

How can Psychoanalysis understand Gender Identity?

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Abstract

My thesis asks how psychoanalysis can understand gender identity; I consider this socially, culturally, and psychoanalytically, exploring the conscious and unconscious aspects of the motivation or drive to realign gender. I consider how early awareness of difference between the sexes and contrast between phantasy and reality can trigger depression, denial and conflict. When this is unmanageable it can instigate a protest, and a schism between body and mind. I have developed theoretical ideas, conducted Psychoanalytic Research Interviews to bring in lived experience, and formulated hypotheses that I discuss as a psychoanalytic psychotherapist and as a researcher.

My theory chapters work through central concepts of gender and sexual identity, underpinned by Freud's ideas, British Object Relations, the American Relational School of Psychoanalysis, Second Wave Feminist clinical and theoretical contributions including Queer theory and aspects of Lacan and Laplanche.

My methodology provides a rationale for using Psychoanalytic Research Interviews specifically for this thesis, and also in the broader debate about psychoanalytic research. In my findings and discussion chapter I introduce hypotheses and interpret the interviews in relation to the theory chapters.

My ideas develop from a description and exploration of sex, sexuality and gender to more distinctive propositions about the reversal of temporality into 'I am therefore

I was' and unconscious matricidal wishes that might propel the drive to undo femaleness and femininity. Early development, Oedipal conflict, puberty, matricidal wishes, manifestations of masculinity, concreteness, fluidity, temporality and representation inform my investigation into sexual and gender identity and identification.

The proliferation of young women who wish to be, or feel themselves already to be male has been seen by some as a psychic epidemic¹; this might include the flight from womanhood and a move away from female homosexuality. By analysing the ways in which sexuality, identity, subjectivity and co-morbidity contribute to this phenomenon, I address how psychoanalysis as a discipline can better understand gender identity.

¹ Marciano, L. (2017) This term used by Jung (1970) is cited in the article: 'Outbreak: On Transgender Teens and Psychic Epidemics', *Psychological Perspectives*, 60: 345.

Impact Statement

Gender identity classification now permeates public life from filling in the Census form to registering for a Covid test. Gender identity has become a central aspect of identity politics in the twenty first century, making the subject of my research both topical and divisive, culturally, socially, politically and academically. I have approached my research psychoanalytically, but my work has also traversed the social, medical and cultural, and in that sense is transdisciplinary.

This research has the potential to yield benefits both inside and outside academia. I introduce new theoretical ideas that contribute to psychoanalytic theory for clinicians and academics, I formulate hypotheses, derived from the lived experience of trans men through my interviews and discussion of them, and my use of Psychoanalytic Research Interviews as a methodology may benefit future researchers whose research may not suit more traditional methodologies.

These contributions can be disseminated through publication in journals that are widely accessed, on psychoanalysis, gender, sexuality and research. The articles could be published in journals such as: Psychoanalytic Inquiry, Studies in Gender and Sexuality, Psychoanalytic Social Work, British Journal of Psychotherapy, Contemporary Psychoanalysis. As my subject is both psychoanalytic and psychosocial, published articles will interest academics, clinicians, researchers, social workers and medical practitioners.

The specific experiences recounted in the interviews show emotional, physical and social struggles as a comorbid aspect of gender identity. Awareness of this by practitioners can enhance their understanding of gender as one aspect of other identity struggles, and I will aim to reach them through specialist disciplinary and practitioner association journals. How psychoanalysis can contribute to a better understanding of gender identity is embedded in my PhD question, and as my interviews revealed mixed experiences of psychological help, I address what might encourage or discourage trans individuals to seek out psychological or psychoanalytic help.

I can discuss my PhD through talks at my psychotherapy training organisation (The British Psychotherapy Foundation) and at conferences that focus on gender. By sharing my findings, I can draw attention to improved ways of working with gender in clinical practice that ranges from NHS services offering psychiatric, medical, counselling or psychotherapeutic input through to psychological services in private practice.

My research has implications for broader field research, including the potential for follow-up interviews in the future. Longitudinal or long-term follow up research is often lacking in relation to transgender individuals, and could provide useful insight into how individual trans men reflect on their surgical changes and gender identity in the future, as they move further into their adult lives.

The research additionally has the potential to generate outputs through original articles that I plan to base on some chapters of the PhD, in high profile

psychoanalytic and other relevant journals on gender and sexuality. During my research I found less literature on the more unconscious aspects of transgender identity, particularly that of trans men. My PhD can make an impact in this area as it looks at lived experience in depth and through a psychoanalytic lens, thus contributing to UCL's aim of delivering impact for public benefit.

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Introduction

Why do some young women wish or feel themselves to be men? How can we think about this not only socially and culturally, but psychoanalytically? The question: 'Am I a man or am I a woman?' is central to transgender identity and is recognised as one of the (psychopathological) underlying questions in hysteria. With this in mind I approach the sensitive, complex and highly charged subject of gender identity, with a focus on trans men. I have developed theoretical ideas, conducted Psychoanalytic Research Interviews to bring in lived experience, and formulated hypotheses that I discuss as a psychoanalytic psychotherapist *and* as a researcher. In asking how psychoanalysis can understand gender identity, with a focus on trans men, I explore how the earliest awareness of difference between the sexes and the contrast between phantasy and reality can trigger conflict. When this conflict is unmanageable it can instigate a protest¹, and a schism between body and mind. I suggest that temporality can reverse to: 'I am, therefore I was', in that current identity redefines past identity. I also propose that unconscious matricidal wishes might underlie killing off femininity in oneself, as a way of severing a tie to a mother represented by an unwanted female body.

The term that is often used in gender identity is 'assigned' either 'female' or 'male' at birth². Assignment suggests that a gender is bestowed, given or allocated to the natal infant, rather than announced because of the genitals and chromosomes as seen to exist at birth. It promotes subjectivity over objectivity, and it is as if at birth

¹ Pilgrim, D. (2020) has written about the origins and implications of protest and acquiescence, through a Critical Realism lens, and how these emerge in social contexts.

² In cases on Intersex at birth, the 'assignment' is less straightforward.

someone (usually the doctor or midwife) has passed something onto the infant (or usually the parent) possibly in error, as a form of ‘pseudo-medicalization’ and only because of what they have noticed physically, or incidentally. The word ‘assigned’ can therefore be misleading, and carry political weight; within it is a massive split between body and mind that this thesis wishes to debate and open up. The word ‘assigned’ can include the suggestion that the wrong sign was applied, or that something careless has taken place, by the designation of a sex at birth. The feeling or at times conviction of having been born in the wrong body (‘birthright’ becomes ‘birthwrong’), can be part of the transgender narrative, but it is not the only narrative. I discuss the elastic aspect of temporality in relation to current experience and past history, and how causal chains can be unlinked.

My PhD question was born of an initial interest in hysteria and the underlying (psychoanalytic) question ‘am I a man or am I a woman?’ Hysteria has been conceived as a battle or struggle between the sexes enacted in the body (Yarom 2015). This question and formulation resonate with aspects of transgender identity in which identity as male or female is pivotal and in conflict. The substantial growth³ in referrals to Gender Identity Clinics amongst AFB (Assigned Female at Birth) children and adolescents in the UK in recent years added to my interest, as well as the more recent phenomenon of Rapid Onset Gender Dysphoria⁴, or

³ An increase in referrals of 40 natal females in 2009/2010 to 929 in 2015/16, Gender Identity Development Service statistics. Between 2011 and 2017 natal female and male referrals to GIDS has risen approximately 10-fold (Butler et al.2018 in Lemma 2018).

⁴ Littman, L. (2018) ROGD is a non-medical term, used to describe aspects of the contagion of transgender identity, often through social media sites. This term created controversy that led to a revision clarifying that Littman’s study relied exclusively on “parental observations” and not those of adolescents or clinicians. Littman, L. (2019:1). Farley & Kennedy (2020) critique this term and its use.

“adolescent-onset” Gender Dysphoria⁵. The proliferation of gender identity has been referred to as a ‘psychic epidemic’.⁶

The trans phenomenon raised questions for me about why now, and why so much? It is hard to find accurate demographic data on the areas of the world in which transgender or gender variance is most prevalent. In the UK 2021 Census questions on gender identity appeared for the first time, indicating a recognition of the importance of this data for public health policies. Spizzirri et al (2021) found in their study on Brazil, that estimates of the proportion of gender diverse individuals vary between 0.1% and 2% of the population, indicating a wide range of possibilities. Figures will depend on the inclusion criteria and locations where studies were held. Most of the epidemiological studies were conducted on individuals already treated or referred for treatment at gender affirming healthcare centres. This means that available data may exclude large numbers who simply do not or are reluctant to seek help, and this seems to be the case not only in Brazil.

A study by Flores et al (2016) showed an increase in the number of US citizens who identify as Transgender in the last decade. Questions about gender identity did not tend to appear on population survey questionnaires, whether in the UK or in the USA, but this has begun to change. As both the 2021 UK Census, and electronic medical record systems in the USA now include gender identity questions within their data intake fields, more data should be available to researchers in the near future.

⁵ Hutchinson et al (2019), a description that denotes a lack of symptoms prior or during early puberty.

⁶ This was a term used by Jung (1970), and cited by Marciano, L. (2015).

The two clear trends that most studies reveal, according to Nolan et al (2019), are the growth in the proportion of Transgender and Non-Binary⁷ (TGNB) “self-identifying”⁸ individuals over time, and a higher proportion of TGNB among the younger generations. According to the Williams Institute’s estimates (USA), (2016), prevalence among young adults is highest in the 18-24 years old age group at 700 per 100,000 (0.7%), compared with 600 per 100,000 (0.6%) in 25-64-year-olds, and (0.5%) in age 65 and older.

Puberty suppression⁹ for gender dysphoric adolescents in the form of hormones, was first introduced in Amsterdam in The Netherlands in 1994 (Cohen-Kettenis & Van Goozen:1998); there has subsequently been provision in Northern America (USA and Canada), in some countries in Europe, and in Australia/New Zealand. This has occurred despite reluctance due to lack of data on the long-term physical outcome. At what age and whether puberty should be medically controlled stimulates much debate and conflict (Biggs 2019, Giordano 2020); not least in the initial outcome of the 2020 UK Judicial Review (Bell-v-Tavistock 2020), that was subsequently successfully appealed (Tavistock & Portman 2021).

De Graaf and Carmichael (2018) verify that gender diverse individuals are contesting, owning and refining the language of gender. There is an emphasis towards de-pathologising in health care, that includes self-definition and self-determination. As an example, the preferred definition for ‘biological sex’ became

⁷ A gender identity that does not subscribe to the binary of male or female, regardless of natal sex.

⁸ The term is not one that all trans individuals would necessarily share.

⁹ GnRHa, Gonadotropin- Releasing Hormone agonist. Also referred to as ‘puberty blockers’, or ‘puberty delaying medication’ (2018 Giordano).

natal gender and then *birth-assigned gender* (2018: 357). To my mind this language slippage *from sex to gender* as a defining category is highly symbolic, and epitomises a cultural shift from privileging objectivity, essentialism and rationality to a heightened valuation of subjectivity and social constructivism. Sex, in this context, can morph into Gender, which blurs their difference.

The confusion between gender and sex plays a large part in the attempt to understand transgender identity, in which surgeons readily alter ‘the sex’ in order to meet the ‘right’ gender for their patients. This hands-on approach has added to the proliferation of the phenomenon, as surgery can both cut up the body and cut off from the psychic turbulence that gender struggles express. Gender is often the pretext for difficulties with developing sexuality in body and mind.

My initial plan was for a theoretical PhD with the possibility of reference to memoirs written about transgender experiences; however initially I found many more memoirs written by trans women than by trans men, on whom I wished to focus. I considered interviewing specialist clinicians about their approach and experience of working with gender, but this plan lacked direct lived experience. I was curious about *why many young women in the twenty-first century wanted to disown their femaleness and felt themselves to be men?* My interest went beyond questions of patriarchy and inequality which are embedded culturally, historically and socially. I apply a psychoanalytic lens to unconscious as well as conscious motives to transition through interviews with trans men aged between eighteen and thirty. I wished to gain access and insight into actual lived experience through the interview narratives, rather than relying on memoirs or clinicians. I have

developed theoretical ideas, conducted Psychoanalytic Research Interviews to bring in clinical material, and formulated hypotheses. [that I discuss as a psychoanalytic psychotherapist and as a researcher]. I derive my hypotheses from the interview narratives and synthesise these with the theory chapters.

The psychoanalytic exploration of gender identity has historical, cultural, social and political implications. The theory chapters work through concepts that I have found to be central to the understanding of gender identity within psychoanalysis since Freud. I take Freud's writings as foundational texts that lay the groundwork for agreement and dissent, and provide the backdrop to and spring-board for my ideas. The main psychoanalytic schools of thought that I refer to are: British Object Relations; the American Relational School of Psychoanalysis; Second Wave Feminist clinical and theoretical contributions; Queer Theory and aspects of Lacan and Laplanche. I include other significant psychoanalytic clinicians and academic writers where relevant.

Freud's seminal Three Essays on the Theory of Sexuality (1905) cast a new light at the time on what is meant by a sexual instinct, and on whether we are inherently object-relating or not. The contradiction or conflict between these two positions is central to psychoanalytic theory. Freud did not conclude on this issue, perhaps deliberately as a way to draw the reader into this universal dilemma between instinct and object. Freud's statement that "What is essential and constant in the

sexual instinct is *something else*" ¹⁰ (my italics), implies that Freud did not want to reduce sexuality either to relations or to object related interpretations¹¹.

There has emerged what might be termed a growing 'gender impulse' or impulsion towards gender adjustment and transition in recent decades, as the possibilities of gender identity have become increasingly pliable. The difference between instinct and object applies to the vicissitudes of transgender identity: an *instinct* towards male or female identity in oneself and the sexual *object* of choice in the other can become entangled. In attempting to comprehend transgender identity our minds are put to work as it falls outside more traditional gender categories; for some it is counter-instinctual as we try to grasp that *natal sex no longer denotes gender*. The nuances in gender identity require nuanced thinking on the part of psychoanalytic clinicians who are faced with patients presenting with potentially life changing modifications to the natal body.

This requires a shift to asking 'how' from asking 'why'; an openly enquiring stance open to gender variation, and a move away from an orthodoxy that might wish to pathologize unorthodox presentations of gender identity. The clinician's stance in relation to gender can, in my view, be thought of as being on a spectrum of acceptance, scepticism or disavowal. It requires thoughtful flexibility, a Janus like capacity to look back at history as well as forwards in relation to bodily consequences; the bifocal ability to have short sighted (the present) and long

¹⁰ Freud 1905: 149

¹¹ This aspect of the Three Essays is discussed by Blass 2016.

distance (the future) vision. If an eye on the past is included, this would require trifocal vision.

Freud placed what he termed the (sexual) perversions on a continuum with normality. At the beginning of his work on the theory of sexuality, the sexual perversions were being subjected to a systematic study by Kraft-Ebbing (1893) and Havelock-Ellis (1897), so it was a topical area of investigation. It also has resonance and is topical one hundred years on, but more in relation to gender identity than sexuality. Freud's approach was to throw open the more traditional definition of sexuality by using perversion as a yardstick. He found that the general disposition to (sexual) perversion was not unusual and this led him to the notion of polymorphous perversion in pregenital infantile sexuality¹². This idea enabled Freud to then view adult perversion as a persistence or re-emergence of a component part of sexuality. The words perversion and normality are historically and culturally specific and therefore need to be used in context. The insight that perversion was equally applicable to us all, albeit propelled unconsciously, is valid and useful in contemporary clinical work. Freud enabled mysterious sexual symptoms to be understood psychically, and hence independently from biology; access to the psychic realm was via phantasy and psychic reality.

Whereas Freud described a continuum, my interviewees referred to a spectrum upon which they sought to locate their gender identity. The breadth of the spectrum facilitates multiple possibilities for gender identification, not unlike the

¹² In Freud's (1905) understanding of pregenital infantile sexuality component instincts are interlinked with the diversity of erotogenic zones.

anarchic freedom of love, sex and drugs in the 1960's. The freedom of sex appears to have changed into the freedom of gender. This lends gender an air of rebellion or protest, which opens up poignant questions: *what is the 'gender protest' rebelling against?* Are the loosened boundaries of gender and the rapid accessibility of gender identities empowering or disempowering for the young person in search of identity? There is (or has been) a risk that gender is latched onto as an explanatory framework that can subsume or cover up other psychological struggles that include depression, anxiety, anorexia, self-harm, and in that sense is co-morbid. This does not undermine the validity of individual struggles with gender and sexuality.

Major lines of enquiry that underpin my research include: the differentiation and interlinking of sex, sexuality and gender; early awareness of the difference between the sexes and the capacity to manage this reality; the parental couple linked or unlinked as generative in the child's mind (the primal scene); enigmatic signifiers that are transmitted from the parents' unconscious; the altered temporality of 'now meaning then'; unconscious matricidal wishes that underlie the self-severance of femaleness and femininity; the meaning of masculinity for the trans man's identity and body, and the concreteness and fluidity of gender in the body and mind.

In usual circumstances, from birth onwards infants are in their parent's hands, and often in mother's hands more frequently than fathers at the early stages of development. This of course would not be so definitive or binary with single parenting, gay male or female couples, transgender couples, or combinations of these. I place the mother's or primary carer's very early forms of relating and handling of the infant's body as highly significant and influential. The child both

absorbs and tries to make sense of what the mother or parents transmit consciously or unconsciously; this is what Laplanche termed 'enigmatic signifiers' or the transmission of 'the sexual'¹³.

Puberty affirms the body's development along sexual and gender lines and it is not surprising that it is often during puberty that gender conflict comes to the fore. The female body with developing breasts and menstruation is confirmed as reproductive and thereby like mother's body. I discuss in my interview material how this realisation and identification impacts on a female body that experiences femininity and female sexual development as incongruent. I look at the movement of sexuality during gender transition. For most interviewees for whom bisexuality preceded their (wished for and sought after rather than natal) gender identity, they mostly remained bisexual post transition. This indicated that the pre-transition sexual object can remain constant post transition, and that although gender has changed the sexual object of choice has not. What has changed is the subjective position (gender identity) from which one relates to another as sexually desiring and desired; whereas I was female and gay, I am now a trans man and straight. The other's perceptions of maleness and femaleness within sexual desire are of central importance for the trans man, whether this is understood as a projection or not. Some interviewees told me with surprise that they were still bisexual after identifying as trans men, revealing a binary or monosexual expectation.

¹³ The Sexual (in translation) or *le sexual* as opposed to the more standard French term *le sexuel*, is a neologism of Laplanche (2007).

The subject of my research is currently in the public eye. Gender identity once was not and now very much is woven into the fabric of everyday life. Not only on widely used social media forums like Facebook, and YouTube but also in the recent UK Census, gender identity 'affiliation' is broken down into detail, confirming that it is now socially and culturally important to document it. This enhances the relevance of projects that aim to further our understanding of the subject.

The Chapters

The format of this PhD is five theory chapters, a research methodology chapter and a findings and discussion chapter. Below is a synopsis of each chapter.

In order to place the PhD in a historic context, chapter 1 begins with a review and overview of Sex, Sexuality and Gender spanning the Sexologists, Freud as well as gender and psychoanalytic theorists. I address the meaning and relevance of each concept. This overview sets the scene for the chapters that follow.

I move onto or into The Oedipus Complex and Female Development in the second chapter. I look at the Oedipus Complex as a process that both organises and disorganises development. I include interpretations of Sophocles' version of the Oedipal myth that question the 'choosing not to know at the same time as knowing', which is equally pertinent to the complicated management of a natally female body for a trans man. I focus on female development, a contentious subject for which Freud was much criticised in his adherence to the theory that female sexuality is based on a lack and that masculinity is inherent to both sexes from the

outset. Stoller ¹⁴ reversed this theory in the 1960's, when he proposed that both sexes start as female physiologically. Many explanations have been proposed as to why Freud like Oedipus might have taken the wrong path here. Britton (2002: 111) suggests that he was too influenced by his analysis of his daughter Anna, and Scarfone (2019: 571) suggests that Freud mistook "inborn fantasies" for the translational efforts of the child. I look at some of the theorists who challenged Freud's position at the time namely Jones, Horney and Klein. For Klein the nature of early femininity is inseparable from introjective and projective mechanisms that occur through unconscious phantasy.

Matricide is introduced and theorised in the third chapter as an enacted form of killing off femaleness in self and object. I posit this idea in contrast to the more usual theorising on patricide via the Oedipus Complex. This idea is highly applicable to trans men who wish to renounce femaleness which must in some respect include their conscious and unconscious link to motherhood, female sexuality and what it symbolises.

Chapter 4 is about masculinity and the phallus. I describe different forms of concrete and symbolic masculinity that include: hegemonic, seminal, medicalized, pharmacological and *après coup*. I discuss the phallus in its Freudian, Lacanian, Lesbian and Feminist forms, that includes aspects of Queer Theory. The notions of non-phallic masculinity, the trans phallus and *après coup* masculinity are introduced as part of my exploration. I look into how the phallus is conceptualised

¹⁴ Stoller, R.J. (1968).

or embodied by trans men within a customised masculinity that can form a psychic equivalence or symbolic realisation¹⁵ between phantasy and reality.

In chapter 5, I look at notions of representation, fluidity, concreteness and temporality. By representation I include the capacity to think metaphorically through symbolising and how this develops early on in infancy. I look into the meaning of fluidity not just as a term often used in relation to gender but as an expression of sexuality in the body. Bodily fluids announce sexual urges or desires that differ between the sexes and hence are gender specific. I explore the concreteness of the body prior to symbolic forms of thinking: Freud's bodily ego and Ferraro's Concrete Original Object. The temporality of gender has specific meaning when 'psychic gender' does not correspond with natal gender, as identity is retrospectively attributed, thus reversing *après coup* into 'what is now was then': "I'm a man". This reformats and challenges a timeline for development of sex, sexuality and gender; it challenges and undoes causal links that shape personal history.

The methodology chapter provides a rationale for the Psychoanalytic Research Interviews (PRI) I conducted, my construction of hypotheses and my clinical analysis of these narratives. I expand on my use of psychoanalysis as a research tool and my use of psychoanalytic theory as an object¹⁶. The arguments for psychoanalytic theory as a significant contributor to the generating of research in psychology, and

¹⁵ A term introduced by Sechehaye (1951), in her work with schizophrenia in a young patient. Sechehaye attempts to get through to the patient by offering a symbol (apples) that represents reality (breasts). It is an attempt to enter into or echo the unsymbolised world of the patient concretely, and meaningfully.

¹⁶ I refer to Winnicott's (1969) 'Use of an object' and Mitchell's (2005) use of psychoanalytic theory as an object.

especially the psychoanalytic interview as a bona fide research method (Cartwright 2004, Kvale 1990), are outlined. I continue the debate on what constitutes valid research within psychoanalysis: the individual case study or systematic empirical investigation. Ideas about the emergence of configurations in my thinking and the importance of caution about an overvalued idea or premature conviction are described and adopted in my approach to the analysis of the interviews. I concur with Spence¹⁷ who states that “a case is not a fact”, and with Edelson’s ideas about the hazards of over investment in one’s own conjectures that can neglect “thoroughgoing scepticism”¹⁸. I discuss my treatment of the interview material as subjective descriptions of life experiences as seen by the mind’s eye, both their minds and mine. Cartwright¹⁹ refers to metaphoric elaboration on the “facts”. I also describe how I derive my hypotheses from themes by using aspects of Interpretative Phenomenological Analysis (IPA), (Smith 2003). I expand on how I use aspects of PRI and IPA, as a hybrid, in my methodology chapter.

As a culmination of my theoretical exploration, in my final chapter I develop my hypotheses and research findings through discussion of the Trans scripts. I analyse and interpret the interviews, quoting excerpts. My training as a psychoanalytic psychotherapist enables me to use psychoanalysis as a tool with which to interpret the narratives, although I conducted the interviews as a researcher. The hypotheses were derived from the interview narratives, and also draw on themes from the preceding theory chapters. The synthesis of excerpts from interviews,

¹⁷ Spence, D. (1982) Narrative Truth and Theoretical Truth. *Psychoanalytic Quarterly*, 51: 43-69.

