violent denial) to mourn this part of his/her self. The links between this psychopathology and discourses of gender (and their effects on conformists and non-conformists alike) is reason enough to advocate remedies that will enable disordered heterosexual selves to mourn their early homosexual identifications and,

consequently, make it unnecessary for them to take out their unmourned loss on homosexuals.

The psychopathologizing of a dominant group identity is a viable, attractive, and politicized strategy. It is a counter-move – one that reverses the discursive order by casting rigid heterosexuality and its constitutive gendered bodies as not only troubled but also psychopathological.