¹⁸ Edelson, M. (1985), The Hermeneutic Turn and the Single Case Study in Psychoanalysis. *Psychoanalysis and Contemporary Thought*, 8(4): 567-614.

¹⁹ Cartwright, D. (2004) The Psychoanalytic Research Interview: Preliminary Suggestions. *Journal of the American Psychoanalytic Association*, 52 (1): 209-242.

hypotheses and my analysis provide the basis for the beginnings of an answer to my PhD question, which I address in my conclusion.

My approach throughout my writing is one of “thoroughgoing scepticism” (Edelson 1985) as applied through a wide lens that is rooted in psychoanalysis that is both historic and contemporary. My initial interest in gender identity was born out of curiosity and a genuine wish to understand more, Klein’s epistemophilic impulse or instinct (*Wissentrieb*), through expanding my knowledge in the field. I have not focussed on the politics of gender, or on transgender as a movement, although these cannot be entirely sidelined. Gender politics have been, are and will continue to be a lively and divisive subject area. For instance, during the writing of this PhD, a live component has been the outcome of the judicial review I mentioned earlier (2020) about the age at which puberty blockers can be prescribed, and the subsequent appeal against this outcome, that was upheld (2021).

The struggle to inhabit femininity and femaleness can stir up primitive anxiety that threatens identity. Alteration in gender can be seen as a potential solution for this anxiety. I hope that my PhD contributes to the understanding of trans men and gender identity in the context of psychoanalysis.

Chapter 1

Review of Sex, Sexuality and Gender

...the body never stops haunting the presumed autonomy of the unconscious, never stops littering the field of psychoanalysis ...
Anatomy, then, is neither fully destiny nor lack of destiny in its psychoanalytic conceptuality: it is instead what might be termed its a-destiny, that which prevents psychoanalysis from completely coming into its own as Theory, from thinking that it escapes the body when it defines itself against it. (Parker 1986, in Breen 1993)

In this introductory chapter I intend to define and review the multidimensional concepts of sex, sexuality and gender. By sex I am referring to biology, by sexuality I generally mean aspects of the self that are oriented towards another object in relationship either psychologically or physically, and by gender I mean the location (or dislocation) of a self-identity on the broad spectrum of femininity and masculinity. The aim of this review is to set the scene for further chapters in order to explore how psychoanalysis can understand gender identity, with a focus on trans men.

These foundational, confusing and at times overlapping concepts have been the subject of much controversy in recent decades. The ontological nature of sexuality and gender is now generally viewed more as an individual compromise formation than a final achievement following set developmental milestones, although aspects of development remain valid. Through a selected historical review, I aim to map the theoretical and clinical landscape of sex, sexuality and gender. This timeline

includes: the sexologists, Freud, Horney, Stoller and relevant clinicians and theoreticians from the feminist, relational and psychoanalytic schools of thought. Freud's writing on the theory of sexuality will provide the foundation for discussion.

The Sexologists and Freud

The science of sex can be traced back to early sexologists: Krafft-Ebing, with his publication 'Psychopathia Sexualis' in 1886, was for decades the authority on sexual aberration and approached sexual variation as a matter of constitution and genes; Havelock Ellis who published 'Studies in the Psychology of Sex' (1897-1928) that helped to dissipate anxieties associated with sexuality and sexual problems and in doing so challenged Victorian taboos on the subject. The second volume of this was 'Sexual Inversion', the first English medical textbook on homosexuality that did not treat it as a disease. Magnus Hirschfeld, a contemporary of Havelock Ellis, initiated the Journal of Sexology (1908/1918) and both of them pioneered transsexuality as separate from and different to homosexuality. The journal, which ran for a year on a monthly basis, included articles by Freud, Adler and Stekel.

In 1905 with the publication of 'Three Essays on the Theory of Sexuality' Freud opened up the subject of sexuality as a new anthropology. This book was and is considered to be one of Freud's major works along with 'The Interpretation of Dreams' which preceded it in 1900. Freud continued to update these two books throughout his life which showed how he struggled and persevered with dreams and sexuality. It has been suggested that it might have been Freud's discovery of

the sexual nature and unconscious wish in dreams that led him from one publication to the other (Haynal 2009: 21).

'Three Essays' gathered together Freud's developing ideas on human sexuality and is a seminal text that is still much debated and referred to. Freud was convinced by a chemical basis for sexual excitation (initially included in 'Anxiety Neurosis' in 1895), by early bisexuality (Fleiss's input is acknowledged by Freud) and a continuous thread between infantile and adult sexuality, all of which he included into the framework of sexual development.

Freud suggested that infants are born with sexual drives or polymorphous sexual impulses (correspondence with Fleiss 1897) that seek out objects that will gratify them. Although stages of development establish themselves around erotogenic bodily zones, there is not a clear trajectory for these sexual or libidinal drives and their aim and object are far from predictable as many pleasurable and frustrating experiences intervene. Freud challenges the assignation of sexual instinct to a specific aim and object. He shows how unfixed the object that is sought is and how contingent it is on personal history (Laplanche & Pontalis 1988: 215). He showed openness in his thinking about sexual orientation and was curious about how individual orientation forms.

In 'Three Essays' (1905) Freud investigates the natural impulses, drives and instincts of human beings and the way in which personality is formed through the development of sexuality (initially) in infantile relationships. Freud used the German word *trieb* for drive which Strachey translated to 'instinct'. This translation can be

confusing as drive and instinct do not necessarily have the same meaning in spite of this conflation in translation (Fletcher 2015).

Freud gave the name 'Libido' to the energy that fuels the sexual instinct as it moves towards its object and its aim, and the energy that underlies sexual excitation. It precedes more sophisticated conative structures. It is a concept that is hard to define and was developed by Freud alongside the different stages of the instinct theory.

Libido is an expression taken from the theory of the emotions. We call by that name the energy, regarded as a quantitative magnitude (though not at present actually measurable), of those instincts which have to do with all that may be comprised under the word "love" (Freud 1921: 90).

In the first edition of 'Three Essays' (1905) the focus is on object libido. It has a seeking quality in relation to objects: either fixing on them or moving between them. Freud introduced the terms 'ego-libido' and 'object-libido' in order to separate out distinct forms of libidinal cathexis. In his work on psychoses, Freud saw that the ego can take itself as an object as well as cathecting to external objects. For Freud, libidinal cathexis begins in the infantile ego and from there it can extend outwards towards other objects. He called this early state Primary Narcissism. There has been much debate about the chronology of this early 'objectless' state. For Klein, the newly born infant is object-cathected from the beginning (Klein 1935). Object cathexis inevitably plays a part in the emergence of sexuality and gender identity. The question of *what part* has perhaps become a divisive aspect in more contemporary approaches to sexual and gender identity.

Sex & Biology

Birth sex is biologically determined and differentiated as female or male according to chromosomes: XX and XY. The sex of the infant at birth is declared by the infant's visible genitalia. The declaration 'It's a boy' follows the detection of a penis and testicles and 'It's a girl' follows the detection of a vagina. Ambiguous or intersex births occur particularly when chromosomes XXY or XO are present.

Biology played an important role in Freud's thinking not least because he was a physician. Freud wished to "furnish a psychology that shall be a natural science" (1950a [1887-1902]295). It could be said that there has been a return to a more biologically based discipline through the field of neuroscience in recent decades: a mapping of psychological functions in the brain. In 'Project for a Scientific Psychology' (1950c [1895]) Freud showed the workings of his exacting scientific mind: "he starts from observed neurophysiological and psychological data and then goes on to draw conclusions which have a much wider significance" (Quinodoz J, 2005: 29).

The certainty of biology has been challenged in recent decades by the stance that gender identity is socially constructed, a theory that grew out of feminism and sociology (Millett 1970; Rubin, 1975; Chodorow 1978; Kessler & McKenna 1985; Butler 1990; Lorber & Farrell 1991; Young-Bruehl 1996). This notion throws up the difference between and conflation of sex and gender; and different ways of thinking about origins. Individual gender identity is open to the idea, possibility and conviction that the sex that I was born as may well not be the gender I feel and

know myself to be. As these divergent ways of thinking are central to my research, I expand on them through my hypotheses and discussion in chapter 7.

Sexuality

The powerful biological surges in the phenomenology of sexual excitement, the sense of being “driven”, provide a natural vocabulary for dramatic expression of dynamics involving conflict, anxiety, compulsion, escape, passion and rapture (Mitchell S, 1988:103).

Human sexuality is hard to define without using the word ‘sexual’ in the definition. Sexual development, sexual object and sexual aim all assume the movement towards either psychical or physical sexual contact with another also known as sexual orientation. Masturbation, the act of satisfying oneself sexually, activates sexual impulses that will usually be accompanied by a phantasy¹ of another being. Although it is auto-erotic there is something relational that underlies the sexual phantasy or experience. For experience to be sexual, stimulation, excitement and arousal are experienced in the mind and the body which makes the experience psycho-sexual. A persistent attachment to a physical object, (that is associated with someone), for the purposes of arousal, can sometimes become a fetish. This is associated but not definitively assigned to the domain of perversion.

One could question whether attraction is an inherent feature of sexuality, as repulsion might be a defensive reaction to the forbidden attraction, so that the repulsion conceals the sexual aspect. Freud gives examples of this kind of repulsion

¹ I will use phantasy to denote unconscious processes are at play, and fantasy to denote conscious processes in the more popular use, or where it has been spelt ‘fantasy’ in the text I am referring to.

as a defence in several of his cases of hysteria: Little Hans (1909), Anna O (1893), Dora (1905), Katharina (1893-1895). Sexual aim and object can include a complex array of ambivalent, confused, constructive, destructive, sadistic and masochistic aspects.

Freud, influenced by Fleiss (1897), contended that we all start off bisexual and that a more specifically male or female sexual aim or preference *comes into being or not* through our individual navigation of the Oedipus Complex. It is important to note that the bisexuality Freud alluded to was psychical, it preceded an establishment of sexual object and sexual aim. Although for Freud the optimal outcome of the Oedipus Complex was genital (hetero)sexuality, he did not take this for granted. Individual navigation of Oedipal difficulties is far from straightforward and unresolved elements of it remain with us throughout our lives shaping our gender identity, sexuality, sexual direction, and capacity to relate and have relationships in diverse manifestations.

Freud's remarkable discovery of the Oedipus Complex during his self-analysis was a crucial part of the theory of sexuality; it helped him to make sense of his own impulses and feelings and simultaneously betrothed psychoanalysis to its shibboleth (Blass 2001). It could be said that it is an aspect of developmental life that we would rather not acknowledge as it is raw, rivalrous and fraught with conflict. The move from a dyadic to a triadic relationship cannot be devoid of conflict, exclusion, rivalry and jealousy that can resurface throughout life. There have been developments to Freud's initial template of the Oedipus Complex in its positive and negative form; and particularly strong objections to his take on the

female Oedipus Complex as being phallocentric (a term coined by Jones) and focussed around the girls' disappointment about a lack of a penis. Acceptance of the existence of the Oedipus Complex, in its basic form, as central to sexual development can divide adherents and defectors of psychoanalysis in its more traditional form. Psychoanalytic thinking about Oedipal aspects of development in recent decades has tended to focus more on struggles with triangularity and exclusion (Britton 1989:99). In less traditional psychoanalytic schools of thought it has become de-centred and sometimes dismissed as adhering to an archaic structure that is no longer valid (Corbett 2009: 5-6).

It was sexual development and the nature and direction of libidinal aims that interested Freud rather than the "more cognitive concept" (Kulish 2000: 1362) of gender identification. Kulish states, in agreement with Compton (1983), that criticisms of Freud would have more validity if they concentrated on his ideas about: "... *libidinal* development in girls, and not on concepts that came after his time and that overstep his area of investigation" (Kulish 2000:1362). In my view any valid reading of Freud requires an eye on the cultural climate in which he was writing, as well as an eye on the present cultural climate. Criticism that is retrogressively applied can at times miss elements of culture in time, and time in culture.

Freud was interested in how male and female individuals managed their recognition of difference. As Breen put it, his theory was more focussed on movement than categorizations; by movement she was referring to Freud's interest in the development of object relationships and the defensive aspects that these

encompass (Breen 1993: 7). Freud did not take heterosexual attraction for granted but tried to understand and explore how it came about. He was similarly interested in homosexuality. The 'Three Essays' was progressive in that it questioned the existence of a cohesive or unified model of human sexuality (Appignanesi and Forrester 2005: 406).

Whilst Freud was taken up with blurred aspects of masculinity and femininity, there was a gentle shift from the attempt to comprehend the difference between the sexes towards the attempt to understand more about the nature of femininity. Mitchell states: "... the issue subtly shifts from what distinguishes the sexes to what has each sex got of value that belongs to it alone" (Mitchell J & Rose J 1982: 20). Initially Freud's interest was more in the domain of psychical sexual characteristics and character development. It was later on in his work (1940) that he became more interested in what it is that happens in the mind once the anatomical differences are noticed (Freud 1940: 271-278). In the late 1960's there was a move away from the formation of character towards the study of identity (Young-Bruehl 1996: 8).

Lacan's take on sexuality moved away from the biological. Through his theory of Sexuation he attempted to make scientific sense of the sexual difference itself. In the animal world sexual rapport derives from instinct but Lacan thought that humans do not have this rapport because of disturbances between fantasy and language. The phallus is a signifier of both desire and castration (Bailly 2009). It is the relationship to this signifier that determines maleness and femaleness.

Laplanche distinguishes gender, sex and the sexual. He cites gender as plural “as in the history of languages and in social evolution” (2007:201) and sex as dual due to reproduction and symbolization in presence/absence and phallic/castrated.

The Anatomy of Gender

It is important to understand clearly that the concepts of ‘masculine’ and ‘feminine’, whose meaning seems so unambiguous to ordinary people, are amongst the most confused that occur in science. (Freud 1905,1915: 219).

The concept of gender has become amorphous particularly in recent decades, as it is continually shaped, re-shaped and almost denied a shape. Masculinity and femininity no longer form a clear binary, as gender now traverses a wide range of definitions and formations including the notion that it ought not to be defined at all. It has become a somewhat contentious aspect of identity, is highly individual and is rooted in the social and cultural. Physiology that pronounces and announces maleness or femaleness at birth is now challenged as gender has become separated from anatomy; Freud’s dictum that “anatomy is destiny” (1912) no longer holds.

This is particularly apparent when the gender of and in the body strongly contradicts the gender of and in the mind, as is inevitably the case in gender dysphoria or gender variance including transgender. How we come to understand this massive split between body and mind is an important psychoanalytic question and indeed is a question that creates splits between differing psychoanalytic schools of thought and clinical practice.

From the middle to later part of the 20th century there was a move amongst second wave feminists to describe gender difference as socially constructed and influenced by society and culture (Freiden 1963; Millet 1971; Rubin 1975; Chodorow 1978, Butler 1990). This move dissented from gender essentialism which viewed differences between men and women as innate, universal and immutable. These binary positions capture a central part of the debate about gender differences and traverse the fields of feminism, queer theory, trans studies, philosophy, sociology and psychoanalysis.

The fluidity and indeterminate aspect of gender, although not new, has become more pronounced culturally and socially in recent decades; and necessitates a corresponding shift in how psychoanalytic practitioners approach gender identity in clinical practice. Although an open, curious, enquiring and unfixed approach is more likely to both attract and aid patients who are struggling with their gender identity it also raises questions about how to apply this so-called 'unfixed' approach that still roots itself in psychoanalytic theory. I suggest that what might be optimal for practitioners is the adoption of a 'Janus' capacity to look both to the past and the future whilst holding the present in mind.

Freud wrote about gender implicitly by using the words masculinity and femininity. His thinking about gender was initially rooted in anatomical difference, and more precisely the psychological discovery of these physical differences for boys and girls. This ushered in castration anxiety for boys and for girls the experience and management of the lack of a penis, which is known as penis-envy. He tried to make sense of how this configured psychologically for a small boy and for a small girl.

Freud's attempt to understand how the awareness of anatomical difference is managed is astute in my view. Although Freud's theory of penis-envy has undergone its own cultural castration, it retains validity in the struggle for a small girl to make sense of what she does not have, just as a small boy might struggle to accept the lack of feeding breasts or a child-bearing womb, as Horney pointed out (1933: 60). The psychological digestion of anatomical differences between the sexes, which includes the capacity to renunciate what one is not or does not have, sets the scene for a multitude of potential developmental possibilities or compromise formations of self and gender identity.

Influential Gender Theorists

If the undeclared war of modern transsexuality is between fluidity and binaries, the battle echoed down the decades of twentieth-century sexology. It especially reverberated through the work of two of sexology's commanding generals, Harry Benjamin and Magnus Hirschfeld. (Faludi 2016).

Harry Benjamin, an endocrinologist who emigrated from Germany to the States, revived his career when he came across the press frenzy generated by Christine Jorgenson's transition from male to female in 1952. Benjamin devised the 'Standards of Care' for the treatment of transsexuals that remained prominent in the medical profession for decades afterwards. He devised a classification system of 'groups' and 'types' which determined eligibility for surgery. Although he considered these to be temporary "approximations, schematized and idealised" (Benjamin 1966, as cited in Faludi 2016), this standard was harnessed by his

successors Money and Stoller as definitive. A vogue ensued, by the late 1960's, which attempted to align the non-aligned genders. More than forty gender identity clinics sprouted in the States by the mid 1970's. Ironically, this appears to have strengthened a binary approach to gender identity within the culture (Faludi 2016).

John Money was a psychologist and sexologist who wrote many articles on sex and gender in the 1950's. In 1955 the term *gender-role* was introduced by him. He established the Johns Hopkins Gender Identity Clinic in 1965. His understanding of gender was based on the differentiation of anatomical functions. For Money the fact that one sex produces ova and the other sex produces sperm was what made the differentiation between the sexes incontestable. He did however posit the existence of other 'sex derivative differences' beyond this basic division. His coinage of the term 'gender role' was born out of his work on hermaphrodites. In 1969 he co-edited the book 'Transsexualism and Sex Re Assignment' which is thought to have broken some of the taboos about transgender at that time.

In a paper on the history of gender identity disorder, presented at a conference in 1992, Money stated:

In the second half of the 20th century ... what did emerge was a new name for a new concept, gender identity, which brought about a reformulation in how we think about sex and its disorders. This reformulation diffused far beyond the confines of medicine, where it began, and permeated the policies and politics of sex in society at large. It did so to such an extent that the social history of our era cannot be written without naming gender, gender role and gender identity as organising principles (1994:176).

Another influential figure on the subject of gender at that time was Robert Stoller, a professor of psychiatry at UCLA. He was known for his theories on Gender Identity and published widely on the subject. He thought that core gender identity in the form of maleness or femaleness was established by the second year of life or by the time of the phallic stage. The three key components affecting this were: the 'anatomy of the external genitalia', 'the infant-parent relationships' and 'biological force' (1964: 222-223). He states that:

A sex-linked genetic biological tendency towards masculinity in males and femininity in females works silently but effectively from foetal existence on, being overlaid after birth by the effects of environment, the biological and environmental working more or less in harmony to produce a preponderance of masculinity in men and of femininity in women. (1964: 224).

Primary Femininity

In his investigations into core gender identity and its vicissitudes Stoller proposed and introduced the notion of 'Primary Femininity' (1968). Initially this was cited as a challenge to Freud's ideas on the primacy of masculinity. Freud's ideas grew out of a nineteenth century take on embryology: the sexual organs were originally male and female organs differentiate from this original form later in foetal development (Kulish 2000: 1357). Stoller made the important point that modern embryology *shows the opposite*: that with testosterone secretion, male sexual organs differentiate from an original female configuration thus making femininity primary. This reverses the story of Adam and Eve to that of Eve and Adam.

Stoller went on to state that as the first object of identification for both men and women is the (female) mother, femininity was primary for both male and female infants. He thought that dis-identifying from the mother was more complicated for males (opposite sex to primary object) than females (same sex as primary object); this view was contrary to Freud's line of thinking about sexual development for boys and girls.

For Freud the process of detaching from the first object (mother) and moving to another (heterosexual) adult love object required for girls a shift from a same-sex to a non-same-sex object, and for boys a move from a non-same sex object to a different non same sex object. He thought that this shift was more difficult for girls (Freud 1933: 150). Freud refers to the girl as 'a little man', for whom her clitoris is a penis-equivalent. It is not until later on that she discovers her vagina as an erotogenic zone. This view was contested at the time by Horney and other female analysts, and has been much contested since. Freud demarcates the difference for boys and girls in their Oedipal negotiations: the boy retains his mother as his first love object throughout life but the girl has to move her allegiance from mother to father and from father onto another male figure, so in a sense she has to make additional 'psychic chess moves'. Freud's shifts assume a heterosexual trajectory. For Freud, the girl has a more complex set of negotiations to manage: her erotogenic zone and her object. Freud asks: "... how does a girl pass from her mother to an attachment to her father? Or, in other words, how does she pass from her masculine phase to the feminine one to which she is biologically destined?"

(Freud 1933 [1973]: 152). I elaborate on this and refer to Jones' views in more detail in my chapter on Oedipal Complexity and Female Development.

Stoller's claim about 'protofemininity' was radical in that it reversed Freud's positing of masculinity as the starting point for both boys and girls.

The concept of the core gender identity, however, modifies Freud's theory as follows. Though it is true that the boy's first love is heterosexual, and though fathers are too-powerful rivals, there is an earlier stage in gender identity development wherein the boy is *merged with mother*. Only after months does she become a clearly separate object. Sensing oneself a part of mother - a primeval and thus profound part of character structure (core gender identity) - lays the groundwork for an infant's sense of femininity. This sets the girl firmly on the path to femininity in adulthood but puts the boy in danger of building into his core gender identity a sense of oneness with mother (a sense of femaleness). Depending on how and at what pace a mother allows her son to separate, this phase of merging with her will leave residual effects that may be expressed as disturbances of masculinity (Stoller 1985: 16).

Although Stoller dissents from Freud in his thinking, their ideas converge on some aspects of female masculinity:

A mother can transfer to her son the ambition that she has been obliged to suppress in herself, and she can expect from him the satisfaction of all that has been left over in her of her masculinity complex. (Freud 1933: 168).

The concept of 'primary femininity' has been subject to differing interpretations and does not slot in comfortably with preceding ideas about penis envy and castration (Kulish 2000: 1355). This raises a larger question about how Freud's ideas are being used clinically today in the light of newer thinking on both sexuality and

gender. The notions of penis envy and castration anxiety belong to the realm of the Oedipus Complex, which for some clinicians is no longer a central aspect of sexual development (Corbett 2009: 5-6), whereas for others it is foundational and central to psychoanalytic ways of working. The concept of primary femininity would also need to be revisited in the light of same sex couples having and raising children. This creates a schism in the presumption that the mother is female.

In Stoller's book 'Sex & Gender', published in 1968, he set out to understand and differentiate these closely linked and yet separate terms. He sought to comprehend and investigate the interweaving of biological and psychological causes that affect the roots of gender identity and behaviour. He attributed more of a biological basis to sex as a reference to male or female, whilst 'sexual' he saw as referring more to anatomy and physiology. However, he thought these attributions left a big reservoir of behaviour, feelings, thoughts and fantasies that related to the sexes but which were not biological; for these Stoller used the word 'gender'.

In order to better understand this complex distinction, Stoller set up a clinical study. The research project spanned ten years and was of 85 patients: "... who especially illuminate the area of gender identity" (1968: xi) and 63 members of their families. The basis of the study was psychoanalytic. Amongst Stoller's aims in this research was the wish to develop techniques of observation that had the potential to reduce distorting prejudices and to deepen the learning about the origins of gender identity and behaviour and not least to further study of the link between biological and psychological causes. These aims are similar to mine, in conducting Psychoanalytic Research Interviews with trans men. He was also interested in

understanding mother-infant symbiosis and its influence on identity development (1968: xiv).

The conclusions that Stoller reached were firstly that gender is mainly culturally determined and learned postnatally largely and primarily through the mother's own idiosyncratic experience of society's attitudes. Later, the infant's father, siblings, friends and the whole of society's impact will add to the developing identity. Secondly, there are biological forces that affect, enhance, and interfere with the learned identity. Stoller reminded us that throughout his life's work Freud emphasized his belief in the biological substrates of behaviour.

Culture is highly significant and Stoller emphasised that sexual customs are culturally determined. This includes the definition of what it is to behave as masculine or feminine within a culture. There has been a cultural shift in recent decades that has unsettled or dislodged gender from a more recognisable position. The conscious and unconscious influences on this shift are relevant to my research. Stoller investigated both the sense of maleness and the sense of femaleness in relation to sex and gender. He was curious about 'what a sense of maleness meant'? He became aware that although the penis contributes to the sense of maleness, it was not essential. He thought the awareness that 'I am male' preceded 'I am masculine' and 'I am feminine' awareness; that the sense of maleness was present from earliest life and that a variety of psychological and biological forces caused the male child to develop from birth an increased awareness that he is himself. Part of this included an *awareness of belonging to a gender and an awareness that not everyone belongs to this gender*. Later on, he learns that not

everyone possesses the prime insignia of this gender, the male external genitalia, and this is a disturbing discovery (curiously 'to be longing' is embedded in the word 'belonging'). I expand on the important aspect of belonging in relation to the social function of gender in my Findings chapter.

These ideas are different to those developed subsequently by Fast (1984), who contended that there was an undifferentiated and overinclusive early matrix of gender development that precedes the dawning awareness of gender differences (1984: 13). This could be thought of as a pre-gendered state. Stoller explains how male and female differ from masculine and feminine in relation to gender:

Gender is a term that has psychological or cultural rather than biological connotations. If the proper terms for sex are "male" and "female", the corresponding terms for gender are "masculine" and "feminine"; these latter might be quite independent of (biological) sex. Gender is the amount of masculinity or femininity found in a person, and, obviously, while there are mixtures of both in many humans, the normal male has a preponderance of masculinity and the normal female a preponderance of femininity. Gender identity starts with the knowledge and awareness, whether conscious or unconscious, that one belongs to one sex and not the other, though as one develops gender identity becomes much more complicated, so that, for example, one may sense himself as not only a male but a masculine man or an effeminate man or even a man who fantasies being a woman (Stoller 1968: 10).

Stoller does not think that castration anxiety or penis envy are relevant to the discussion about early influences of gender identity, and in taking this position he was mindful of his digression from the more traditional psychoanalytic stance. He contended that by the time of the phallic stage, the core gender identity has been

established in the normal person. He thought that this core awareness of being male or female remained constant throughout life (1968:72). He also contended, albeit more speculatively, that a sense of being male was not contingent upon having a penis². This was demonstrated to him through two cases of boys who did not have penises but created 'symbolic equivalents'³ in order to corroborate their maleness. This left Stoller questioning the significance of the testes and scrotum as the determinants of maleness⁴. Stoller refers to the work of Money & the Hampsons (1955; 1957) with intersexed patients, who were able to show that gender role is determined by psychological forces that are postnatal and not by the anatomical nature of external genitalia (Stoller 1968:48).

For Stoller, the core gender identity is initially biologically determined and constitutes the awareness that 'I am male' or 'I am female'. This is the template upon which other aspects of masculinity or femininity can then stem from. A boy can feel feminine or like a female but this does not alter his core gender identity as male. This can be demonstrated in transvestism: a man who is excited by wearing feminine clothes and feels feminine while doing so, nonetheless knows he is male at the same time. The transvestite thus encompasses these dual aspects of gender identity. Schreber exemplifies this in his deluded belief that he could give birth to God's children as a woman. The defensive aspect of this delusion is Schreber's knowledge that he is male (Schreber 1903; Freud 1911).

² I refer to this in chapter 4, in relation to the 'requirement' of a penis for masculinity and trans men.

³ I expand on 'symbolic equivalence' in later chapters and in my hypotheses.

⁴ I elaborate on this, via the work of Bell, A. (1965), & Friedman, R.M. (1996) in chapter 4.

Through his case studies Stoller noticed that mothers who had experienced emotional deprivation and difficulty with their own gender identity in their earlier lives, can use their (male) child as a phallus, by maintaining a symbiotic relationship that limits the child's freedom to develop a separate identity. The male child had the function of filling a very long-standing emptiness for these mothers; in some of these cases the fathers' emotional and physical remoteness appeared to fuel and collude with the fused mother/child dynamic and mothers' use of her child as a phallus. Stoller relayed the case of a mother who shared her skin and body with her child in a form of mutual identification that was described as excessive and unyielding of a more usual separation process between mother and infant. The mother's need of her child was addictive and used to prevent a separation from her own mother: *"He was his mother's feminized phallus"* (1968: 120). Stoller does not see this feminisation as the mother's wish for a daughter but rather as her revenge on males (siblings and husband) who she had envied and resented.

There are several writers on the possible detrimental influence on the child of mother/infant symbiosis including Greenacre (1959), Lichtenstein (1961), Kris (1956) Khan (1963) Shields (1964) and Hopkins (1996). In an unpublished paper by Khan (1965) "On Symbiotic Omnipotence", Stoller (1968: 125) quotes Khan about mother as providing "phase-adequate aggressive experiences" that emanate from her own capacity to manage aggression and hate both in herself and in her child. Where there is an absence of this capacity and instead a surplus of positive behaviour and emotions, the child's capacity to separate from the mother can become impaired.

To my knowledge there does not appear to be so much literature on the experience of dis-identifying from the father, in cases where the father may have been intrusive and used the infant as a phallus, in the way that Stoller described between a mother and son. This kind of experience must also impact on the development of sexual and gender identity for the boy whose (narcissistic) father cannot see him as separate, and who may form a fused father/son couple as a way of competing or distancing from the mother/son or mother/father dyad.

Stoller discussed the difficulties between mothers and sons, particularly where mother's projections eliminated a sense of separate identity. My interviews with trans men exposed some experiences of daughters who struggled with their mothers' need to colonize their femininity and hence their independent identity.

Objections to Stoller

Although Stoller believed in the notion of *core gender identity*, this notion has been challenged and continues to be challenged. The challenge precedes Stoller's ideas and dates back to the way in which gender and sexuality have been conceptualised by psychoanalysis (Aron: 1995).

Jessica Benjamin, who initially belonged to the second-wave feminist movement and then moved from social theory to relational psychoanalysis, was inspired by the work of Daniel Stern. One of her objections to Stoller's idea of core gender identity was that when it was formulated there was no theory of pre-symbolic or preverbal representation like those put forward by Stern (1985) and later by Beebe & Lachmann (1994). This would have led Stoller to think more in terms of the

transmission of the very early sense of gender as pre-representational, whereas subsequent theorists place it more in the domain of representation: "... making early identifications more comparable to later ones, albeit based in more concrete sensorimotor schemas." (Benjamin 1996: 30).

Benjamin also highlights the difficulty with the timing of Stoller's 'core gender identity' as missing out the pre-Oedipal period, which for Stoller was mainly taken up with the process of disidentifying from mother. This appears to have short-circuited the developmental pathway from establishing core gender identity, disidentifying from mother and entering the Oedipal phase. Thinking on the pre-Oedipal phase has expanded since Stoller, who focussed mainly on this experience for boys. The disidentification is experienced by both boys and girls and so is generally more aligned in managing separation for both sexes with a tendency for the experience to mark boys in a more pronounced way (Person & Ovesey, 1983, as cited in Benjamin J. 1996).

Another objection to Stoller's theoretical ideas is his reliance on parental behaviour and attitudes as central in the development of core gender identity (Olesker 2003: 6), although this stance could be countered by the claim that parental influence cannot be separated from the small child's development. Olesker also objects to Stoller's ideas on imprinting: "... a non mental mechanism acting directly on the brain, bypasses subjective experience." (Olesker 2003: 6).

Olesker concurs with Person & Ovesey (1983) who put forward the idea that a merger fantasy rather than an extended proto-feminine state can influence

ambiguous core identity. Person and Ovesey do not agree with Stoller's theory as they cannot see how the primary identification that precedes self-object differentiation can affect gender behaviour or the identity of the infant not least because behavioural aspects of femininity do not emerge in the first year of life.

Although Stoller has been subjected to criticisms, his work on gender was substantial. Ironically some of the criticisms come from feminist theorists who might not have appreciated the feminist aspect of his conversion from Freud's primary masculinity to a primary femininity.

Objections to Freud

For a number of decades since Freud's formulations there have been objections to Freudian theorizing of female development amongst not only feminist theoreticians and clinicians. This seems to have been replaced in more recent decades by a more general deconstruction of gender, perhaps not least because of the greater prevalence of gender variance including transgender. The traditional historic binarism of gender cannot be taken as a premise, although it can be hard to contest as our biological or sexed starting point at birth. Perhaps what can and cannot be contested lies at the heart of current theoretical and clinical practice. Feminist relational theorists were searching for more breadth in relation to gender identifications that transgressed the (phallogentric) Freudian Oedipal logic of binary opposites and embraced the complexity and multi-faceted nature of sexual life. Embedded in the question about how psychoanalysis can understand gender identity, lies the question of how to work clinically. A spectrum that has traditional

psychoanalytic practitioners at one end, and highly flexible practitioners at the other end, in itself creates an oppositional binary.

Contemporary postmodern feminist theories have sought to revisit and revise Freudian ideas about sexual and gender development and identity. This has included a dismissal and critique of Freud's ideas as being phallogentric and patriarchal. In spite of this posthumous attack on Freud, he remained somewhat uncommitted in his views on sexual development and gender identity, and surprisingly open given the period in which he lived and wrote. The main shift in the post-Freudian conceptualisation of gender has been in the move towards seeing gender as *constructed* rather than as biological. This move opens up a vast realm of phenomenological views on how we feel, think and know who we are. Biological certainty has lost its safe place as a trustworthy starting point, as we have entered the terrain of endless possible identities and identifications. Gender can be constructed and de-constructed both psychically and physically, creating a distance and at times unwanted or unrecognised causal link with sex at birth. The schism between body and mind can splinter sex, sexuality and gender. The psychoanalytic task is to find an open approach towards this, often painful, split and splintering.

Karen Horney, a psychoanalyst, was a contemporary of Freud's. She practiced at the Berlin Psychoanalytic Society until 1932, and then moved to the United States. She held a strong belief in socio-cultural factors as important influences on lifelong development. She adopted Freud's notions of penis-envy and castration anxiety, although she questioned the conflation of these notions (Mitchell, J. 1975: 125) with what might be referred to as a dissenting feminist approach. She struggled to

accept the way in which women were defined in relation to men and understood penis-envy as a woman's wish to have a similar status to a man culturally rather than a wish to actually possess a penis. Horney wrote about womb-envy in men as a parallel loss that fuelled a drive to succeed. She wrote several papers between 1922 and 1937 on feminine psychology, a field in which she is regarded as a pioneer.

Horney makes the poignant statement that:

Science has often found it fruitful to look at long familiar facts from a fresh point of view. Otherwise there is a danger that we shall involuntarily continue to classify all new observations amongst the same clearly defined groups of ideas. (1926: 324).

It was the inherently masculine foundation from which ideas or long familiar 'facts' emanated that Horney (and later on Stoller) questioned, especially in relation to the evolution of women. She was interested in aspects of difference between the sexes that went beyond anatomical differences (1926: 327), such as a woman's reproductive capacities. She cites Ferenczi's idea (1924) that the act of penetration for a man is linked to a desire to return to the mother's womb. Horney cites the existence of masculine envy of pregnancy, childbirth and motherhood, but sees it as more easily sublimated than the girl's penis-envy.

Horney saw castration phantasies in feminine development as a 'secondary formation':

I picture their origin as follows: when the woman takes refuge in the fictitious male role her feminine genital anxiety is to some extent translated into male terms – the fear of vaginal injury becomes a phantasy of castration. The girl gains by this conversion, for she exchanges the

uncertainty of her expectation of punishment (an uncertainty conditioned by her anatomical formation) for a concrete idea. (1926: 336)

Horney's ideas seem pertinent to the increase in 'female to male' transgender identity; I am interested in the origins of this trend in recent years, and in the interrelationship between the concrete and symbolic. Psychoanalytically it is considered to be important if not vital to develop the capacity to move from concrete to symbolic ways of thinking. It is also important to think about the potential for struggles with this capacity in relation to notions of gender and sexuality, which is not to say that there are always concrete manifestations in gender variance. I was struck by the description of a conceptual work of art as aiming "to convert the symbolic into the concrete" (Weinstein, G, El Al 2017); this seemed pertinent to some aspects of gender re-assignment in which there might, in some instances and by no means in all instances, be a difficulty with symbolic thinking. Not only the patient, but the surgeon too might readily believe that body modifications can bring about a concrete solution to a deep sense of incongruence between psyche and soma. At times this lends surgeons an almost God-like power to determine sexual and gendered aspects of identity.

Simone de Beauvoir published 'The Second Sex' in 1949. It remains a seminal text on the oppression of women and one from which subsequent writing on this subject has taken off. In her book, de Beauvoir sets out to challenge Freud's ideas and theoretical position on sexuality and sexual development, particularly for girls. The roots of her objections have been questioned, particularly in relation to a

misreading of Freud that has set the scene for a continued trend of casting Freud in a bad light.

De Beauvoir's analysis of Freud, despite its incommensurably greater sophistication, has compounded certain tendencies within popularized American Freudianism and this combination has had an influence on subsequent feminist reaction to Freud. Thus de Beauvoir, with Sartre, does not believe in the main proposition of psychoanalysis – the unconscious – nor, interested in the person's present existence, does she place much emphasis on his or her infantile past. So, too, does she continue a trend which has been dominant in opponents of Freud, most significantly since Jung: she underplays the significance of sexuality (Mitchell 1975: 301).

De Beauvoir sets up a "counter-psychological philosophy" in relation to Freud. This was a challenging task not least because of Freud's antipathy towards philosophy as a mode of thought (Mitchell 1975: 306; Freud 1925: 59). She (along with others) objected to the inherent masculinity of Freud's model of female sexual development. Mitchell points out that it is ironic that the distinctions between the sexes have become more, and not less rigid since de Beauvoir, and the whole understanding of the sexual developmental trajectory has become much more determined than it was for Freud.

One of de Beauvoir's objections towards Freud is his vagueness about what is 'sexual'. In Freud's Three Essays on Sexuality, he succeeded in expanding thinking beyond the genital and by introducing infantile sexuality and 'perverted' sex as being on a developmental spectrum that included adult sexuality, he was able to prise open prior suppositions held by the sexologists. As Mitchell puts it:

His motivation for this was obviously not simply to set himself up in opposition to the prevalent concepts of childhood innocence and the public moral outrage at perversions, but to establish a fundamental concept: that the earliest inquiries of children, their drive for knowledge, come with the first sexual questions – which are, roughly speaking, ‘Where do babies come from?’ and ‘What is the difference between the sexes?’ Freud does not, as de Beauvoir suggests, generalise the concept of sexuality into vagueness – but into complexity (Mitchell, J 1975: 318).

There have been several important psychoanalytic feminist writers on Freud’s ideas. I will include ones that I think make significant contributions to the subject of sexuality and gender, and inevitably this cannot be an exhaustive list. I will elaborate on aspects of their contributions in other chapters.

Fast (1984), possibly not a feminist writer as such, made an important contribution to the field of gender identity. She proposed a ‘Differentiation Model’ of male and female development that dissents from Freud’s theoretical positions. Fast did not think that children categorised their experience in gender terms, although their recognition of differences between the sexes marks the commencing of gender differentiation. Fast sees the differentiation process essentially as *the recognition of limits*: if I am female, I do not have a penis and if I am male, I cannot give birth (my italics). These realisations unleash feelings of loss, envy and denial. It is the capacity to renunciate that which one is not and cannot be that yields optimal development for both girls and boys.

In optimum outcome, children’s narcissistic sense that all sex and gender possibilities are open to them is replaced by a sense of self as sex-specific in productive relation to other-sex persons recognized to be independent of self. These parameters of gender differentiation, which themselves apply to

both girls and boys, pose different developmental problems for the two sexes and have different modal outcomes [...] The model is intended centrally to be a reformulation of Freud's gender-relevant theories as they refer to developments through the oedipal period, and their implications for later optimal and disturbed functioning. (Fast 1984: 4)

Fast is particularly interested in the period of development before children recognise that there is a difference between the sexes, what occurs when the difference is recognised and how this impacts Oedipal development and the establishment of gender identity.

Unlike Freud, but more in line with Stoller, Fast does not believe that the 'original' gender for both boys and girls is only masculine. She proposes that for both girls and boys early gender awareness is undifferentiated and over-inclusive. It is not until the second half of the second year that the child can identify maleness or femaleness in relation to both self and other. Awareness of the difference between the sexes takes place when the limitations of one's own gender are fully recognised. The awareness ushers in the need for the renunciation or loss of what one is not and what the other sex is or has. Whereas Freud postulated that boys and girls believed themselves to be initially male and masculine, Fast dissents from this notion. She believes that children initially take in a broad array of characteristics from people in their surrounding environment to the extent that no attribute is left out. It is not until actual awareness of the differences between the sexes becomes established that the prior notion of unlimited possibilities has to be relinquished.

Renunciation of difference between the sexes

I am particularly interested in manifestations of this dawning reality or renunciation and how it affects gender identity. It appears to be crucial how the awareness of what one is and what one is not and cannot be varies developmentally. I suggest that the capacity to bear the reality of the limitations of one's gender is pivotal. This relates to Bion's notion of the crucial developmental differences in an infant of the capacity to bear frustration (Bion 1984: 112). It also relates to Butler's ideas in her paper: 'Melancholy Gender – Refused Identification' (1995) and Ghent's notion of submission versus surrender. Ghent poignantly states that "... if a perception is threatening to a belief, either the belief or the perception has to go" (Ghent 1990: 126-127). Separation is embedded within the concept of renunciation, and is a lifelong task from birth onwards. It is built into the difference between the sexes, as awareness of difference necessitates a capacity to separate from what one is not, or does not have.

Fast challenges Freud's notion of a biologically determined bisexuality and states that this notion is not supported by 'available' biological evidence. In accordance with her gender differentiation theory, bisexuality is developmental. She states that from birth although children are likely to be encouraged in "directions that are objectively masculine or feminine" (1984: 92), she believes that their self-representations are not yet confined by that recognition. This recognition is a gradual process, the recognition that one belongs to one gender: "The other is the prerogative of other-sex persons and can be enjoyed in relationship but not as part of one's self" (1984: 92). In this respect, for Fast the subjective existence of being

masculine or feminine is a developmental and not a biological feat. It follows from this line of thought that bisexuality in adulthood is viewed as a lack of the accomplishment of the move from narcissism to object relatedness. This position assumes that the move optimally ought to be in a heterosexual direction. Perhaps it also assumes that if a bisexual position continues into adulthood, the renunciation of the other (opposite) gender has not been managed optimally; there has been no foreclosure on infinite gender possibilities for oneself and in relationships to others.

What lies at the crux of the renunciation for girls is coming to terms with not having a penis, and for boys it is not being able to bear children. In his illuminating paper 'The Drive to Become Both Sexes', Kubie (1974) makes the poignant observation that this drive exists in all of us and the challenge is not so much to give up the other gender but to find unconscious ways of incorporating the other gender alongside our birth gender in a complementary fashion so that we do end up as both. It is interesting to think of how this can become sublimated in cultural aspects of everyday life. Kubie elaborates on the various manifestations of this drive: in art, literature, professional life, relationships and psychotic disturbances.

Curiously the rich world of siblings is not mentioned by Fast or Kubie. Often a very early encounter for an infant is that of a 'different sex rival'. Mitchell has written extensively about the need to comprehend the horizontal as well as the vertical axis of siblings and its importance for individual and social development (Mitchell J 2003).

Objections to the binary aspect of gender

It is difficult to write about gender without taking up a stance on an ever widening spectrum, not least because a neutral stance is in itself a stance and possibly a rather undefined one. My writing is bound to be influenced by my psychoanalytic training and practice, even if I am open to questioning these foundations. Freud's writing on sexuality both underpins my discussion and anchors my work to psychoanalysis.

The conceptualisation of gender as binary has become a hotbed of criticism, debate and attack and lies at the heart of some of the objections to the more traditional psychoanalytic stance. The term binary denotes two things, so in gender terms these translate into male and female. It has become usual for the use of the word 'binary' in relation to gender to be understood as a 'binary opposition'. The (so called) gender binary has been thought to not only set up female in opposition to male but also to narrow identification choice to only two categories of male or female. In recent decades there has been a move away from this 'either or' choice and more freedom to move fluidly between male and female or to choose not to be aligned with either, hence the 'non-binary' identification as well as many others. What I am terming 'gender self-categorisation' has become an important twenty-first century phenomenon. The freedom to *self-categorise* as against the perceived limitation of two genders; one can see the wish to sever ties with or rebel against a man and woman coupled sexually and pro-creatively who conceive one sex or another without the infant's permission or inclusion.

Butler's seminal text 'Gender Trouble' (1990) questioned or even smashed open the views held by traditional feminism on femininity, masculinity, sex and gender through using Freud, Foucault, Wittig, Kristeva and Irigaray amongst others. Butler moved from biological to cultural presuppositions in relation to the hierarchy of gender and dislodged the binary scaffolding upon which gender discourse was often built. Two key ideas, amongst many that she introduced, were the idea of gender as a reiterated social performance and the idea of gender as a melancholic renunciation of a refused identification.

Goldner (1991) also questioned the notion that there were only two genders:

Since Freud collapsed the distinction between biological sex, sexuality and gender, deriving, in sequence, heterosexuality and gender polarity from the anatomical difference, certain kinds of questions could not be asked of the theory because they could not be seen [...] Reasoning backward, we can say that there were three interrelated elements to Freud's thesis: the derogation of femininity, the normative dominance of heterosexuality, and the dichotomous, complementary division of gender. While the first was the focus of heated debates early on, and the second, although inadequately interrogated, was nonetheless always a subject of analytic interest and speculation, the third, the binary division of gender, remained [invisible]. (Goldner 1991: 252).

Harris (2005) wrote about gender from a wide perspective encompassing academic developmental psychology, cognitive sciences, linguistics and philosophy of mind as well as the broad fields of relational gender theory, feminism and queer theory. One of her aims was to challenge established binaries such as "self-other, inside-outside, male-female, performed-real, core-variation, empty-full, body-mind, intrapsychic-interpersonal, essence-construction" (2005: 1). She was concerned

about the dangers of importing ideology into theory in the area of gender and sexuality. This has also been referred to as linearity and has been critiqued by Lewes (1988, 1995) and Chodorow (1992). The way in which this is manifested in gender or sexual experience is that the masculine and the heterosexual have become the generic form of prescription or dominant paradigm.

In her book 'Gender as Soft Assembly' (2005) Harris comments on the self-consciousness that can accompany any thinking, writing and practice in the field of gender and sexual life because the ensuing experiences have been harshly scrutinised. The (old) language of gender has been dismantled as it is applied to the "complex fluidity of body and psychic life" (2005: 101) that is shifting and morphing.

The term 'hetero-normative' could now be thought of as standing for outdated tradition or convention in relation to gender and or sexuality. It can garner negative connotations that attach to its use or application, because it undoes a so called historical and cultural social order of man and woman, male and female in a sexual union. I think it is helpful and important to move beyond hetero-normative ways of thinking, but it can at times feel as if heterosexuality as a foundation from which to expand theoretical and clinical thinking has become illegitimate. This illegitimacy may be justified, as heterosexuality is only one form of sexual development or orientation amongst others. It seems to me that clinicians need to adapt their psychoanalytic theorising on sexuality to one in which heterosexuality is one of many possible developments on a lateral rather than vertical axis. In writing about gender, I am inevitably caught up in the binary of a more classical psychoanalytic model and contemporary interpretations of gender identity. Queer theory, a sub-

field of sexuality studies, has attempted to dismantle the former position, by building its theory on a less fixed foundation of gender categories. Trans Studies has extended this further.

I find it curious that 'correct' use of language in relation to gender is surprisingly constricting, perhaps aimed to project or mirror a restriction that has been experienced historically (Rodgers & O'Connor, 2017: 147-148). Language plays a highly important role in relation to gender. It can become the canvas upon which the tricky business of getting it right is projected. It can become a battle ground of 'I will teach you how to speak', 'your language is antiquated and offensive'. How someone's gender is referred to is individual, particular, specific and requires accuracy and sensitivity. There are currently 71 gender identification categories on Face Book (as listed in 2014). Interestingly in 1910, Hirschfeld, stated with prescience that "The number of actual and imaginable sexual varieties is almost unending". Harris suggests that gender can be more usefully conceptualised as a function rather than a structure; it functions in certain ways as it undertakes various psychic and relational tasks. She states that:

For some the traffic of gender is pure pain, for some, a mixed blessing. For some, gender's presence in various psychic functions is rigid and palpable; for others gender seems thin and almost transparent. (2005: 102).

The two main quandaries that have perplexed psychoanalytic theory and practice that Harris cites are firstly the asymmetrical attention to femininity and secondly the interplay of sexuality and gender; both quandaries have theoretical, practical and cultural implications.

I intend to explore in depth the nature of the asymmetrical attention to femininity which may have led to a concurrent neglect of masculinity in psychoanalytic discourse (Figlio 2010). I also intend to explore the development of female masculinity and the growth in female to male transgender identity.

The concept of sex and sexuality in some respects preceded that of gender, although it remains unclear 'what came first'? I wondered whether the concept of gender has emerged somewhat defensively as a means to get rid of the sexual component of gender, leaving it desexualised or split off from sexuality. This idea reinforces the complicated issue of whether they can or do exist independently or whether they are necessarily always related. Whether I like it or not my birth sex (even if I refute it) preceded my gender identity. But has gender impulsivity replaced the Freudian sexual impulse?

Gender is now broadly thought of as constructed, multidimensional and more in the mind than in the body. This throws a new light on Freud's assertion that "the ego is first and foremost a bodily ego". It is no longer a "fact of life" (Money-Kyrle 1971) that one's gender or sexuality will be informed by one's physicality or body. It has become more of a fact of life that identity is located in the mind and how I feel psychologically, or phenomenologically is what will determine the nature of how I choose to identify myself, whether or not my body corresponds. In this sense it is psychosomatic, except that the psyche cannot make actual anatomical changes. However, it can feel very convinced, and driven by intense feelings of incongruence that the optimal solution to this psychic conflict is to bring about wished for

changes to the body. In a sense the body gets or pursues what the mind wants, which replaces the bodily ego with a psychical one.

As gender has become multidimensional so has sexuality. If Jane has transitioned to John and he has a sexual preference for women, John is a heterosexual trans man. If his partner Jemma has also transitioned from James to Jemma and her sexual preference is for men, Jemma is a heterosexual trans woman. This constellation might open questions about concealed homosexuality that are likely to interest some psychotherapists but may not be of interest to John or Jemma, who's sexuality emanates from their current gender identity. Understanding the gender and sexuality in this 'John and Jemma' example requires mental elasticity that can move beyond a more conventional or coherent gender binary system. Sex, sexuality and gender combine in new ways, and require new forms of understanding and perception; the social order is re-ordered.

There are inevitably intersections with race, ethnicity and class, which I have not explored in this research, despite their importance. Sex, sexuality and gender are rife with complexity not only in the psychoanalytic sphere, but because they are necessarily individual, biological, cultural, sociological and political. The concepts are hard to delineate, they link and overlap and form a Borromean knot that is hard to unlink. A spectrum of ethical issues stretches from the alienated teenager or pre-teenager, who might be struggling psychologically with their developing identity (usually by searching for a sense of belonging online) to the assessment of the gender identity clinician who can authorise the prescription of puberty blockers and eventually the surgeon who can make significant bodily changes (the concrete

solution). Psychoanalytic research often requires a return to historical origins as this provides context for understanding the present, but it does not guarantee coherence. What can be derived from unconscious processes is to an extent ahistoric, in that the unconscious can be conceptualised as existing outside of time and culture.

Queer Theory

Queer theory and Psychoanalysis are both concerned with sexuality and identity, but there has not always been a clear dialogue between the two disciplines, not least as they are born from very different families that do not necessarily mix well. These two families resist labelling and are vulnerable to misleading definitions or projections in both directions. Queer theory came to prominence academically in the early 1990's, perhaps mostly through the work of Judith Butler (1990, 1993, 1997). The underlying ethos of queer sexuality or identity is that it is unmoored from restraining theoretical assumptions or categorisations. There is an activist element to its emergence in academia. At times, psychoanalysis in its most formal and classical form can become the scapegoat for epitomising a narrow and old-fashioned view of sexual development, with Freud's Oedipus Complex and the sexual ramifications for development at its centre. To my mind, this narrowing view of psychoanalysis compromises important aspects of contemporary psychoanalytic practice⁵. In what might be referred to as a series of arranged marriages, Giffney and Watson (2018) have brought together writers, academics and clinicians from both disciplines for 'Clinical Encounters in Sexuality'. The book is ambitious on many

⁵ I expand on the Oedipus Complex in chapter 2.

levels and stimulates multiple positions through the encounters that it sets up. One of the tensions in this book, is summarised well by Owens as she reacts to another contributor, Kuzniar (2018: 51-73). In Owens' words:

... psychoanalysis must explain why one feels queer, but on the other hand, the emphasis must be precisely on the singular queer subject, it must not attempt to re-foundationalize what queer theory has de-foundationalized in its critique of psychoanalytic psycho-social-developmental theories and grand narratives of sexualized identity (2018: 264).

The etymology of the word 'encounter' is described by Baraitser (2019), in her article on this book, as a meeting of adversaries, but one that has the potential to generate something new. The transdisciplinary approach underpinning this book is admirable, but it left me wondering whether the two disciplines (clearly with massive variation in each one) were caught up in what has been referred to in couple relationships as a 'projective gridlock' (Morgan 1995), in which one can reside inside the 'mind' of the other, as if it were one's own. With this particular coupling of disciplines, it might be more the case that Queer Theory 'knows' Psychoanalysis more than Psychoanalysis 'knows' Queer Theory. My research is in the main psychoanalytic, but with an open mind to other overlapping disciplines.

Trans Studies

Articles and chapters from Trans Studies, a discipline that developed in the late 1990s, are collected in two substantial Transgender Studies readers published in 2006 (Stryker & Whittle)) and 2014 (Stryker & Aizura) that form historical

anthologies; as well as in *Transgender Studies Quarterly* that began in 2014, with a journal specifically dedicated to Transgender and Psychoanalysis in 2017 edited by Sheila Cavanagh.

The first 'Transgender Studies Reader' (TSR 1) contains 50 texts that map the territory of transgender lives as both a movement in history and as subjective experience. The texts cover subjectively experienced transgender lives, critiques of chapters written about transsexuality, and influential papers from feminist stances that support or dissent from transgender as an authentically lived experience. Stryker (2006) introduces the book by documenting an experience of attempted segregation between gay or queer politics and transsexual lives as experienced first-hand. This theme of how transgender fits into queer enters a number of chapters, and is discussed in detail by Jay Prosser (2006, 1998) through Butler's texts. Many authors discuss the complex ideology of the sex/gender binary. The texts that Stryker and Whittle select for this volume track the evolution in thinking about this binary spanning almost a century, from the medical archive of the Sexologists and into the activism of the 1990s.

In her introductory paper Stryker describes The Reader as documenting many aspects of the struggle for activists and scholars to have a voice and bring change to how gender, sex, sexuality, identity and desire are studied academically.

Transgender Studies encompasses transsexuality, cross-dressing, intersexuality and homosexuality, cross-cultural and historical investigations of human gender diversity, multiple expressions of subcultural "gender atypicality" (2006:3), sexed embodiment theories and subjective gender identity development and regulation

of gender experience via law and public policy (2006: 3). As a field Transgender Studies questions links and assumptions about sex, gender, biology and culture; it questions the morals and ethics of questioning experiences of gender that express themselves differently. It addresses the injustices and violence, often racial, that can underly the perceptions of gender non-normativity. It critiques the conditions of the social science and biomedical research that expose transgender phenomena.

Stryker differentiates “the study of transgender phenomena” from “transgender studies”. Writing in 2006, she describes the latter as the relatively new critical project shaped in the last decade as opposed to the former as a more long-standing endeavour in European cultures. Consideration of the embodied experience of the speaking subject is key to the ethos of transgender studies. This experiential knowledge is seen to be as legitimate as other “... supposedly more ‘objective’ forms of knowledge” (2006: 12).

Transgender Studies has grown in parallel to queer studies that emerged not least from AIDS related homophobia. Transgender people could share in the political grievances of the queer movement against heteronormative oppression. This was the political climate from which Transgender Studies as a discipline emerged. Queer Studies, however, has been at times accused of perpetuating “homonormativity” as the only other sexuality besides heterosexuality, rather than other forms of queer difference. The term “sexual object choice” that distinguishes “hetero” from “homo” sexuality, does not sit comfortably with Trans Studies views as the “sex” of the object is being questioned, in relation to their “gender” (2006: 7).

To my mind, this attributes binary thinking to queer studies as well as to the more commonly accused heteronormative way of thinking. This is also the place in which tensions can be found between psychoanalysis and transgender, or perhaps more specifically Psychoanalysis and Trans Studies. The term 'sexual object choice' within psychoanalytic language can denote natal sex, which it might well not denote in transgender terminology. This suggests that psychoanalysis has fixed moorings that can be seen as antiquated or on the wrong side of history. Whereas for psychoanalysis the biologically sexed body *cannot not* have meaning, as I read and understand Transgender Studies, the biologically sexed body is more incidental in relation to sex, sexuality or gender.

In TSR 1, some chapters are allocated to, or reproduce chapters from books or texts by key writers that have shaped positions and attitudes, sometimes polemical, to sex, gender and transgender within feminist ideology. These include Janice Raymond (1979, 1994), Gayle Rubin (1992), Leslie Feinberg (1992), Sandy Stone (1992), Kate Bornstein (1994), and Susan Stryker (1993), amongst others. Stryker suggests that the more polemical texts, such as Raymond's "Sappho by Surgery" (2006, 1979), initiated via the responses to its offence, a new impetus in the form of transgender theorization, thus giving a voice through writing to the lived experience in and of itself, away from Raymond's contentious understanding of MTF as taking from women, invading their spaces or raping them by reducing women's bodies to an artifact. (2006: 131).

Papers from Feinberg, Stone and Bornstein amongst others written in the early 1990's, have become seminal texts from which to re-think the transsexual

experience. Their titles include words like 'Liberation', 'Manifesto', 'Terror' and 'Rage', that show the emotive drive towards rebalancing a status quo perceived as unjust and full of prejudice. These texts represent an emphatic move away from the experience of transgender individuals as "primarily apologists" as writers and speakers, towards becoming theorizers about gender as a word, idea or signifier (Whittle 2006: 198), and also towards a more activist stance with meaning that is derived from personal experience and embodiment that translates into the field as an area of Studies.

In Whittle's chapter on Feminism and Trans Theory, he points out the struggle, also a personal one, for transgendered people to have objectivity or sexuality, as often the discourse is of repressed homosexuality appeased via reassignment surgery or heterosexuality imposed by the medical profession (2006: 199, thus affirming a dominant heteronormative stance. Whittle openly explains his wish to discuss the relationship of trans people with feminism because "... like all trans people I was obligated to explore the complex pedagogies that informed myself" (2006: 197). Poignantly, he points out that "... as gender theorists, we have not yet started to work out what questions to ask as we interrogate gender – never mind come up with the answers" (2006: 194). His wish is for more consensus between feminism and transgender studies, and fewer boundaries and divisions.

Jay Prosser's chapter, from his book 'Second Skins' (1998) deconstructs Butler's influential book 'Gender Trouble' (1990), particularly how "gender" slipped into "queer" in relation to performativity. He objects to the assumption derived from Butler's book that transgender is queer and resists the incorporation of trans

identities into the queer domain. He recognises Butler's feminism as queer feminism and acknowledges "queer's investment in the figure of transgender in its own institutionalization" as well as the "methodological and categorical crossings" of Butler's queer feminism that have facilitated the beginning of an articulation of the transsexual as a theoretical subject.

Of particular relevance to my research were the chapters of female to male experiences of manliness and masculinity: Cromwell (1999), Califia (2001, 2006), Rubin (2003), & Green (1996/7). These chapters discussed the challenge and struggle to find a form of subjective masculinity, sought and wanted usually for many years, and yet fraught with internal and external tensions. One of the tensions that Green candidly described is whether to come out of the transsexual closet and the potential emotional or social cost in relation to cultural tolerance. Califia writes from personal experience about the struggles for FTM men who come out of the lesbian-feminist community, and his own difficulty with claiming the word "man". I discuss Cromwell and Rubin's work in more detail in the section on Literature and Research on transgender, that follows on this first chapter.

'Transgender Studies Reader 2' (TSR 2) published in 2013 (Stryker and Aizura) spans a diverse range of topics as they have developed since TSR 1, complementing its predecessor. The fifty articles are less historically based and focus more on recent work and emerging scholars in a wide range of fields; a diverse group who write from and about global perspectives across communities moving away from the mainly white contributors to volume 1. Included are trans and disability justice

work, examples of the medical industrial complex and problems that arise from or with scientific and biological taxonomies.

In their review article, Meiners and Quinn (2015), whilst valuing the contribution of trans studies, question how *studies* support *movements* and ask whether something critical can get lost when movements are translated into academic terrain. I find their point to be pertinent, as both volumes: (TSR1 and TSR 2), although a rich source of knowledge, exploration, analysis, political exposure and subjective experience, could be said to be preaching to the converted. I mention this because I have experienced a sense of ‘outsider syndrome’ whilst researching the topic of psychoanalysis and transgender identity, and wonder how the gap between these disciplines might become bridged. How might these two volumes infiltrate the reading lists of psychoanalytic trainings for example? Is there an activist undertone that can prohibit wider interest in the scholarship of the articles in these volumes?

Amongst the diverse range of topics in TSR 2, there is a continuation of the debates on transgender within feminism following the rise of queer studies. Cressida Heyes (2013) opens up the conflict between “trans liberation” and “feminism” and argues against this division. Her interest lies in the ethics of self-transformation, when identity is reworked via the body; and the importance of the relational component in gender identities. She takes issue with texts by Raymond (1979) and Hausman (1995) that pathologize the transsexual subject. She acknowledges the difficulties a trans man might have in relation to feminism (that came up in my interviews), and the difficulties of a liveable masculinity in relation to sexism. Heyes sees Feinberg’s

(1998) approach as eliding progressive gender politics, namely the demand that we change ourselves. She (Heyes) calls for more generosity from the lived lesbian/feminist life towards trans individuals who undergo similar gender conflicts, and for more inclusivity of hormone treatments and SRS as a practice on a continuum with other more ubiquitous interventions on the plane of bodily self-improvement. Heyes attempts to narrow the differences between non-trans feminists and trans feminists by showing shared ethical and political dilemmas, in a call for more solidarity.

Shanna Carlson, who writes about transgender and psychoanalysis from a Lacanian perspective, explores the possibility of a new logic of sexual difference for present bodies as a move away from the psychoanalytic tendency to pathologize. Through a detailed analysis of Lacanian texts, and with references to Butler (1993, 1997, 2000) and Dean (2000, 2001), she finds a gap in the exploration of a feminine perspective. She asks a new question about what it might look like to consider transgender identity as an expression of the logic of sexual difference. She aligns transsexuality with the terms “man” or “woman” as all try to pass as a particular gender. But she acknowledges the indeterminate position of transgenderism, as possibly inhabiting the unconsciously bisexual subject for whom sexual difference is only ever an incomplete solution to the failure of the sexual relation. This is likened to the hysteric (for Lacan a feminine phenomenon) and her dilemma: “Am I a man, or am I a woman?” The hysteric interrogates a lack and a gap in knowledge. Carlson questions if the human subject is transgendered in a way that transcends notions of gender, and sees Lacanian psychoanalysis as a rich and malleable framework for

gender studies to think through issues of sex, subjectivity, desire and sexuality; and for this gain in understanding to be reciprocal.

Transgender Studies Quarterly is a journal that was initiated in 2014 with similar ambitions to the two *Reader* volumes. Although it is not a psychoanalytic journal, in 2017 it dedicated one of its volumes, edited by Sheila Cavanagh, to transgender and psychoanalysis. In her article 'Transpsychoanalytics', she highlights a change in attitude within psychoanalytic writing about transgender subjectivity that comes from clinical practice and cultural critique. She refers to Jay Prosser (1998) and Gayle Salamon (2004) who used Freud's writing on the bodily ego to understand transgender embodiments of sex. Shanna Carlson (2010), Sheila Cavanagh (2016b and 2016c), Patricia Gherovici (2010), Oren Gozlan (2014) and Patricia Elliot (2001) are mentioned as writers who use Lacanian theory in order to progress an understanding of transgender that is non-pathologizing.

Cavanagh draws attention to the difficulty for Trans Studies to include feminist psychoanalytic theories that are perceived as essentialist or transphobic, and points out that when the feminine is considered as a sexual position rather than a natal corporeal biological or gendered truth, many more progressive readings are opened up. I think that this wish to move away from natality can create a tension for psychoanalysis, not because it cannot comprehend transgender embodiment, but because natal sex for psychoanalysis has meaning. This meaning need not necessarily invoke essentialist or transphobic ways of thinking, but does essentially have meaning.

Transpsychoanalytics is seen by Cavanagh as transgressive of psychoanalytic paradigms or borders, and as hybrid and trans-generative in its reading of desire and subjectivity. She points out that the term gender identity as used in the English-speaking world is poorly equipped to handle what Lacan calls the aporia of sexual difference (2017: 328). The psychoanalytic school of thought that this special issue of the journal engages with most is Lacanian, clinicians or academics.

Patricia Elliot, a Canadian psychoanalytic feminist, has written about transsexual embodiment (1998, 2001) through addressing questions from Lacanian theory and analytic practice, although not a clinician herself, that concern transgender experiences. She critiques Prosser's contributions to transsexuality as approaching the body too literally, and not drawing more meaning from Lacan on the desiring subject, the other and the phallic signifier. She emphasises the significance of the signifier for Lacan as helpful in letting go of fixed meanings, and transports this towards enabling a better understanding of sexed embodiment for trans individuals.

In the 2017 issue of TGQ, Elliot and Lyons investigate a text by Jeffreys (2014) in order to understand what motivates the fear of trans women by radical lesbian feminist discourse (RLF). The paper looks at the unconscious construction of transphobia as a symptom, and subjects Jeffreys text to a symptomatic reading, that appeals to the truth that the text expresses. It thereby tries to reveal a knowledge that doesn't know itself (2017: 359), and by analysing the text's signifiers, repetitions and personal or cultural fantasies point to its unconscious. The text becomes analysed like a patient in analysis.

Trans women and their perceived ideology, whether literal or metaphorical, are taken as the phobic object for RLF, in order to enquire what is being avoided and protected via their threat. Trans women are seen to have crossed a boundary, to have exposed the instability or contingency of sexual difference (2017: 362). Elliot and Lyons see the threat within the phobia, as being towards the lesbian community, RLF politics and the disintegration of lesbian identity from the trans woman who is seen as male identified. This threatening figure that they term 'unwoman' threatens identity internally that can then expand to all trans women through denial, projection, aggression and fantasy. In a sense, the paper is advocating for ownership of potentially destructive fantasies that remain unrecognised, and are acted out.

Patricia Gherovici, a Lacanian psychoanalyst in Philadelphia, has been influential in her thinking about transgender. Her clinical experience has enabled her to challenge the notion that transsexuality indexes psychosis, a position that has tended to be adopted by French Lacanians following Catherine Millot (1981,1990). She has published articles and two books: 'Please Select Your Gender' (2010) and 'Transgender Psychoanalysis: A Lacanian Perspective on Sexual Difference' (2017). Her writing has influenced both Psychoanalysis and Transgender Studies. She argues that transsexuality ought to be understood as a *sinthome*, not to be cured but to be engaged with and understood. Her approach is rooted in Lacan's theory of sexuation. Like Carlson, her understanding of sexual difference is informed by Lacan, in that it is fixed by a phallic premise although this does not limit the possibility of multiple gender identifications.

Gherovici has been outspoken about transgender and sees the subjective struggle in her clinical practice as often manifesting as a matter of life and death and not only in the wish to go beyond the gender binary. (2017: 536). Her much quoted aphorism that “Psychoanalysis Needs a Sex Change” was the title of her article (2011) in which she addressed the fraught tensions between psychoanalysis and transgender discourses, initially discussed in her 2010 book. She sees the conundrum of sexual difference, embedded in varied transgender experiences, as having the potential to illuminate fundamental tenets of psychoanalysis and clinical praxis.

She noticed a shift in her patients from questions of sexual choice to questions of sexual identity. The Lacanian unconscious is for her more versatile in elaborating a system of difference often called “gender”. She sees the sexual binary in the Freudian unconscious as the symptom of this impasse and sees Lacan’s sexuation formulas as more conducive to thinking about trans, as they are unburdened by anatomy. The normalising role of body and gender consistency is challenged by transsexual discourse and practices as embodiment is unfixed, continually evolving and constituted in a precarious process of identification. (2017: 541-542). Gherovici makes use of Lacan’s *sinthome* in her analytic work, as an organiser of *jouissance*, and like Lacan she works with her patients’ symptoms to reach an identity that can be lived and enjoyed.

In her 2010 book, Gherovici writes about the significance of the writing of autobiographical memoirs of experiences of transition, as both an art and *sinthome*. Like Lacan in relation to Joyce, she understands the writing as cathartic and a vital

component of “the transsexual body as a written body”, which is the subtitle of her chapter. (2010: 215). She cites Prosser, who sees all transsexuals originally as ‘autobiographers’ not least in order to manage the necessary medical hoops via a narrative, that Prosser likens to a second skin (1998: 101).

Gherovici argues that memoirs about sex change are a narrative form that provides their authors subjectivity with a specific function that helps to embody sexual difference. She sees this experience as a great way of testing out Lacan’s theory of the *sinthome*. She, like Dean in his earlier writing (2000), turns to Lacan’s later formulation of the *sinthome* as something that resists symbolic representation, is outside the Lacanian unconscious and hence is outside language. This makes it closer to the Real, and to Lacan’s formulation that there is no subject without a *sinthome*, and that any relationship between partners is necessarily *sinthomatic*. (2010: 230-231).

The artifice of writing as part of sex reassignment is seen by Gherovici as helpful if not vital in achieving full embodiment. She sees through her readings of many memoirs that people can have a self that stands in opposition to their body. In some instances of transsexual “artifice” she finds a creative *sinthome*. The writing is not seen as narcissistic, but more as “... the ego sriptor who reconstitutes the ideal image of the self via writing” (2010: 234-238). In Lacan’s writing about Joyce (2005), this ‘ego sriptor’ can have a restorative function for the body. This explains, for Gherovici via Lacan, why several sex change memoirs are also transition diaries.

Amongst the trans men that I interviewed, one had made a film about his transition struggles, one performed in a film in which his body was proudly displayed, and one had the intention and plan to make a film about his personal experience. This corroborated what Gherovici is saying about the importance and poignancy of writing or scripting an experience, that in some respects defies narrative, as it stands outside what can be symbolized.

Tim Dean, although not specifically writing in in the *Transgender Studies Readers* or the *Transgender Studies Journal* that I refer to, is an academic who has focussed on a Lacanian reading of desire that accommodates contemporary psychoanalysis and queer theory. In his book *Beyond Sexuality* (2000), he shows that the Lacanian unconscious moves away from heterosexuality, thereby opening up new ways of thinking about desire and promotes this conceptualisation as beneficial to psychoanalytic thinkers and queer theorists. He elaborates on this idea via an investigation into social and individual fantasies about AIDS and homosexuality.

He has also co-written articles in the journal *Psychoanalytic Dialogues* with Cynthia Dyess, a psychiatrist and psychoanalytic clinician (2000a, 2000b). In their paper *Gender*, they offer an intriguing interpretation of what Lacan means by the real, partly by recruiting Copjec's (1994) writing and her critique of Butler's claims about gender. Copjec sees Butler as failing to adopt Lacan's category of the real. Dyess and Dean advocate for a closer reading and hence better understanding of this Lacanian concept, in which they feel gender and sexual difference belongs, not least as they defy both meaning and representation. They read the various cultural and psychoanalytic narratives on gender, along with Carlson, Elliot and Gherovici, as

symptomatic attempts to reconcile with an entrenched impossibility that is central to sexual difference. Deconstruction as a social and cultural tool for theorists and psychoanalysts is seen as too reliant on the linguistic dimension of gender, thus neglecting the non-linguistic dimension which is the focus of the article. In a sense the paper deconstructs the more usual deconstruction of gender in order to validate a less constricted notion of the location (or dislocation) of gender psychically within the (Lacanian) real, and more in the sphere of an unrepresentable disruption.

Gozlan, a Lacanian psychoanalyst in Canada, has written eloquently about gender through a psychoanalytic lens. His 2008 paper 'The Accident of Gender', intends to show that the archaic nature of gender "...pushes for settlement, forcing a choice (to be a man or a woman) as a way to settle the traumatic nature of the self for which desire is not finite and where nothing can be settled once and for all" (2008: 541). He tries to move thinking about gender away from both that which satisfies the Other or the phallic answer. He argues that psychoanalytic writings cannot get away from the trauma of gender, and this is apparent in its investigations of gender such as transsexuality. Writing in 2008, he notices articles that treat transsexuality as a disavowal of difference and a collapse to a binary (2008: 541). He sees the psychoanalytic clinic as a place to help reconcile gender as an unconscious registration of trauma. He understands gender as an expression of unconscious desire, as that which rests between its signifiers and as something in constant movement. He ends his paper by saying that it is in the willingness to give up

identifications, that meaning that derives from absence can be made; and stresses the importance of making sense of one's own desire (2008: 569).

In a paper written for the 2017 Transgender Studies Quarterly, Gozlan expands on the contentious debate about bathroom use for transgender individuals. He asks what is foreclosed when the discourse is stalled, in relation to phantasies of the transsexual that can be thought of as stalled between imaginary and symbolic significations (2017: 455). He includes psychoanalytic theorists (Freud 1908a, 1909a, 1919, Abraham 1916, Heimann 1962, Klein 1952, Meltzer 1992) who have written on the symbolic significance of phantasies associated with the bathroom such as anal function, toilet training, oppressor and victim. This expands his thinking on the possible origin of unconscious projections onto and into the bathroom space, animated by infantile psychic conflicts and resolutions. He conjectures that the "entrance of the gender ambiguous person into the bathroom may activate primitive superego defences in response to perceived threats to the self's imagined gender coherence". (2017: 458). He mentions the threat to the omnipotent fantasy of gender certainty and how anyone entering the bathroom is affected by primal phantasies, partial objects and contradictory identifications. He understands the idea of transphobia as an unconscious dilemma, full of phantasies that concern the body, anxiety, desire, rejection and the other (2017: 462-463). I find the question that is embedded in the bathroom controversy, as cited by Gozlan "Are you a man or a woman?" (2017: 462) to be particularly interesting in relation to the underlying (psychoanalytic) question 'Am I a man or a woman?', as it incorporates a defensive projection of gender and sexual uncertainty. Gozlan makes a significant

contribution to literature on gender through his open and creative thinking and writing. I include aspects of his clinical work with a transsexual woman at the end of chapter 5 in relation to gender and temporality.

It is noteworthy that most of the psychoanalytic contributions to Trans Studies are Lacanian, whether these were written by Lacanian analysts or theorists, apart from some relational contributions (Hansbury 2017). Contributions from the British Object Relations school are noticeably absent, perhaps indicative of conflict between the disciplines.

Psychoanalytic and other research on transgender

In this section I have summarised research projects I have found that were either specifically about or included gender identity experiences of trans men. It has been harder to find projects with a psychoanalytic underpinning. I have included two books (1999, 2003) about trans men, with a sociological approach; and three research projects (2012, 2016, 2017) with a psychological or psychoanalytic approach. The five projects show the emergence over time of a more refined approach to gender identity, not least because they were written in different cultural periods of gender variability. Over time, the increased focus on gender identity of a much younger age group has been noticeable, perhaps not least because of its presence and accessibility on social media. The article that addresses this younger age group most directly is by Bechard et al in 2016. The two books were written in the United States, the Bechard et al article in Canada, Lemma's article in the UK, and Rodgers and O'Connor's article in Ireland.

In 1999 Jason Cromwell, a trans man, published 'Transmen & FTMs'. Cromwell's book covers much ground, and is interesting to read 22 years after it was published. Many of his ideas and findings have taken shape in the ensuing two decades: linguistically, culturally, demographically and politically. Notable, is the absence of the age factor (in relation to hormones) which is topical in 2021.⁶

His research was framed by discourse analysis and feminist theory. His interviews with trans men were unstructured, open-ended and based on a wish to enable self-definition that was not tied up with "the imposition of medico-psychological discourses and their practitioners" (1999: 8). Cromwell acknowledges that the interviews were with trans men who were all active in support groups, on the Internet or at conferences; his interest lay in unrestricted subjective experiences, feelings and memories about identity, sexuality and embodiment. His data comprised informal interviews, formal interviews and responses to a formal questionnaire; he has spoken to more than 200 FTMs. He acknowledges his position as an insider as aiding his capacity to recruit participants. Cromwell did not ask about the sex/gender of interviewees' partners as he "erroneously assumed" they would be female, which was not always the case. I found this heterosexual presumption interesting not least as he writes about the imposition of researchers' androcentrism. It also implies that gay trans men were perhaps more anomalous than heterosexual trans men. I write about these complex issues of sexuality for trans men in my findings and discussion chapter.

⁶ A judicial review took place in Dec 2020, following Keira Bell's case. She was prescribed puberty blockers (by Tavistock Gender Identity Development Service) at age 16, and later regretted transitioning. The high court ruled that those under age 16 were unlikely to be mature enough to give informed consent to the prescription of puberty blockers. In 2021 an Appeal by the Tavistock against this judgement was upheld.

In discussing “biases in the literature”, Cromwell comments on the issue of imbuing behaviour data with social meanings that belong to the researcher, as their own social norms enter into responses to and interpretations of behaviour. This can happen through the specific use of language that can pathologize individuals and societies, or deny the validity of individual claims. To my mind, some form of personal stance is bound to seep in, whether consciously or not, despite a wish for and acknowledgement of an objective position. I refer to this aspect of my research in my methodology chapter.

Cromwell highlights similarities and conflation between studies of homosexuality and transgenderism, not least in the presumption of homosexuality within the sexuality of transgenderism. He notices theoretical assumptions that can be carried loosely from male-to female over to female-to-male; just as they were from male to female homosexuality. Citing Devor (1989) he echoes the important point that one is not a mirror image of the other in either homosexuality or transgenderism (Devor 1989 in Cromwell 1999: 45). Writing in 1999, the dearth of females in cultural research until the mid 1970s is acknowledged. I find this quote by Lang to be prescient:

In anthropological literature, gender (diversity) traditionally was interpreted as homosexuality since individuals who change gender roles generally form sexual relationships with persons of the same sex. Moreover, in (Western) culture femininity in males and masculinity in females are seen as “symptoms” of homosexuality. Recent studies, however, have shown that a same-sex relationship is not necessarily also a “same-gender” relationship. Such relationships may be homosexual on the level of biological sex, but not on the level of gender (Lang 1991a:1-2; 1996:188; 1997:104).

Much is embedded in Lang's quote about the entanglement of sex and gender as manifesting in "symptoms", biological sex and gender identity. I elaborate on the entanglement of sexuality with gender identity in my Findings chapter. Sexuality is affected by temporality (see chapter 5) for trans men, as their gender identity is oftentimes 'from now' and not 'from then'. Clearly, and as evidenced by my interviewees, once someone identifies as trans, their preference is for their sexuality to be perceived as emanating from their current gender identity and not from their natal sex. This can reverse the psychoanalytic position of the 'past in the present' to the 'present in the past'.

One of Cromwell's motivations is to make female gender diversity visible; he sees contemporary female-bodied transpeople as *in need of a history* that is free from androcentrism, biological determinism and homocentric biases. He believes that androcentrism rationalises the motivations of those who transcend gender boundaries, thus omitting individual agency. The rationales relayed in most anthropological literature are in the domains of: unwillingness to marry, a family's need for a surrogate son and the pursuit of male privileges. Cromwell is against biological determinism, as for him, it renders female gender diversity invisible. He quotes Blackwood (1984) who states that theorists "resist the idea of a complete social reclassification because they equate gender with biological sex" (1999: 60-61).

I find the need of a history and visibility to be significant, when there is often a concurrent wish to undo or erase history and render it invisible; it is this very synthesis of past, current and future history (of the body in the psyche, or

‘somatopsychic’) that can come into conflict particularly if a continuum cannot be held in the mind of the researcher or individual trans man.

One of the findings, from an anonymous survey that Cromwell conducted prior to interviews, in order to assess female-bodied transpeople’s conformity to the homogeneous picture that transsexual discourses had constructed of them, was that they did not conform to claims about identities, sexual orientations, amounts of surgery and desire for genital surgery.

In 2003 Henry Rubin published ‘Self-Made Men’, a sociological study in which he interviewed twenty-two transsexual⁷ men, ranging in age from twenty-three to forty-nine year olds, with the aim to correct misconceptions about FTMs⁸. Rubin undertook his research through “in depth life interviews and fieldwork observations” in San Francisco, Boston and New York. The average length of the interviews was two hours, and many interviewees chose to use their real names. The criterion for interview participation was that their gender identity did not match their bodies. Findings from his research revealed the importance of the body and the body’s betrayal or “unparalleled act of treachery” during puberty and secondary sex characteristics as facilitative of intra and inter-subjective recognition of a core (gendered) self (2003: 11).

Rubin moved from the importance of bodies to the importance of subjectivity, “true self”, and experience as rooted in a wider (cultural) history of experience of

⁷ This was the term that Rubin used throughout his book: Rubin, H. (2003) ‘Self-Made Men’, Vanderbilt University Press.

⁸ I have used this abbreviation of Female To Male, whilst discussing Rubin’s work, as it is used by him.

gender. He quotes Taylor⁹ who discusses identity in “pre-modern times” as historically “too unproblematic to be thematised as such” (1991: 48). Rubin supports the notions of internal identity, “hermeneutic subject”, “core identity” as well as the philosophical term “deep subject”. He cites Taylor’s additional terms of “authenticity” and “recognition” that can jeopardise the nihilistic culture of the pursuit of individualism, unless intersubjective recognition takes place. In this quote from Taylor in Rubin’s book, I perceived a psychoanalytic element:

Identities, he says, are always formed in dialog with and against “significant others” (Mead 1934). Recognition is the intersubjective principle that guarantees social integration and shared moral principles, as well as individual authenticity (Rubin 2003: 14).

The psychoanalytic aspect is *in the dialogue with and against significant others* which I see as unconscious as well as conscious, although I do not think it was meant to be read as such. The aspect of identity, now so central, once was not “thematised”; and is currently thematised almost ubiquitously as part of the everyday cultural, social and political norm. The authenticity of recognition also referred to as validation, attunement or early mirroring is at the centre of identity, and that which creates much conflict *when how I recognise myself is not how you recognise me*, in relation to gender identity (my italics). Rubin cites Benjamin¹⁰ (1988) who acknowledges that recognition is reflexive: it involves the other’s confirming response and how we find ourselves in that. Rubin understands FTMs as needing to modify their bodies in order to corroborate and affirm their authentic selves; when misrecognition takes place it is felt as oppressive.

⁹ Taylor, C. (1991)

¹⁰ Benjamin, J.(1988), The Bonds of Love.

Rubin's book includes historical accounts of feminism, the evolution of medical approaches to gender, conflict between lesbians and transsexuals, phenomenology, genealogy and ontology. One of the interviewees drew a distinction between being a lesbian (butch) and being FTM: "Where butches manage to stay in their bodies, FTMs cannot" (2003: 25), this same interviewee described some lesbians as "much more butch" than him, but he was "much more male" than them (2003: 24). This struck me as important in relation to experiences of extreme incongruence that were expressed by my interviewees, who were nearly all female and gay before coming out as trans men.

In discussing Sartre's levels of bodily ontology, Rubin refers to the *body-for-others* (my italics): "This is the body as object, the body that is touched, as one might touch a peach. It is an instrument for others. This is the body as flesh, as corporeal reality." (2003: 24-27). The body-for-others was a crucial factor for the trans men that I interviewed; how they felt perceived socially or sexually was a very significant factor. It can be understood as a projection of a wish (for attunement) that the body as perceived by the other will correspond to the body I have in my mind, which can create conflict between phantasy and reality. The corporeal body of a trans man may well not match up to the maleness that he feels psychically and wishes others to perceive physically. In discussing the experience of menstruation for girls generally and FTMs, Rubin made a distinction between the impact of social demands on the female body as often being generally unwelcome by girls, and the discomfort from being a female body *at all* (my italics). In my approach to the experience of a female body, there is always an associative chain, whether it is

conscious or unconscious, to, for and against significant others, with the most significantly challenging link usually being that between a female girl and her mother.

In his chapter 'Transsexual Trajectories', Rubin opens up the different experiences of his interviewees who identified as lesbian prior to identifying as transsexual men, and those who emphatically did not, in spite of desiring women. It seems that lesbianism was very much associated with an affirmation of womanhood, as embodied and lived out sexually. The FTMs who struggled with the notion of a female partner, particularly struggled with the experience of being related to as female bodied sexually. As their psychic position was male, they did not like being related to as "the girl" by "the boy". Rubin saw this not as a difficulty with being subordinate as might be the case for non-transsexual women, but as the difficulty *of being women* (my italics). Again, I find this distinction problematic, perhaps because it adopts an essentialist stance that simultaneously defies essentialism. Rubin's interviews open interesting distinctions between transsexual men who identified as lesbian in their past and those who did not. Post transition it became more possible for some transsexual men to desire women, *as men, and not as lesbians*. This corroborates the importance of the orientation from self to others and from others towards self of a male position that I elaborate on in my Findings and Discussion chapter, as well as in my conclusion (my italics).

Rubin acknowledged the significant role of endocrinology in the nineteenth and twentieth centuries, the initial purpose of isolating sex glands for rejuvenation and their eventual use in re-balancing hormones anatomically with specific impact on

secondary sex characteristics. I was interested in the notion of a hermaphroditic bedrock¹¹ attributed to all humans (Rubin 2003: 36) and wondered how this correlated with innate bisexuality, in the context of a hermaphroditic primitive genital trace that can also be applied to object choice: we begin as both male and female and desire both male and female objects. Rubin cites the discovery that oestrogens and androgens that were in both men and women opened up the possibility for transsexuals to transform their bodies hormonally. Testosterone was highly significant for both Rubin's interviewees and mine, as it reduced the schism between mind and body, with or without the intervention of surgery.

One major difference between Rubin's research and mine is in his adoption of the notion of core gender identity, whereas my stance is less conclusive. Rubin empathises and agrees with the plight of his interviewees whose body modifications were necessitated by a deep sense of incongruence with their natal gender as felt psychically. He viewed sex changes as rational measures that can secure human integrity and associated rights and ends his book with a note of encouragement towards transitioning.

In an article entitled 'Research off the couch: Re-visiting the transsexual conundrum' 2012¹², Alessandra Lemma, a psychoanalyst and psychologist, discusses the findings of a qualitative study based on interviews with eight transsexual interviewees at various stages of transitioning, who had volunteered to participate in a TV documentary about transsexuality. The interviews took place

¹¹ Biedl Arthur, experimental endocrinologist, who identified the hermaphroditic bedrock and the role of hormones as central to human development.

¹² Lemma, A. (2012) Psychoanalytic Psychotherapy, vol 26, No.4, December 2012.

before and after participation in the four-part series. Assessment of their psychological suitability for taking part was Lemma's initial role.

The age of participants was 22-50, with two female-to-male and six male-to-female. Although this is a study that has a higher number of male to female than female to male, I found the study and its findings relevant to my research. The interviews were semi-structured and lasted 75 mins. The questions were about their understanding of their transsexuality and its origins, anxieties and hopes about body modifications that included hormone treatment and their motivation for taking part in the series. Lemma used thematic analysis as advocated by Braun and Clarke (2006), transcripts were read thoroughly and open coding followed by focused coding was used, in order to locate areas of convergence and difference from initial to later coding. Out of this, hypotheses were developed about the impact of taking part, and how this related to planned body modification that would align the body with the gender as subjectively felt.

One main theme and hypothesis that emerged from this study was the struggle for many of these transsexuals to feel at home or congruent in their bodies and in themselves, which Lemma attributed to a lack of early mirroring experiences. This lack of congruence or sense of self frequently led to *a need to find this in the body* (my italics). The lack of recognition by others exacerbated a pre-existent struggle, leaving most with a sense of being unseen for who they felt they were, as well as at risk from developing 'an alien self or disruption in identity coherence'. The motivation to take part in the TV documentary, was clearly driven by this (intense) wish and need to be seen and Lemma sees the core of the transsexual's experience

as located in the visual order. Their bodies and identity became more real to themselves through and by the showing to others. Following the screening, both an experience of validation and acceptance from peers involved in the programme and a significant shift in the participants' thinking about future modifications to their bodies was experienced (2012: 272-275).

Lemma discusses the "body-as-ghost" which emerged from her interviews, referring to the difficulty of acknowledging and mourning the unwanted body, with evidence of expressed discomfort from the binding of breasts by FTM participants. She elaborates on the new body as always being a reconstructed one, for which history and loss cannot be wiped out. An individual's capacity to do this psychic work impacts on their state of mind and relationships following surgery.

In her discussion, a distinction is made between 'off the couch' and 'on the couch' data. Lemma recognises this research as the former, and therefore not derived from analysing transference and countertransference phenomena. In spite of it being consciously derived, she suggests:

... it provides a perspective that can be helpfully triangulated with data on the couch so as to test out the relevance of our hypotheses on non-clinical groups. What we learn off the couch may also help us to broaden our understanding of the phenomena we observe 'on the couch' (2012: 277-278).

This view can also be applied to my 'off the couch' research, and more generally to research that utilises psychoanalytic ways of thinking, but is not necessarily in a clinical setting. Although my interviews are conducted through my use of

Psychoanalytic Research Interviews, I was not using countertransference during the interviews as it would usually be used in psychoanalytic sessions. I applied psychoanalytic methods retrospectively in my analysis and discussion of the transcripts. I think this corroborates with Lemma's distinction of 'on the couch' and 'off the couch' research. I expand on the use of psychoanalysis for research in my methodology chapter. I'd like to add that 'countertransference' as a phenomenon is not owned exclusively by psychoanalysis and can have much broader applications, as transference and countertransference are part of everyday projections and introjections. Although I have not prioritised my use of countertransference, and recognise that I was conducting interviews and not clinical sessions, nonetheless each interviewee stirred up different feelings and responses in me, which I have borne in mind whilst writing about them in the findings and discussion chapter.

In 2016, an article, endorsing the need for a substantial psychological assessment prior to hormonal treatment for adolescents presenting with gender dysphoria, was published by Bechard, VanderLaan, Wood, Wasserman and Zucker online (2016) and in a journal (2017). The main tenet of this article is the impression (as well as data) that these clinicians had, that the vulnerability or comorbidity of this young population was overlooked. They found that adolescents referred for gender dysphoria have a significant co-occurring history of psychosocial and psychological vulnerability. The data demonstrated a "proof of principle" that supports the importance of a comprehensive psychological/psychiatric assessment that moves beyond an evaluation of gender dysphoria alone. In this research project: 50 referrals were reviewed, 17 natal males and 33 natal females. Of these 80% had a

prior outpatient assessment not related to GID (Gender Identity Dysphoria), 78% had a prior trial of outpatient therapy, over 20% had an inpatient psychiatric admission and over half had a prior or current trial of psychopharmacological treatment. Sixty percent had a prior DSM diagnosis other than GID. The most common diagnosis was a mood disorder, and over half had a history of suicidal ideation. These findings were consistent with prior studies with a similar number of variables that included a history of self-harm, suicidal ideation, or suicide attempts. The researchers question if the presence of gender dysphoria contributed to other psychological struggles, or whether these emanated from family history or psychopathology, that are not necessarily related to the dysphoria. The concern that underpins this research is the readiness to commence with biomedical treatments when (longer) psychotherapeutic exploration might be more appropriate.

In 2017 Rodgers and O'Connor¹³ published a study: 'What's in a name? A psychoanalytic exploration of self and identity in transgender individuals who were assigned female at birth'. This paper came from a department of Clinical Psychology in Ireland, used a psychoanalytically informed interview technique, involved six participants aged 20-37, for 3-4 one hour interviews. The researcher's interest was in a wish to understand how gender identity and a sense of self develop through lived experience. The research was qualitative with emphasis on the interviewer's countertransference, and intersubjective dynamics between participants and interviewer. The themes that were established through analysis of the data and

¹³ Psychoanalytic Psychotherapy, 2017, Vol.31. No.2, 140-159.

focus on the associated affects were: 'What's in a Name?'; 'Rejected, Bullied, Ignored and Forgotten'; and 'I'm a Boy (not a Girl)'. The salience of language in validating identity was found to be significant and incongruent mirroring was found to be instrumental in the development of a false self. I was interested in the pull on the researcher to adopt congruent mirroring and a non-ambivalent position, as operating consciously and unconsciously. Interviewees did not generally wish to 'be in touch' with their lost female life, and although the researchers mention that something is damaged in relation to 'girl' or 'woman', this idea is not developed as it is in my research.

During my writing of this PhD, I have tried to locate other research projects or books that are specifically about trans men. The purpose was to find studies that were psychoanalytic, as well as psychological or sociological; look at how these research projects were undertaken and what their aims and findings were.

Although this is not an exhaustive collection, I have included publications that I have found useful or relevant to my research. In my general search I have found several books on gender and transgender (some autobiographical) and fewer actual research studies on trans men. Where I have found studies on trans men, these have tended not to be psychoanalytic, by which I mean a consideration of unconscious processes.

Nonetheless, Valentine's work (2007) is important to mention as unusually his interest lay in exploring the meaning of transgender as an ethnographic category, one that has crystallised in the United States since the early 1990's. He argued that "the 'gender' that underpins 'transgender', and marks it as distinct from the

‘sexuality’ of mainstream and gay and lesbian politics, is one rooted in a sexological rather than feminist tradition” (2007: 59). His research was conducted in the main with poor female-to-male transsexuals of colour (sic), who did not identify with the category of transgender and who conceived of gender and sexuality differently. He saw the growing prevalence of ‘transgender’ in the US as cementing the distinction between gender variance and sexual orientation. His concern was for people unlikely to privilege from the social justice activism of transgender (2007: 6).

In this chapter I have defined and reviewed the expansive and indeterminate meanings of the concepts of sex, sexuality and gender; I return to the archive of the Sexologists, bring in Freud’s major contributions and address the writings of key gender theorists that include objections to aspects of these theories. I posit the recognition of difference between the sexes as central, not only for the hysteric’s dilemma, but for all human experience. Difference between the mind and body is often at the heart of gender identity conflict, and opens up the various positions on gender as constructed, essentially biological, or unconsciously structured.

I discuss clinical and academic writers who have challenged and expanded the way in which sex, sexuality and gender are theorised across different disciplines including Queer Theory and Trans Studies, as well as in psychoanalytic research on transgender. The intention of this opening chapter is to lay the foundations for my research question and explore and contextualise the continually vexed nature of sex, sexuality and gender not only as a conflict between the body and mind, but between parts of the conscious and unconscious mind and also across different disciplines.

Chapter 2

Oedipal Complexity and Female Development

In this chapter I will discuss the Oedipus Complex with reference to its inception in Freud's mind as a universally applicable phenomenon, and include subsequent interpretations of the Oedipus myth. As my research is focused partly on the gender identity of trans men I will look at aspects of female sexual development, primary femininity, the repudiation of femininity and castration anxiety.

Where is Oedipus in the 21st century?

Ever since Freud discovered the Oedipus complex it has been recognized as the central conflict in the human psyche – the central cluster of conflicting impulses, phantasies, anxieties and defences. It has therefore become the centre of psychoanalytic work (Segal 1989:1).

Remarkably Freud uncovered the Oedipus Complex during his self-analysis, and its basic form has retained a central position in classical psychoanalytic theory and practice. Freud's self-analysis as the originator of the ramifications and application of Sophocles' myth to human relating and developing was poignant given that Oedipal patterns mainly concern pairs and triangles. Although Sophocles devised the multi-layered tale of Oedipus, Freud took it further and firmly planted it into the psychoanalytic canon. The story is open to endless interpretations and its application as a central feature of human development triggers both positive and negative responses in the field of psychoanalytic work.

The Oedipus complex provides a structure or constellation from which development can be mapped and thought about. It is about the universal struggles in the movement from dyadic to triadic modes of relating, and necessitates a complicated emotional choreography that affects individual identity through the process of identifications.

Freud was captivated by these universal aspects of the Oedipal myth that provided a concrete representation of the primal fate of us all as children. It is important to register the historical context that followed on from Freud's revision or relinquishment of his seduction theory. Both the seduction theory and the Oedipal myth were conveyed as stories that Freud formulated in order to make sense of hysterical or neurotic symptoms. The move from the seduction theory to the Oedipus Complex also privileged the unconscious as an agency that could tell the truth, not just as a well of past memories (Toews 2000: 66-68).

His destiny moves us only because it might have been ours – because the oracle laid the same curse upon us before our birth as upon him. It is the fate of all of us perhaps to direct our first sexual impulse towards our mother and our first hatred and our first murderous wish against our father. Our dreams convince us that this is so. King Oedipus, who slew his father Laius and married his mother Jocasta, merely shows the fulfilment of our own childhood wishes (Freud 1900: 262-263).

Asymmetry forms a major aspect of the Oedipal triangle with all of its negotiation and frustration. The child can never be an equal to the rival parent who shares (whether in phantasy or reality) in an excluding sexual life with mother.

Interestingly in her paper 'Autistic Shapes', Tustin states that "It is characteristic of

autistic children that asymmetry, contraries, differences and lack of fit to shapes are unpleasant and are avoided” (Tustin 1984: 279).

The struggle with asymmetry is taken up in the writings and theory of Matte Blanco who thought that the realm of symmetry is in the deep unconscious. He hypothesised that symmetric and asymmetric relationships are always present in the mind in differing proportions; and that the unconscious treats asymmetrical relationships as if they were symmetrical. The annulling of distinctness through symmetry is destructive of the spatiotemporal structures of our thought. (Lombardi 2009: 64-69). This theoretical stance is to my mind very applicable to the struggle with the distinctness between the sexes and the a-temporality that can sometimes form part of trans identity whereby the present and past become one: who and what I am now is who and what I always was. I will expand on this in chapter 5 and chapter 7.

William Golding understood myth as being more profound than fable. He saw it as “... something that comes out of the roots of things in the ancient sense of being the key to existence ... the whole meaning of life or the total explanation of a certain human situation.” (BBC audio recording: 2008).

Steiner (1985), in his interpretation of Sophocles’ myth of Oedipus, focuses on the turning of several blind eyes. He understands this tendency in human behaviour as choosing not to know at the same time as knowing. Steiner believes that Oedipus had many opportunities to learn the truth of his situation but chose not to, thus postponing the ultimate catastrophe. Steiner looks into the psychic reality of the

Oedipus complex as ubiquitous, and sees two very different pathways that can emerge from the reality of these impulses:

If persecutory anxieties predominate, facing reality involves facing the threat of retaliation sometimes expressed as a castration threat. If depressive anxieties are active, facing anxiety involves facing the catastrophic loss of the parental couple on which the patient depends. If this reality can be faced it can lead to an experience of loss which enables mourning to take place, and which ushers in the experience which Melanie Klein described under the heading of the depressive position (Klein, 1935, 1940). These involve internalization, symbol formation and the drive to make reparation which enables the parental couple to be more realistically installed as symbolic figures in the internal world (1985: 168).

Steiner goes on to clarify that if the Oedipal crime is covered up rather than acknowledged (the turning of the blind eye) this can lead to a corrupted internal state: one in which the internal representation of good intercourse is attacked. This can drive the personality towards further cover-ups and evasions of truth and reality which is the essence of the play of Oedipus (1985: 168).

Although the more classical stance on Oedipus is that he was not conscious of his actions, Steiner cites Vellacott's detailed examination of the text that suggests that Sophocles simultaneously offered both views, that of knowing and not knowing (Vellacott 1971). What Oedipus appears to avoid doing is to make connections, for example, between the news of the death of the king and his slaying a man who was his father's age. This, in Bion's language, can be thought of as an attack on linking. (Bion 1959: 308).

He solved the riddle of the Sphinx and accepted the hand of Jocasta without qualm because, as Andre Green has suggested (Green 1987), the desire to enjoy Laius's throne and Jocasta's bed made him a poor logician (Steiner 1993: 120).

It could be said that there is a gain or enjoyment in the knowledge that comes from turning a blind eye. It is a self-inflicted double bind: I know but I choose not to know; I am both innocent and guilty, naive and informed. It brings to mind the transvestite's experience: I get pleasure from dressing as a woman whilst knowing that I am a man. Here the masquerade of womanliness (Riviere 1929) covers up the physical reality of maleness. For trans men, the blind eye is double edged, it is potentially more painful to face the physical reality of the body that contradicts the gender as it is felt and lived. I bring this into my hypotheses, and discussion chapter.

Steiner believes that at the point at which Oedipus, having discovered the terrible truth, blinds himself is also the point where Sophocles identifies that the truth is actually too horrific and hence Oedipus is already in retreat from it whilst he mutilates himself. The way that Steiner describes the movement for Oedipus that we recognize is from guilt to hatred and from hatred to tragic self-mutilation. (1993:123).

I see this movement as significant in seeking to understand what the unconscious constellation might involve for trans men. If we think of the guilt emanating from conscious and unconscious Oedipal wishes towards the mother and the inside of her body (Klein), this guilt could be thought of as (having the potential for) converting itself to (sometimes matricidal) hatred of the mother (and who she

signifies in the Oedipal constellation); rather than damage the mother (in phantasy) the bodily adjustment is (unconsciously and consciously) directed towards the self. A usual tendency for trans men is the binding of breasts, which can be thought of as an ambivalent site in what they symbolise. Binding breasts or bodily transformations can also bring relief as the body becomes more aligned or recalibrated to the gender as felt psychically.

Symington (2018) re-examines the intra-psychic nature of the Oedipus myth in an original way by postulating that Laius represents an inner psychic reality, albeit one that Oedipus turns away from. By killing his father and marrying his mother, and obeying the Delphic oracle's pronouncement of his fate, Symington interprets Oedipus as turning away from the harder inner reality of growing up (finding his own wife and building his own life) to the external magical solution that leads to eventual disaster. In this way Oedipus remains a child: one that has seized power from his father and remained with his mother. Symington invites the reader to look at the Oedipal crime, and see what has not been done:

Paradoxically it is not easy to see what is not done. The slaying of Laius is easy to see, the sleeping with Jocasta is identifiable. The crowds can shout and scream about these. You cannot scream about a vacuum, an absence, about what is not done. Yet I am sure that it is in the vacuum, in the absence, that we must look for the source of human disaster. In another context, I have referred to this as the principle of omission. So we have to look at what Oedipus did not do (2018: 154).

Symington contrasts the anti-heroic and heroic aspects of Oedipus: the superficial heroism of an external valiant act that begets disaster with the greater

achievement of the internal act of growing into adulthood with all the emotional hardship involved. The freedom to choose is posited by Symington as the path not taken by Oedipus, who allowed fate to rule his destiny through masochistically submitting to it. By killing Laius, Oedipus commits soul murder, as he thus kills the symbol of power rather than transforming that which the father symbolizes; (2018: 155-156). Symington takes this further by seeing, or saying that what we witness in Oedipus is a schizophrenic mind in which the wounded child is murdered within by the negative malign power.

The malignant power that this would-be action of Oedipus drives back, takes the mind into its control. What we are witness to in the Oedipus myth is a mind in the grip of a malign negation. I believe that Oedipus was schizophrenic, and my evidence for this is that the negative fatefulness that ruled his soul is one of the most tell-tale signs of the schizophrenic condition ... Another way of saying what I have just said is that the child—the child for whom a whole world of freedom and possibility expands in front of it—this child has been crushed, brutally murdered. The murder of Laius symbolizes the murder of the infant Oedipus (2018: 157).

I am interested in exploring more about the parallel aspects of internal murder, the principle of omission and incapacity to transform something symbolically in relation to the adoption of a male identity for the female to male trans man. Is femaleness rejected in an unsymbolized way? Is the trans man (inevitably there is massive variation and complexity amongst individuals) concretely becoming or appropriating the father rather than transforming that which the father symbolizes? Is the murder that is not committed by Oedipus that of killing his mother? Does the patricide conceal the matricide? Although one can argue that

what Oedipus does eventually leads to Jocasta's suicide so that he does kill his mother albeit in a circuitous way, a murder by proxy. There is of course also Jocasta's blindness towards incest with her son.

In its basic and traditional form, the Oedipal dilemma confronts the small boy with a challenge of how to win over his mother whilst his father is in the way, how to manage this conflict of love for both parents, and how to manage the humiliation of being sexually immature compared with father. For the small girl, mother obstructs the wish to 'marry' father or have his "penis-baby" (Freud 1923, 1925, 1931). The Oedipus complex ushers in castration anxiety, and this might manifest psychically, in the form of imagined punishment for sexual wishes. The small girl's challenge is to move her attachment from mother to father and from there to another man (or person) and ushers in her awareness of the lack of a penis. Freud's construction of the Oedipal trajectory for girls has been heavily criticised, as has the underlying hetero-normative presumption of all of these moves.

It could be said that the more homo-normative presumption was not yet in the culture. By homo-normative I am referring to gay relationships (that are not perceived as Oedipal deviations) or the possibility for gay male or female couples to become parents through a variety of pathways. The historical split between heterosexuality and homosexuality is now less acute, although this does not mean that there are not still (psychoanalytic) hetero-normative presumptions projected on to same sex couples in and of themselves or as parents. If we think of Freud's position in terms other than hetero-normative, it might be more fitting to think in terms of male and female or parental sexual coupling as a creative act. Money-

Kyrle included this in his “facts of life”, putting forward the notion that there are basic anchoring points that pin us to reality whether we like it or not (1971). There are (some) cultural shifts that can be applied to these facts of life now, both in aspects of androcentrism and a male/female heterosexual binary.

Freud sensed that his theories on female sexual and Oedipal development fell short. Although he moved on from thinking that the girl’s development is in parallel to that of the boy, there was a reluctance to accommodate (mainly) female analysts with new ideas about female sexuality at the time. The masculine phallic position provided the template for female sexual development: the young girl always struggling with *a lack* of a penis/phallus. This deep-rooted lack of potency underpinned much theorising about female hysteria, including the question: ‘am I a man or a woman?’ (Leclaire 1971). In spite of much criticism of Freud’s theories on female development, his originality and creativity about the psyche’s perception of the body, and the formation of the psyche through the role of the body should not be underestimated.

Kohon (2018), in writing and expanding on Freud’s case study of Dora, (1905a) describes a hysterical stage that comes between two Oedipal phases, the first in which the mother is still the libidinal object for the girl and the second in which the father becomes that object. He emphasises the difficulty of this movement (for the hysteric) from mother to father and refers to it as divalent, and as preceding ambivalence. He describes the hysteric as unable to define herself as a man or as a woman, as she is stuck and cannot choose between her father or mother. (2018: 286-287).

Kohut (1959) contributes usefully to thinking about the so-called phallocentric bias that Freud adopted by reminding us how unkeen he (Freud) was on biological speculation alone, that could not be affirmed by psychoanalytic introspective observational findings. Kohut concurs with divergent views that cannot accept the interpretation of femaleness as a retreat from disappointed maleness:

His refusal to change his views on female sexuality was much more likely due to his reliance on clinical evidence – as it was then open to him – through psychoanalytic observation, and thus he refused to accept a plausible biological speculation as a psychological fact. Penetrating beyond the feminine attitudes and feelings of his patients he found regularly the struggle over phallic strivings and, *while he accepted biological bisexuality*, he rejected the postulate of a preceding psychological phase of femininity without psychological evidence for it (Kohut 1959: 479).

Balsam states:

I think that it is possible to use his methods and theories of investigation of the human condition and his structural theory with an emphasis on object relations and culture, while allowing for the existence of bodies of two natal sexes. A multigendered system of operations that deals in spectra of difference and description of differing modes of sexual behaviour, aims, and the choice of objects can coexist. The pressure to compare male and female so narrowly as in a phallocentric scheme is thus relieved, and clinically the emphasis can then privilege the variations of subjective experience (Balsam 2018: 12).

Although there were a number of women analysts who wrote and published on female development and sexuality, their ideas were not wholly incorporated into the psychoanalytic canon. The reasons for this have been explored by Yonke and Masters amongst others; they attributed the lack of take up to “... the formation of

a scientific thought community and a journal science.” (2001:53). They also cite the impact of preliminary training, status within a professional community, the culture of the period preceding the women’s movement of the 1970’s and not least the intervening Second World War with all of its traumatic residues of loss and migration. Although Muller (1932), Brierley (1936), Horney (1933), Deutsch (1925), Riviere (1934) and Klein (1932, 1936) were writing in the 1930’s, there was an inevitable lull during the Second World War.

Yonke and Barnett (2001) point out that from 1920 to 1980 the psychoanalytic community overlooked the possibility for more current thinking and discussion of female development and sexuality: “For 60 years, psychoanalytic books, journals, and professional meetings *perpetuated a style of thought so that a shift in theory did not occur*. As late as the 1970’s, old ideas were reworked. Even women analysts continued to interpret women and girls’ experiences of their own bodies using the male standard.” (2001: 53-54), (my italics). The tendency was to complement and compliment Freud rather than contradict him right up until the 1970’s. The problem of female sexuality was tackled with penis envy as central. More contemporary thoughts and ideas were there but obscured.

Broadly the newer ideas that were coming through, as summarised by Birksted-Breen (1996a), were about dissent from the masculine standard and the significance of motherhood (Horney 1924), oral acquisition, incorporation and possession (Riviere 1934); the physiology of sucking and the mother/child relationship (Deutsch 1925); female aggression and fantasies (Muller 1932); the oral

nucleus that underpinned female development (Brierley 1936) and early anxiety and its impact on female sexuality (Klein 1932).

Freud's notions and theories about female sexual development and femininity were inevitably shaped by the biological, physiological and cultural climate in which he lived. 'Penis envy' usually trumped 'Venus envy', so to speak, although Horney (1926: 330) took up male envy of a female's capacity to bear children and breastfeed. The male form as the golden standard was obstinate, perhaps not just in the forming of psychoanalytic theory. There are probably more phallic symbols than any other kinds of symbols (Gallop 1981: 252). There does seem to have been a historical difficulty within psychoanalysis to allow female development to have its own place as simply emerging from having the complexity of a female body with all that entails both consciously and unconsciously: a vagina with an opening, a clitoris that has a function, the physical experience of a sexual space inside the body that can be penetrated or invaded, a womb with the potential and risk of childbearing and childbirth, breasts that will develop with the potential to have both a sexual and a feeding function, menstruation with all of its accompanying physical (an orifice that bleeds) and hormonal impacts including fear of and actual pregnancy. Perhaps the female body ushers in individual developing and at times ambivalent experience of sexuality prematurely (in all of its manifestations), pregnancy (unwanted or wanted) and motherhood (wished for or not).

It is not difficult to see how the female body, so very linked to the female mother, can become the site of ambivalent feelings that incorporate mother and self,

mother in self, and self in mother¹. There were some female analysts (Brierley, Riviere, Deutch, Horney, Klein) who were writing about early female aggression and phantasies or dreams that come from the experience of having a female body and a female-bodied mother.

Britton makes the salient observation that Freud's theory of 'female castration' or 'masculinity complex' was shaped by his analysis of his daughter Anna. Britton thinks that although this complex can be found in (the analyses) of some women, "... he was misguided in regarding it a part of normal female development ..." and suggests that "... his two analyses of his daughter Anna played a significant part in his adoption of his new theory of normal female sexual development and his unusual insistence on it". (Britton 2002: 109).

Ernest Jones, a contemporary of Freud, was one of the few male analysts who had dissenting views to Freud's about whether femininity developed independently to biology known as the "Freud-Jones Debate" or more accurately the "Horney-Jones-Freud Debate" in the 1920's and 1930's. These issues transgressed the subject of femininity to the forming of psychoanalytic theory (Mitchell 1986, Birksted-Breen 1996a).

Jones introduced the idea of 'aphanisis' (1927) meaning the complete extinction for the capacity of sexual enjoyment. He thought that the fear of castration as it manifested clinically corresponded to this notion. He saw the dread of aphanisis as subsuming castration fears. Although he thought that both sexes have this dread,

¹ Rozsika Parker 'Torn in Two: The Experience of Maternal Ambivalence'.

there is a difference between the sexes in how this dread manifests: for the male it manifests as a fear of castration, but for the female it manifests more as a fear of Oedipal separation.

Jones makes a link between privation and guilt in relation to the superego that is often seen as the heir of the Oedipus complex, in the sense of how parental figures form themselves internally. He sees guilt as having the function of protecting the child from the stress of the privation of ungratified wishes. To my mind, this is an interesting and original interpretation of guilt although one can detect the Kleinian (1948:27) aspect of Jones' take on guilt in relation to persecutory anxiety.

Jones elaborates on Freud's theory of penis-envy for the girl, and demarcates pre-oedipal and post-oedipal penis envy. He names these auto-erotic and allo-erotic, the latter meaning that it is directed to another. Jones understands the girl's privation of "never being allowed to share the penis in coitus with the father" (1927:444) as that which fuels her wish to have her own penis. This privation is experienced as aphanisis and sets the superego in motion. The early awareness that mother has something from father that the female infant does not have, has two possible outcomes for Jones. It instigates oral aggression and sadism towards the mother, thought in phantasy to have father's penis (incorporated) inside her. This is the territory of primitive phantasies of coitus, and what Klein referred to as the combined parent figure. This oral sadism to break into mother's body and rob her of what's inside brings to the fore a (defensive) wish in the small girl to have her own penis instead of competing with mother for father's penis. She then has to make a libidinal choice between relinquishing her erotic tie to father or

relinquishing her femininity. This becomes *a question of exchanging the object or the wish*, as both cannot be kept. Jones puts this starkly in terms of renouncing “either the father or the vagina” (1927: 466). Jones sees the motivation for penis envy differently to Freud. It is a choice between giving up the object (father) or giving up femininity. If the father can be renounced, this paves the way towards achieving other adult (heterosexual) relationships, however if this tie is not relinquished but is retained through identification, a penis complex develops.

In my view, this might also relate to a possible aspect of the emergence of female masculinity or trans-masculinity in the forming of gender identity. If I cannot be the female for my father, I will become (appropriate) my father or incorporate masculinity so that it takes over my femaleness and my femininity. I can then be the masculine one in sexual relationships and I can also choose to have a masculine object of desire, but one that is not threatened by incestuous Oedipal phantasies. Aligning himself theoretically with Horney, Jones sees a parallel Oedipal process for both sexes: “... *faced with aphanisis as the result of inevitable privation, they must renounce either their sex or their incest ...*” (Jones 1927, 1948: 445).

To my mind, this interpretation of psychological development is more nuanced than Freud’s and is much more aligned with Klein’s thinking about early oral aggression and primitive phantasies about coitus, although Jones was very careful to acknowledge Freud as the ultimate master in the field.

Essentially, the divergence between Jones, Horney and Freud, lies in the interpretation of how the phallic phase manifests itself in the early emergence and

development of female sexuality. Jones (1948) questions Freud's demarcating position for human beings into those who possess a penis and those who do not: the castrated or mutilated class. This pre-empts Lacan's move to a more symbolic realm in relation to the phallus. For Freud, the boy initially believes that everyone is like him; the girl, once cognizant of what boys have, becomes aware of (or initiated into) a "mutilated class to which she belongs" (1948: 453). Neither boys nor girls want to know about this class because it signifies castration. Jones makes the distinction between the 'proto-phallic' phase (we are all alike) and the 'deutro-phallic' phase (we are not). The proto phallic phase corresponds to Fast's notion of an undifferentiated all-inclusive phase for boys and girls, prior to an awareness of anatomical difference (1984: 28-32).

Jones questions Freud's assumption (influenced by Fleiss) of inborn bisexuality. He was mindful of Freud's awareness of the infant's attachment to their (first object) mother and how complicated and unwavering the repression of this attachment was. For Freud, there is inherent masculinity for both sexes from the outset and it is from this notion that Jones, Horney and Klein dissent. Later on, Stoller (1968: 64) dissents too in his advocating primary femininity in both sexes (see chapter 1).

For both Klein and Jones, there is an early form of femininity for girls seen in their receptive and acquisitive approach. It is through the primitive experience of oral frustration and aggression towards the feeding mother's nipple that a wish for a "more penis-like object to suck arises early" (1948:487). The mother who is initially conceived in the small female infant's mind as a part-object, is experienced as having something from father. This is an early phantasy of parental coitus. Father is

a rival for mother's milk, Jones refers to this as 'mammalingus'. Perhaps it is in this very early phase that the nipple/penis equation emerges.

With Oedipal awareness of father as a rival, the boy has his (external) penis to focus on both as a source of security and anxiety. The girl's anxiety turns more to the inside of her body², her clitoris is thought to be inferior to the boy's penis. Jones questions this too: "We should not take it too much for granted that the use of the clitoris is altogether the same thing psychologically as the use of the penis simply because they are physio-genetically homologous" (1948: 470). The girl has her mother both as the source of life and as a rival for father, so that the consequences of her sadism could be life threatening. The boy can move from mother to father as his rival, and retain his mother in a less life-threatening way. The girl's sadism is thus more restricted, it has less external space.

Behind the girl's wish that her clitoris were a penis, therefore, is the most complex network of phantasies. The aim of them is partly libidinal, but for the most part defensive – consisting of various disparate attempts to get her sadism under control and to allay the desperate anxiety it has engendered. Freud asks in this phallic phase *why there should be any flight from femininity* unless it were due to primary natural masculine strivings. In answer I should agree with Melanie Klein's conclusion that *the girl's repression of femininity springs more from her hatred and fear of her mother than from her own masculine attitude* (Jones 1935: 269), (my italics).

I am interested in what happens to the girl's (reined in or repressed) sadism towards her mother and towards her own femininity? Might this be an early precursor of the drive to renounce femininity and adopt masculinity, signalling

² Figlio, C. (2010) makes the important point that women are often theorised as having an interior space, and men, much less so. I refer to this in chapter 4.

matricidal wishes? It appears not to be safe to be a small girl who hates, fears and competes with mother. This throws up aspects of the capacity to bear sadism, and what might happen to it? Can (excessive or uncontrolled) sadism towards a maternal object be turned on oneself, and how might this manifest in relation to one's female body? This hypothetical scenario creates a form of matricide by proxy; as referred to earlier in relation to Jocasta's suicide and the role Oedipus played in it although in his case it is the dilemma of the boy and not that of the girl. I elaborate on matricidal wishes in the next chapter.

Jones is questioning of a so-called phallic phase as a developmental/ libidinal stage and preferred the term 'phallic position', which he understood more as an emotional approach (1935:271). Whereas for Freud, the girl's move from a phallic phase is propelled by disappointment (in her anatomy and her object) and ushers in the Oedipus Complex; for Jones (and Klein) the Oedipus Complex is already present albeit in an inverted form (Lampl-de Groot 1933 in Jones 1935: 270).

Forty years later Edgumbe & Burgner (1975), child psychotherapists and researchers at the Hampstead Clinic attempt to disentangle the terms phallic, oedipal and phallic-oedipal, as they noticed that these terms were used interchangeably. They attribute the conflation of a phallic child with an oedipal child in part to the residue of the historic development of psychoanalytic theory. As Freud was concerned primarily with drive development, his interest lay more in the finding of an object for drive gratification and the way in which drives towards the object changed than in various manifestations of the development of relationships through all the developmental phases. Edgumbe & Burgner make the significant

point that in spite of this observation about Freud, in his portrayal of the Oedipus complex he did specify in detail the various relationships involved more so than he did in relation to other phases (1975: 162-164). In their discussion about the early development of body representation and identifications in girls they state:

Only after a well defined self representation has been attained, can the girl, by virtue of her developing ego capacities, begin to make comparisons between her own body and the body of the male She has to come to terms with her body and that of the boy; depending upon her narcissistic organisation, level of ego development, and interaction with the important objects in her environment, she begins to a greater or lesser degree to accept her female body, a process which is not completed until the end of adolescence, if at all. Unlike the boy, the girl has no external organs to indicate to her the future capacity for achieving female adult functioning... (1975: 174).

Helene Deutsche in 1944 was mindful of penis envy as the catch all explanation for women in analysis who described a sense of lack. Presciently she located the origin of the difficulty in:

... the fact that during a period of biologic development in which the inadequacy of an organ leads to a constitutionally predetermined transformation of the active tendencies into passive ones, no ready organ exists for the latter – in other words, the little girl continues to be organless in a functional sense. Her genital trauma, with its numerous consequent manifestations, lies between the Scylla of having no penis and the Charybdis of lacking the responsiveness of the vagina (Deutsch 1944 :230).

Di Ceglie (2018), a psychiatrist and psychotherapist influential in the field of gender identity, describes the aid of metaphors in tackling difficult dilemmas confronting clinicians who work with gender diversity:

The emergence of these metaphors links the vicissitudes of atypical gender identity development to issues regarding symbolisation or symbolic thinking. Metaphors such as 'working at the edge' or 'navigating between Scylla and Charybdis' allow the professional to hold on to multiple perspectives and to maintain a certain degree of ambiguity in which the interpersonal dynamics can be experienced as rigid and deterministic. The emergence of metaphors can then be perceived by the professional with a sense of relief and freedom of thinking (2018: 5).

The metaphor of navigating between Scylla and Charybdis is commonly used when describing highly charged situations with no clear pathway. It is used here by Deutsch (1944), Di Ceglie (2018) and by Kvale (1990), albeit in different contexts. It could also stand for the challenge to navigate between masculinity and femininity.

The issue of whether femininity is constructed independently from biology remains divisive. Klein posited that an unconscious knowledge of the vagina is always there alongside heterosexual strivings from the start of life. Birksted-Breen clarifies:

"While Freud stressed the relative independence of the development of masculinity and femininity from biological sex, Melanie Klein regarded natural masculinity and femininity as negotiated through defensive impediments to its expression."

(Birksted-Breen 1996: 119). One might say that there is almost a masculine/feminine divide within psychoanalytic theory and in the way that psychoanalytic theory is developed between Freud and Klein: Freud appears to have privileged (the symbolic aspect of) phallic masculinity in the form of penis envy and Klein focused more on unconscious phantasies about the inside of mother's body. I wonder if this was not in part due to Freud being male and Klein being female, although I recognise the concreteness of this idea.

For Klein early femininity and development is necessarily infused and challenged by projective and introjective mechanisms which differ significantly from notions of biological and social factors. Breen contrasts the views of Stoller (1964) and Tyson (1982) who theorised the concepts of gender identity, core gender identity, gender role and sexual partner orientation from those of the British and French psychoanalysts. Whereas for Stoller and Tyson there is a conflict-free experience of femininity prior to the awareness of sexual difference known as “primary femininity”, there would be no such experience that is free of ambiguity, conflict and unconscious fantasy for British and French psychoanalysts.

For Klein unconscious fantasies permeate the psychic life of the human being from birth. They colour the child’s relationship to others and to her own body from the start because fantasy is the invariably present psychic representative of instinctual drives, libidinal and destructive. Unconscious fantasies relate in the first instance to the mother’s body as the seat of both male and female part objects. While Freud noted the privileged place of the penis and the envy it engenders in shaping mental structures, for Klein primary envy is directed to the maternal breast and womb and its fantasied contents. Both however rely on a notion of innate fantasy. For Freud it is not the perception of sexual difference in itself that is meaningful, but the primal fantasy of castration which gives meaning to the perception and propels development along masculine and feminine lines. (Birksted-Breen 1996: 121).

Lacan followed Freud in separating psychoanalysis from biology and in not assuming heterosexual drive. Language and logic construct the individual through mental representation. For Lacan the castration complex has a central place in the unconscious as that which advances masculine or feminine development (Bailey 2009: 146-152). For Lacan, the father’s role in the Oedipus complex is more

complex (than Freud's) in that it is not that of a real object (father or penis), although in order to embody castration he must intervene as a real object albeit with a known signifier. Lacan refers to the father as symbolic and as a metaphor, who substitutes the child's first object to be symbolised – the mother. The imagined object that fulfils mother's desire is the Phallus, an imaginary object lost through the symbolic metaphoric process. The child (boy or girl) 'manages' the move away from enmeshment with mother via the paternal metaphor, which requires substitutes and symbols and moves away from concrete thinking or sexual realities, to acceptance that they haven't got the Phallus. (Bailly 2009, 2018). In France Freudian notions of phallic monism and feminine development emanating from a discovery of lack are popular not just amongst Lacanians.

In the United States (particularly in the Relational School of Psychoanalysis) there has been a lot of interest in the topic of female development and sexuality and generally biological influences are given importance. There have been varied approaches to the meaning of penis-envy - ranging from it being thought of as defensive, as a metaphor for other narcissistic injuries, as an obstacle to developing femininity or as aiding it in a crucial way.

The differences in psychoanalytic conceptualisations of developing gender identity amongst clinicians and theoreticians are important and difficult to generalise. There are marked differences between thinking about gender through the lens of unconscious phantasy, social constructionism, phenomenological experience, conscious psychological experience and biological essentialism. The notion of

psychic reality³ in psychoanalysis has a very different meaning to more cognitive ways of thinking. One aspect that can divide conceptual approaches is that of unconscious processes constantly at play.

An early sense of femininity for Stoller meant that representations of genital femaleness begin early for girls. Others have taken up the different kinds of genital anxieties (Bernstein 1990), such as loss of the female genitals that girls might experience (Mayer 1985) as different to the boy's experience of castration anxiety. Klein located these early anxieties more in the realm of phantasy than perception, the girls fear of retaliation to the inside of her body as a result of her wish to invade, spoil and rob the contents of her mother's body. Castration anxiety here is linked to fears of punishment for having Oedipal wishes.

If one extends notions of penis envy and castration anxiety into the realm of unconscious phantasy, they take on a less concrete meaning in relation to maleness and femaleness. They manifest more in terms of a symbolic lack: either a wish for the phallus or a fear of losing it. Clearly 'having it' is associated with potency and masculinity and 'losing it' is associated with emasculation. What it might mean psychoanalytically to desire it, have it and fear losing it can have a multitude of meanings. One of the complexities is *what it means to desire and how the nature of desire takes shape in relation to femininity and masculinity*. This is of central interest to me as it enters the territory of concrete and symbolic thinking, as well as the orienting of sexuality from a female or male stance. For the trans man, it can be

³ This concept has been questioned since its inception by Freud. Baraitser (2017) discusses its 'collapse as a useful category' and welcomes new transdisciplinary applications to its meaning. (2017: 35-37).

extremely validating to be related to as male socially and sexually, and distressing to be 'misgendered', as this can feel tantamount to not being seen or recognised as who one feels one is.

Feminine Repudiation

In his paper 'Analysis Terminable and Interminable' (1937), written towards the end of Freud's life, he refers to two insurmountable difficulties in bringing an analysis to an end: penis envy in women and a passive attitude in men. Although these obstacles point to castration anxiety, Freud saw this manifesting differently for both sexes. For men this might appear in the form of exaggerated masculinity, the attempt to hide or repress any hint of passivity or femininity; for women during the phallic phase there is a leaning towards masculinity that precedes the establishment of femininity. How and to what degree femininity is established is pivotal as it requires a successful repression of the wish for a penis which transfers into the wish for a baby. If this is unsuccessful, the wish remains active or is enacted by becoming a 'phallic woman'. Importantly Freud stated that: "It is strange, however, how often we find that the wish for masculinity has been retained in the unconscious and, from out of its state of repression, exercises a disturbing influence." (Freud 1937: 251).

Freud goes on to explain that it is the attitude to the opposite sex that has been repressed, and that it was Fleiss who brought this idea to his attention. Fleiss saw the "... antithesis between the sexes as the true cause and primal motive force of repression" (Freud 1937: 251). By explaining it biologically rather than psychologically Freud moves away from Fleiss' ideas and from sexualizing

repression. In Mitchell's discussion of the question of femininity in relation to psychoanalytic theory, she observes that in the 1890's Freud: "... came very close to sexualizing repression ..." (1986: 390): in Freud's theory libido remains 'masculine' (in spite of Freud stating the contrary) and rather than repression being feminine (and in that sense given a sex), femininity is repudiated by both sexes.

Steiner (2018a) examines Freud's obstacles to progress in analysis further by looking at why the receptive feminine position undergoes such forceful repudiation. He contends that the capacity to adopt feminine receptivity in its broad sense requires a relinquishment of (the defensive use of) omnipotent phallic identification. Steiner adopts a Kleinian approach and acknowledges the contribution made by Klein in her understanding of envious destructive forces from the beginning of life (Klein 1957: 176). Steiner attempts to understand the familiar and obstinate denigration of femininity both in the culture and analytically as emanating from an earlier idealized femininity that is symbolized by the good maternal breast; this is in contrast with envious hatred which also directs itself to the mother's breast initially. The envy can be generated in the infant's mind when mother is perceived to be taken to other places, other people (father) or other thoughts: when she is part of a generative couple. This is Lacan's 'other', and Bion's attack on linking. Steiner states:

Envious attacks can succeed in destroying the creative link by a focus on either the male or the female component of the couple, but *it does seem that images that involve the feminine receptive component of the link are particularly valued and particularly provocative of hatred*. It is not clear why this should be so or even if it only appears to be so because envy of true

creative masculinity may be hidden beneath a desire for phallic omnipotence, which is perhaps itself an envious attack. Nevertheless, with her capacity for fecundity, for her role in the care and feeding of the infant, and perhaps in part because of her vulnerability, *it is the woman, particularly her breast and her genital, who so often seem to bear the brunt of attacks*, and in my view it is this that leads to the repudiation of femininity in favour of phallic masculinity (my italics); (Steiner 2018a: 5).

Following this observation Steiner throws new light on Freud's words in 'Analysis Terminable and Interminable' by replacing unconscious phantasy with normal female development. Steiner re-interprets Freud's postulation of a "struggle against a passive or feminine attitude" as "a struggle against the adoption of a receptive position" for both men and women (Steiner 2018a: 7).

Freud's thinking about penis-envy has subsequently been converted into phallus envy, and thus no longer confined to the concrete wish for a penis (Lacan 1958, Birksted-Breen 1996). Horney was prescient in her thinking on this. The phallus (although a male symbol) expands to the symbolic meaning of what masculinity stands for: authority, power, the seduction of mother and the delusion of magical omnipotence. It can be thought of as a state of mind and can manifest as mania. Manic omnipotence as a state of mind or behaviour is an enactment of the phantasy of a magical phallus that bestows secret power and has no limits.

Birksted-Breen distinguished phallic masculinity (imbued with omnipotence) and the kind of masculinity that can acknowledge relationships and can appreciate femininity that she termed "penis-as-link" (1996a). The more omnipotent form of masculinity is turned to defensively. I think that this can be seen as 'masculinity as a

masquerade' in a similar way to Riviere's ideas about womanliness as a masquerade (1929). The adoption of either extreme or parodied masculinity or femininity then has a pseudo quality not unlike Bick's notion of a second skin, a carapace or external shield worn to protect an inner vulnerability (1968). There are many institutions that facilitate the formation of this external carapace whether it is the need to build up the body in the gym, the alteration of the body via surgery, and hormones that enhance or decrease Oestrogen or Progesterone. This throws into question the interplay of inborn and inherent masculinity or femininity usually assigned to chromosomes (sex at birth), the gender I feel myself to be, the gender I wish myself to be and the industries that support potential changes. I expand on this in chapter 4.

Klein described the small infant's phantasies as being filled with violence that manifested in biting, tearing, devouring and annihilating the breast accompanied by the simultaneous fear that the breast will retaliate with equal measures of violence. This is the nature of persecutory anxiety:

As urethral and anal-sadistic impulses gain in strength, the infant in his mind attacks the breast with poisonous urine and explosive faeces, and therefore expects it to be poisonous and explosive towards him (Klein 1957:63).

As the nipple is the gateway to the breast, the infant's aggression can be directed towards it. Steiner conjectures that the biting of the nipple can stimulate phantasies of a breast that has been damaged and mutilated that can then underlie further phantasies of a castrated and mutilated female genital susceptible to intrusions that are hostile (2018a: 10). For trans men the elective removal of breasts in the form of mastectomy is a reality, which may be (speculatively) linked

to (unconscious) phantasies of damage to or retaliation from the maternal breast.

The defensive component in this schematic notion is necessarily unconscious.

Kohon (2018) offers a different angle to Klein's phantasies of mutilation by questioning or suggesting that "What there is in the unconscious is *a danger and a threat* for the man, and *a desire and an envy* for the woman, and not – as is assumed – an overvalued penis and an undervalued vagina". (2018: 282). Kohon moves away from phantasies of body parts to emotional states of mind.

Benjamin (2004), influenced by Christiansen (1993) and in response to Freud's (1933) approach to femininity, objects to the idea that femininity is a pre-existing "thing" that the male psyche repudiates, but sees it more as constructed by it. She sees the boy's need to defend a passive position, in relation to the Oedipal father, as an active projection into his sister or into the girl. The girl, or daughter then becomes 'the Oedipal boy' (as Anna Freud was for her father). This Oedipal girl/boy holds the passivity in relation to father, and also holds excess tension, in the form of the feminine container of excess sexual excitement. Benjamin contends that this *containing body* is often associated with women or the feminine position, it is what the expulsion of unwanted femininity creates. This is different but relevant to my area of exploration that focusses on the expulsion of femininity in and from the daughter, as an unwished for allegiance with femininity and motherhood in the form of matricidal wishes, that I focus on in Chapter 3.

Female Castration Anxiety

Castration anxiety is a central aspect of the Oedipus complex and conflict: the small boy fears that he will be subjected to punishment by his father, for having wishes and desires for his mother. Erotic desires towards father are also fodder for castration fears and raise anxieties about femininity and homosexuality. The understanding of castration anxiety in boys is superficially more straightforward, not least because there is an actual part of the body that the small boy fears losing (historically castration actually referred to the testicles; I expand on this in chapter 4). This of course implies a more concrete or active take on castration anxiety, for which the unconscious meaning is much more than the actual loss of the penis.

For girls and women, the story and prospect of understanding is inevitably different. Freud viewed the small girl who notices that her brother or father have something that she does not, *as already castrated*. They *have it* and she and her mother *do not*. Freud postulated that the clitoris replaced the penis, but this theory has been met with much criticism. The lack of a penis, for Freud, unleashes penis envy, which is eventually compensated for by the wish for a baby with father, then transferred onto another man thus providing the girl/woman with the optimal heterosexual solution. Freud saw the girl's plight in terms of *not having what the male has*. Subsequently theories have been put forward about the conscious and unconscious fears, anxieties and phantasies that emerge from having female genitals (Horney 1924, 1926; Jones 1927, Galenson & Roiphe 1976, Mayer 1985, Parens 1990, Bernstein 1990). A less obviously visible part of the body compared to that of the male body that can unleash fears or phantasies of past or future

intrusion and damage to the inside of the body. The fear of damage that has already been inflicted is associated with (forbidden) Oedipal wishes that can in turn fuel the formation of the superego.

Both 'castration anxiety' and its ally 'penis envy' (which came first?) can be understood and conceptualised much more broadly than their overt, conscious and concrete meanings. The multi-faceted experience of a lack, can propel the psychological impulse to acquire or possess an illusory penis or phallus whether in phantasy or reality. This of course is significant in the terrain of gender variance and transgender. It would be far too simplistic to attempt to understand the motives of a trans man wishing to be male, or feeling that he is and always has been male (albeit born female), through the psychic experience or phantasies of penis envy or (female) castration anxiety. Nonetheless, I am interested in the possibility of attempting to see how these constitutive psychic experiences manifest in the fragile and complex territory of gender variance.

Dorsey (1996) expands on the two meanings of castration anxiety:

One is the fear of damage to the female genital and the other is fear of loss of an illusory phallus. The fantasy of having an illusory penis is a compromise formation that serves a defensive function against an image of the female as a mutilated male. This image, like a symptom, both defends against and expresses the ambivalence about recognition of the sexual difference. Later this image may serve additional functions during the phase of development traditionally referred to as phallic, when the child is in transition from dyadic to triadic relationships (1996: 284).

Dorsey discusses the difficulty of applying the term 'castration anxiety' to women and advocates for use of the term 'feminine genital anxiety'. She feels that much of psychoanalytic literature has been almost lumbered with misleading terminology that has been carried through the decades in spite of theories about specific female genital anxiety advocated by Horney (1924, 1926) and many theoreticians and clinicians since then. Dorsey concurs with other writers (Parens 1990, Tyson 1982, Wilkinson 1993, Mayer 1985) on the inaccuracy of the application of the 'phallic phase' to girls.

As Tyson put it:

A girl's reaction to the discovery of the genital differences has been referred to throughout the psychoanalytic literature as "castration anxiety", "castration reaction", or "castration complex". This term, introduced by Abraham in 1920, was borrowed from the psychology of males and is a highly unsatisfactory one (1982: 73).

Dorsey acknowledges that the concept of penis envy subsumes multiple psychoanalytic meanings, particularly with the expansion in thinking about female psychology following the women's liberation movement in the States. In spite of this she feels, writing in 1996, that the terminology is outdated and misleading and she advocates a revision of the term 'phallic' as a phase of transition in boys and girls. She, like Tyson, prefers 'infantile genital phase' as a more accurate description than 'phallic' as applied to girls (1996: 289). Tyson suggests 'infantile gender organization' as a replacement for 'phallic phase', not least because it is gender-neutral. It is as if Tyson and Dorsey are saying that the lack of female terminology adds insult to injury and leaves the female body as a permanently poor relation

without its own (female) genital language. To my mind the word 'castration' is so loaded with symbolic meaning that it is not only equally applicable to boys and girls but the meaning for girls is multi-faceted as Horney pointed out. She understood the girl's fear of injury to her genital as a concrete exchange and identification with the boy's experience.

Another renaming within the general sphere of the girl's Oedipal development includes Wilkinson's "genital dress rehearsal":

The transition turns on the girl's paradoxical creation of her feminine sexuality through a playful phallic identification that is distinct from penis envy. The phallic identification serves a complementary rather than a compensatory function, which the girl employs temporarily to help establish her femininity" (1993: 313).

Wilkinson rethinks the girl's inability to use the phallus (penis envy) as a receptacle for her overwhelming sexuality (1993: 325); and by doing this demarcates the difference between a phallic identification that can be embedded in feminine identification and an identification that has a defensive function (Dorsey 1996: 289).

Mayer elaborates, through clinical material, on girls' fantasies of boys who once had a female genital but were then "closed up" as punishment. This provides an intriguing mirroring of the girl's plight displaced onto boys. It also denotes the ideal state of bisexual inclusiveness (Fast 1979) or as Kubie put it 'The drive to become both sexes' (1974). Dorsey, along with Fast (1979) attributes these (idealised and all inclusive) wishes to the struggle to come to terms with being one sex and not the

other, all part of the difficult transition from dyadic to triadic relationships (1996:290). This struggle from two to three follows the previous developmental phase of one (being merged with the object) to two: the early ideal state of primary narcissism that precedes object relating and awareness of the other. In my first chapter I have emphasised the complexity in the capacity to renunciate the sex that one is not (the recognition of the differences between the sexes) for the development or establishing of a gender identity. How this recognition is absorbed and processed psychologically, both consciously and unconsciously, is in my view bound to have a significant impact on the way the mind shapes a sense of gender whether the natal body complies or not.

Female homosexuality revisited

The general understanding of homosexuality within psychoanalysis has been found to be lacking and pathologising, both towards male and female homosexuality, although there have been attempts by psychoanalytic organisations such as the British Psychoanalytic Council to redress this in more recent years. Magee & Miller (1992) explored psychoanalytic views of female homosexuality and pointed out that a lot of analytic thinking has been based on polarized categories such as: activity/passivity, male/female, manifest/latent, homosexual/heterosexual, secondary process/ primary process (1992:68). They imply that this kind of polarisation can limit a more nuanced understanding of female sexuality and relationships, and poignantly state that “To know that the patient is in homosexual relationships or identifies herself as homosexual is to know nothing about her specific developmental issues, the nature of her sexual experience, or her conflicts,

nor about the quality of her external or internal object relations” (1992: 85).

Aspects of what I am calling a polarising mentality, were attributed to Freud who worked within a biological-medical nineteenth-century tradition that laid stress on “great natural polarities or dichotomies” (Schafer 1974, in Magee and Miller 1992). This vision of polarity encouraged the tendency to carry over traits from one sexual category to another, although Freud made attempts not to. He revised the Three Essays on the Theory of Sexuality (1905) as well as his writing on female sexual development (1925, 1931, 1933).

As psychoanalytic theory moved on (from drive theory to ego psychology and object relations), it was Stoller (1985) and Marmor (1980) who emphasised the multideterminant nature of any psychic phenomenon (1992: 71) away from the more pervasive phallogentric assumptions that Magee and Miller found, through their literature review, to have traversed theoretical orientations and informed formulations. More specifically relevant to my research is one of the phallogentric assumptions in the psychoanalytic literature that they pointed out: “*A woman who loves a woman must be a man, or be like a man, or must wish to be a man*” (1992: 72). This assumption might be pertinent to some trans men, who wish to be men or feel that they are men. In the interviews that I discuss in chapter 7, most of the interviewees identified as female and gay before moving to other gender identities that culminated in identifying as trans men. There was a clear wish expressed by them not to remain identified (to themselves and others) as lesbians which I comprehend as a repudiation of femininity, female sexuality and femaleness, that was at odds with their gender identification. Although Magee and Miller writing in

1992 read the assumption above as a typical and representative phallogentric assumption, in 2021 and in relation to trans men, it reads differently. The old-fashioned paradigm becomes re-modelled in relation to transgender identity, which could be thought of as a reparative and adaptive sexual and gender identity.

Elise (2002) emphasises the centrality of the mother as an object of desire for the daughter, in the earliest mother-infant bond. She points out that as the mother is the first object of desire; from the outset there is homoerotic desire, that is not always validated by the mother. When it is not, it remains as unrecognised desire. She posits the idea of replacing the “negative oedipal complex” in girls, with “the primary maternal Oedipal situation” (2002: 209).

The unrecognised homoerotic desire from mother to daughter, can leave the daughter with a sense that her desire is unrequited, that she does not have what mother wants or needs, whether this is genitally or emotionally. In my interviewees, I noticed that identifying as a trans man superseded identifying as a lesbian. Female to female desire was rejected, as not enough, not viable and not wanted. Elise has suggested (2002: 225) that the early homoerotic feelings between mother and daughter can stir up ambivalent maternal desire. Her writing corroborates the potential for complexity in female sexual desire.

Castration or Murder

Embedded in the Oedipus Complex is the struggle to find a mature standing in life in relation to one’s parents (as internalised through phantasy). This is never completed or an end in itself but an endeavour subject to oscillations throughout

life. There have been theories put forward about the need (for the male child) to metaphorically murder his father in order to be able to free himself from the Oedipal shackles and form his own independent male identity.

Loewald has written about this form of parricide, which not only kills the father or parents but kills parental authority and parents as libidinal objects and subsequently requires atonement (perhaps also 'at-one-ment') and metamorphosis. The atonement for the guilt of the crime then shapes a mature superego through mourning, that mourning yields the possibility of non-incestuous object relationships. This form of psychic murder brings about the potential for an internal re-structuring of Oedipal object relations so that less (external and concrete) enactment takes place. (1979: 757-758).

This so-called destruction of the parents is a form of emancipation from their authority and libidinal hold. Loewald is advocating much more than a repression of the Oedipal conflict:

... repression of the complex is an unconscious evasion of the emancipatory murder of the parents, and a way of preserving infantile libidinal-dependant ties with them. Parricide is carried out, instead of being sidestepped, in that dual activity in which aspects of oedipal relations are transformed into ego-superego relations (internalization), and other aspects are, qua relations with external objects, restructured in such a way that the incestuous character of object relations gives way to novel forms of object choice. These novel object choices are under the influence of those internalizations. Insofar as human beings strive for emancipation and individuation as well as for object love, parricide – on the plane of psychic action - is a developmental necessity. (1979: 758).

Perelberg (2015) has written about the distinction between the dead father and the murdered father in relation to the internalised paternal function and how this influences development. She elaborates on the distinction between murdered and dead father, initially made by Jacques Hassoun (1996). She states that whereas the 'story' of Oedipus encapsulates the universal infantile phantasy of patricide, it is the Oedipus 'complex' which ushers in the dead father as the symbolic third.

The shift from the murdered father to the dead father represents the attempt to regulate desire and institute the sacrifice of sexuality. From then on, certain categories of kin are excluded from the field of sexual exchange, a fact that constitutes a crucial marker of the beginnings of culture. (2015: 12).

The murdered father denotes an omnipotent narcissistic phantasy of replacing and becoming the father and hence the phallus; in this phantasized version the father stands for the possessor of all women who tyrannizes his sons. This is a dyadic world of anal sadism. In contrast to this version of the father, the dead father is more powerful than the real father as he constitutes both the symbolic order and the institution of the law that forms the paternal function. Perelberg sees the transition from the murdered father to the dead father as an important developmental move and achievement necessary in order to allow entry into the cultural and social realm as it regulates human aggression and desire, sublimates sexuality and institutes the incest taboo.

Taking into account the writing of Loewald and Perelberg on (psychic) patricide as a necessary developmental move in relation to the paternal function for boys, I will

introduce the idea of matricide as the potential killing off of femaleness and the maternal function for girls.

A trans man was born female, and hence came into the world with a female body. At a certain stage of development, which can be very early on during infancy or during adolescence and young adulthood, the wish to identify as male and the feeling of 'being male' has emerged and taken hold. I'm aware that experiences of gender identity are individual, and I am not attempting to generalise or simplistically reduce the individual and varied experiences of trans men. Inherent in the experience of feeling male and wishing to adopt a male identity (which may or may not involve testosterone, breast binding, hysterectomy, mastectomy, phalloplasty) there could be, I suggest, a (murderous) wish to move away and relinquish femaleness and femininity. I am interested in the psychic aspects of this wish and how it might relate to a breaking or severing of the maternal tie to one's first object, usually the mother. I suggest there might not only be a symbolic killing off of the maternal tie through transitioning to a male gender identity, but an actual concrete 'murder' of female sexuality in oneself as a displaced form of matricide.

In female to male transition, there is also a form of patricide in 'becoming the father', which has Oedipal connotations: by 'becoming the father' envy and rivalry are sidestepped (Symington's magical solution and principle of omission). I ask speculatively whether the trans man's identity might condense a form of patricide and matricide as combined *in the body*? There is a move from psyche to soma, so in a sense it is psycho-somatic, and hence concretely enacted.

The stance or identity of being 'gender neutral', dissolves an allegiance to one sex or the other, and other gender identities that lie in between. Transition from male to female can involve (surgical) castration, and the transition from female to male can involve a hysterectomy⁴ and mastectomy. Trans women and men sometimes (and by no means always) have the wish to remove their reproductive organs as if the penis, testicles, uterus and breasts are the ultimate stigmas of the unwanted gender and sex as manifested in the body, and also the signifiers of reproduction. The excision of seminal or reproductive parts of the body can be seen as a move away from the body as reproductive, an insurance that the birth sex will not reproduce itself, and will not reproduce via childbirth. There are a number of trans men⁵ who keep their reproductive organs and have given birth to children.

⁴ I discuss this in my findings chapter in relation to an interviewee, Casper.

⁵ Freddy McConnell, who wished to be named as his child's father or parent in the birth certificate, appealed against the decision made by a High Court Judge that a person who carries and gives birth to a baby is legally a mother (2020).

Chapter 3

Patricide, Matricide, Bisexuality and Mourning

The Oedipus Complex as unveiled by Freud, interpreting Sophocles' play, has at its centre a murder of a father by his son, namely an act of patricide. The much debated and contested daughter's version of navigating the (classical) Oedipus Complex is to manage *the move from mother to father and then onto a male equivalent. The move from mother or removal of mother psychically might require an equivalent to the son's act of patricide in the form of matricide.* How a girl or daughter manages her detachment or dis-identification from her mother is no small psychological feat and can take many forms in relation to her attitude to femaleness and femininity: *both towards her mother and within or towards herself.*

I am interested in how this takes shape psychologically and physically in the area of gender identity, particularly when a natal female might wish to 'kill off' or disavow her female body, and identify as male. I suggest that the development of hatred towards, motivation to get rid of, sense of incongruence towards or disavowal of one's female body and femininity may be linked to the psychic location of the mother in the girl or daughter's mind: rather than kill the mother through the actual act of matricide the daughter may opt to kill off her own female identity, which symbolically represents the mother within herself in the form of psychic matricide and gender transition.

By getting rid of femaleness or femininity the girl or daughter can dis-identify from mother, not just psychically but physically too. The bodily tie of mother and daughter is then ruptured: I am not the same as you, I never really was, I am un-female and I renounce my tie with the female body that gave birth to me. *I am other than my mother psychically, physically and sexually.* As separations go, this is an extreme form of severance from the mother and all that she symbolises both consciously and unconsciously, and can be conceptualised as a murderous or matricidal rupture of self and object.

This is a bold theoretical leap to make and is not a pronouncement on anyone's specific or individual struggle with their gender identity. It is an attempt to explore and develop the potential to understand aspects of what might constitute unconscious drives within the complex territory of gender identity and identification, specifically that of trans men, for whom femaleness is usually an unwanted and often disputed aspect of their psychic or bodily history.

In this chapter I explore the psychoanalytic significance of matricide both in terms of my own theorising and the theories of others (Jacobs 2010, Weiland 2000 and Irigaray 1991). I reference Orestes' act of matricide and Athena's decision to absolve him of this act of murder as the beginning of a patriarchal trend that leaves matriarchy unacknowledged. I include thinking about the primal scene and early bisexuality. I consider the role of the father through various lenses: enabling the daughter to separate from her mother, his own relationship to masculinity and aggression and the mother's phallic ambition. I bring in two cases (from psychoanalytic literature) of female children in psychotherapy that demonstrate

their poignant struggles with developing a gender identity. I include the importance of early bodily experience, both the primitive, sensory and phantasy aspects of this.

Orestes & Matricide

The Oresteian myth is a better fit than the Oedipal myth here. 'The Oresteia', Aeschylus' trilogy, conveys the murder of Agamemnon by his wife Clytemnestra followed by the murder of Clytemnestra along with her lover Aegisthus by their son Orestes.

Agamemnon, the first of the three plays, is about the King of Mycenae, Agamemnon, returning from the Trojan War. Clytemnestra, his wife, has been planning to kill him. She desires his death so as to avenge the sacrifice of her adolescent daughter Iphigenia before he set off to war, to clear the way for her commandeering the crown, and to enable her to be public about her lover Aegisthus. Clytemnestra murders both Agamemnon and Cassandra, the woman (slave and mistress) that he returns from the Trojan War with.

In the second play, 'The Libation Bearers', Orestes, who in infancy had been banished from Argos by his mother out of fear that he would avenge the death of his father, returns after some years to indeed avenge his father's murder following an order from the oracle of Apollo, son of Zeus. Orestes reunites with his sister Electra, and influenced by the Chorus, they plan to kill both Clytemnestra and Aegisthus. Orestes carries out these killings, and he is then pursued by the Furies, maternal goddesses that seek revenge for the murder of the mother, and so he flees the palace in a mad state.

In 'The Eumenides', the third and final play, justice and social order are instituted. Apollo intercepts the hounding of Orestes by the Furies and he escapes to Athens where he pleads to the goddess Athena who presides over a trial for him. She supervises this trial made up of twelve Athenian citizens, which introduces the first court room trial. Athena determines that Orestes will not be killed. Apollo steps in to tell the truth about pushing Orestes to kill his mother thus absolving Orestes of moral responsibility. The endless theme of revenge through killing comes to an end with a new form of justice by trial that is introduced by Athena. It also sets in motion the trumping of matriarchal law by patriarchal law.

There are aspects of Athena's role in all of this that have subsequently been questioned in relation to her absolving Orestes along patriarchal laws, that she identified with in her own state of so called 'motherlessness'. Athena's birth came about through Zeus swallowing Athena's pregnant mother, Metis, who was raped by him. Metis then imparted her knowledge and wisdom to Zeus "From inside his belly" (Hesiod 1973: 52). Following excruciating pains, the head of Zeus split open and Athena was born. Jacobs (2010) considers the incorporation and disappearance of Metis as highly symbolic and as the hidden matricide in The Oresteia, in which Athena defends Orestes commitment to patriarchal law as she claims it has been her law too.

The Metis story is a matricidal myth that is inextricably related to the *Oresteia*, yet is only visible in the latter through the figure of Athena, whose motherless status functions to secure her loyalty to Orestes. In this way, the Oresteian myth conceals within it the story of the incorporation of Metis. Yet, the myth, like the dream, reveals the traces of its censoring process

through distortions, blanks and alterations that, if analysed, can lead to the reconstruction of the original concealed element (Jacobs 2010: 25).

Jacobs links the two matricidal myths and contends that matricide remains untheorized and therefore is unable to bring forth its underlying law, that of a maternal structuring function. Jacobs is curious and questions why matricide, unlike patricide, has remained an elusive concept within psychoanalysis, and whether a different theoretical constellation might spring from an investigation into what matricide means and what its theoretical omission has meant for psychoanalytic theory (2010: 21). Her investigation opens important questions in relation to presumed and inherited theoretical foundations that can become dogma.

It is important to bear in mind the relationship to the metaphoric aspect of the myth, or of all myths. It may not be quite right to think of Athena as motherless, as she did have a mother, Metis, albeit a mother that was incorporated cannibalistically by Zeus. This reversed the experience of biological birth, as Zeus appropriates Athena into himself, thus stealing from Metis her natural maternal position. One could say that matriarchy is cannibalistically incorporated by patriarchy. There is a risk at times, in some interpretations of myth, that the metaphor of the myth can be lost or replaced by a notion of something more concrete and real. It has been suggested (Freeman Sharpe 1940) that metaphor grows out of real and concrete bodily experiences that have relocated from the physical to the psychical.

Irigaray, in her discussion of The Oresteia, states that the matricidal son has to be saved from madness (unlike his sister Electra) so as to establish the patriarchal order. The Furies who pursue Orestes for killing his mother are described as: "... women in revolt, rising up like revolutionary hysterics against the patriarchal power in the process of being established". Irigaray sees the mother's murder lead not only to the non-punishment of the son but also to: "... the burial of the madness of women – and the burial of women in madness – and the advent of the image of the virgin goddess, born of the father and obedient to his law in forsaking the mother." (Irigaray as cited in Whitford 1991: 37-38).

The act of matricide is open to many interpretations, but concretely it is the act of killing one's mother. In the case of Orestes, he was spurred on by Apollo who could be seen as representing Orestes' harsh superego: encouraging him to right a wrong. If one applies the Oedipus complex to Orestes, then one can view his act as *one of correction*: his mother denied him the opportunity to 'kill his father' (whether this is a psychic killing or not). There is much loss in the story: Clytemnestra loses her husband to war; her daughter's life is sacrificed and she then is lost; Orestes loses his father to war and then his mother to her lover Aegisthus; Orestes then loses his father, Agamemnon, through his murder by Clytemnestra. Both Orestes and Electra lose their sister, father and then their mother and her lover. When Orestes kills his mother and her lover, one could say that the mother's lover stands for the father, so in that sense *it is an act of matricide and of (Oedipal) patricide once removed*. Although the chain of killing in order to avenge a death, ceases when Orestes is tried in Athens, *the chain of patriarchy triumphing over matriarchy* as Jacobs (2010)

points out is set in motion through Athena's allegiance and identification with Orestes' 'right' to avenge his father's death. Orestes is described as being in a state of guilt and insanity after the act of killing his mother and her lover, so not the guiltless conscience of a psychopathic act.

This brings into focus the concrete aspect of murder as an enactment of a wish to physically eradicate the object, although of course this does not get rid of the object psychically. The excision of femininity and femaleness from the body, that links with the maternal object in identification, might be an underlying unconscious factor in some cases of gender transition; as might be the wish for patriarchal identification to triumph over matriarchal identification.

Matricide by proxy

Electra plays an interesting role in the unfolding narrative. She and Apollo have a vested interest in Clytemnestra's murder. As the Oedipal daughter she has been deprived of her actual father's presence since he went to war, and has had to contend with a substitute father in Clytemnestra's lover Aegisthus. One could question why she wishes her mother dead? She might be cross with her mother for avenging the death and sacrifice by Agamemnon of her sister Iphigenia? Did she have her own murderous sibling rivalry feelings towards her sister, enacted by her father? Her father's sacrifice of her sister led to her being sisterless (she had one other sister, Chrysothemis), fatherless and eventually motherless. The focus on Orestes' act of matricide leaves Electra absolved of conspiring to plot this murder with her brother. It strikes me that Electra *commits matricide by proxy*.

The body can become the site of *committing a form of matricide by proxy*: through killing off a tie to a (maternal) female body both in relation to one's actual mother and to the symbolic and concrete aspect of femaleness within a natal body. The phantasy in this severance is that of cutting off the female mother psychically by concretely cutting off femaleness in the body. Surgical intervention can sometimes denote aggression towards the body, although it can also be a wished-for bodily alignment. I am speculating about the unconscious aggression that might underlie aspects of transition from one gender to another, particularly in relation to femaleness and the mother/daughter bond.

Empire of the phallus

Irigaray's writing can be seen as a critique of patriarchy, in her scholarly and sometimes esoteric response to the pervasive underpinning of patriarchy in western culture, aspects of psychoanalytic and philosophical discourse, the difference between the sexes, and daughters and mothers amongst other themes. Her main (feminist) domain is that of what it means to be a woman as a subject that is not subordinate to the continuation (or dominant paradigm) of the patriarchal law of the father (whether this is represented by Zeus, Freud or Lacan). One might question whether for some trans men, there is a reversed wish not to be subordinate to the matriarchal law of the mother.

In 'The poverty of psychoanalysis' she writes:

The empire of the phallus – the Phallus – is necessitated by the establishment of a society based upon patriarchal *power* in which the natural-maternal power to give birth comes to be seen as the phallic

attribute of god-men, and establishes a new order that has to *appear* natural. ...We can still read of the upheavals this brought about in the organisation of the imaginary or the symbolic in the Greek myths and tragedies ... From that point on, the values which subtend its articulation and deployment are isomorphic with the male imaginary. (Irigaray in Whitford 1991: 96).

In this paper she contends that in a monosexual economy bisexuality is not really a true possibility. Irigaray is interested in the maternal body anatomically, symbolically, historically and politically. At a conference on 'Women and madness' in Montreal in 1981 she presented her paper 'The bodily encounter with the mother'. In this paper she contends that Western culture is founded on matricide and not on patricide as was suggested in 'Totem and Taboo' by Freud. Her reading of the Oresteia is that of the establishment of patriarchy through the sacrifice of the mother (Clytemnestra) and her daughters (Iphigenia and Electra) and the acquittal of the matricidal son Orestes who marks the new order of justice through trial. She claims that the emphasis on Oedipus and castration hides the severance or cutting of the tie to mother through the umbilical cord (perhaps this can be thought of as the original castration/separation). She sees the cultural taboo or silencing of the relationship with mother as unleashing monstrous phantasies of women threatening madness and death. These primitive and often projected phantasies belong to the male imaginary and can subject women to a form of cultural hatred (1991: 25).

It is daughters that Irigaray warns against the hatred of their mothers or against repeating the murder of the mother. Men need to move away from their role of 'guardians of the body' and find a capacity to translate the primitive relation to the mother's body into words and symbolic representations. Women need to learn how to speak about their relations to each other so a new identity within the symbolic order can be created (1991: 26).

Irigaray cites the acquittal of Orestes as the matricidal son, and I suggest that in some cases, within the drive to identify as a trans man, there is *an embedded and equivalent acquittal of the matricidal daughter*. By enrolling into a masculine and male world through gender identity the matricidal wish, whether conscious or unconscious is bypassed and hence acquitted. The acquittal, however can be displaced into the acquisition of a different gender identity, corroborated by bodily changes. Whereas Orestes did actually kill his mother, albeit within the myth, my conjectures relate to unconscious drives.

The Primal Scene/ We are not self-made

The story of Athena's birth from the head of her father Zeus, rather than from the womb of her mother, Metis, evokes notions of a birth that bypasses parental intercourse or the primal scene in the form of a parthenogenic birth. Within psychoanalytic theory much has been written about how the primal scene locates itself in the mind either as something that was witnessed in reality or as a phantasy. Freud moved in his thinking from the former to the latter possibility in what his patients spoke about. The primal scene has enormous symbolic significance in relation to how we situate our parents in our minds in the sexual act that conceived

us. It addresses the universal childhood question of where we come from. It can be a scene that is both omnipresent and not particularly welcomed into the mind not least because it can be hard to link parents as an excluding sexual couple.

Bion developed the notion of our tendency to *attack links*, when there is a resistance to the coming together of two things particularly when this link generates feelings of rage at the exclusion. Although Britton brought in the idea of the (Oedipal) missing link, Bion wrote about the attack of or on the link, namely a wish to attack the relationship between objects (Bion:1959, 1984). More schematically this could manifest in a child's perception of their mother's relationship not only with an actual other sometimes represented by the phallus, but also with her depression or narcissism: an experience of mother as preoccupied or taken away. Father can also be perceived as preoccupied with his work (whether it is creative or not), his wife, his depression or alcoholism. It is an experience that can render the parental object as dead or absent to the child (Green: 1983).

Klein attached much importance to the phantasy of the combined parent figure in the infant's mind: a phantasy with varying degrees of aggression and monstrosity (Klein: 1952). According to Meltzer, Klein 'discovered' it through her analysis of Richard. The breast-and-nipple is the most primitive version of the means of access and the container; this then develops into the phantasy of mother and father sexually combined which is open to a plethora of meanings. For Meltzer, sexuality structures identity, not in the physical action but in the unconscious phantasy that is always there taking the form of a primal scene and hence denoting the combined object (Harris Williams: 2009).

There are differing schools of thought about the psychic incorporation of the primal scene. One angle of Klein's combined parent figure denotes aggression and hostility with both parents fused into one monstrous configuration; another angle is that of the parents in an "everlasting mutual gratification of an oral, anal and genital nature" (Klein 1952: 55, Sodr  2015); Britton has emphasized the missing link and the infant's exclusion from this act and their wish to 'get in on the act' (Britton 1989, 1999). Mitchell, S. (1988) has stressed the reasons for the centrality of sexuality as deriving not from biological drives but from interactive and relational aspects of experience.

In Britton's paper 'Getting in on the act: The Hysterical Solution', he suggests that: "... a central feature of hysteria is the use of projective identification by the subject to become in phantasy one or the other or both members of the primal couple". Britton suggests that "... in hysteria the patient, like some of Klein's children in the play-room, mounts the stage, to become one of the characters by a phantasy of projective identification" (1993:3). This is demonstrated by a re-interpretation of Anna O's symptoms and psychopathology as they played out in her treatment by Breuer, who could not identify the erotic transference. He (Britton) discusses the 'other room' as the setting for the invisible primal scene of infancy. The consulting room during analysis can become a live version of this original space, particularly when a patient is unable to locate the other room in their imagination (1999:8).

Aaron (1995) posits the poignant question of: *whom the child identifies with in the primal scene phantasy*:

According to classical theory there are many reasons why the primal scene can be traumatic. One well-known cause is that, because of the child's immature cognition and because of the projection of jealous rage, the child imagines the sexual act as an aggressive one, as an aggressive and dangerous battle. Another explanation is that the primal scene is traumatic narcissistically because of the child's shame and humiliation at being excluded from the parental dyad. A less commonly recognized aspect of what can make the primal scene traumatic is that, *looking at the sexual scenario, the child does not know for the moment with whom to identify. Inasmuch as both partners to the scene are seen as in the pursuit of pleasure, it is plausible for the oedipal witness to be inclined to identify with both parties to the scene, male and female* (my italics), (Aaron 1995: 205).

Aaron goes on to state that "according to classical theory" what emanates from this confusion is an intensification of castration anxiety and penis envy that moves onto the splitting or repression of bisexuality and the "extreme stereotyping of identity along gender lines" (Aaron 1995: 206).

Bisexuality

It was Fleiss who initially communicated to Freud that all humans begin from a bisexual disposition, an idea that grew in resonance for Freud (1950 [1892-99]: 211). The origin of the idea created friction between the two men as Fleiss became possessive about his theoretical contributions. The main area of divergence between them grew out of Fleiss's adherence to a periodic table that applied to all human beings whereas Freud moved more towards emotions that derived from sexuality and the significance of sexuality more broadly (Masson 1984: 4).

Bisexuality incorporates the sexual aim and object: the attraction to both sexes and the wish to be both sexes. It has sometimes been reduced to meaning the sexual orientation to both sexes. The generic statement that “we all start out bisexual” can become somewhat generalised or meaningless and requires analysis as to what that actually means for early development. It opens up the question of whether there is indeed an “overinclusive and undifferentiated” phase as Fast (1984) has suggested or whether there is a very early sense of differentiation between the sexes that is repressed or disavowed.

Freud acknowledged the shortcomings of our understanding thus: “The theory of bisexuality is still surrounded by many obscurities, and we cannot but feel it as a serious impediment in psychoanalysis that it has not yet found any link with the theory of the instincts” (Freud: 1930).

Writing in 2010, Rapoport points out that bisexuality often gets sidelined but not rejected in theories or debates about gender and sexuality, so that it is neither fully present nor fully absent. She correlates Freud’s placing of bisexuality as the place of origin and the prehistoric past of the individual and the species with Darwin’s (1871, 1936) assertion that “some remote progenitor of the whole vertebrate kingdom appears to have been hermaphrodite or androgenous” (525). Nineteenth century biological scientists were very influenced by the notion of primordial hermaphroditism or bisexuality (Angelides 2001 in Rapoport 2010). Although Freud made the shift into the psychical sphere, via psychic bisexuality, it remained tied to biology and physical development.

Rapoport discusses an intriguing idea argued by Angelides (2001) that there is ‘an erasure of bisexuality in the present tense’, by Freud, as an instance of a pervasive cultural phenomenon. The suggestion of bisexuality as praxis would have been too radical at the time, following its assignation as central in the formation of all sexualities (2010: 72). Angelides is implying that bisexuality was relegated to the past defensively by Freud, almost as if it was too much to posit it as active and alive in the present. I concur with Rapoport’s observation that bisexuality since Freud is often associated with immaturity, an inborn biologically based instinct, that is easily associated with primitive organisation whether in non-human animals, infants, or psychotic patients. It is easily thought of as premature or undeveloped. In my discussion of bisexuality in trans men, I consider the relationship between sexuality and gender identity that includes the bisexuality of the interviewees’ objects.

In her discussion of bisexuality and “drive theory”, Mitchell argues that we are always all bisexual subjects, who seek an object (whether perverse or not) as a way of satisfying our conflicted and coinciding drives for life and death. She sees bisexuality as a condition of our sexuality within our drives (2018: xvii). For Mitchell, as we are always bisexual subjects from birth and throughout our lives, sexual preference (object choice) is a more malleable individual choice. She sees bisexuality as a ‘subjecthood position’, the choice of object is secondary.

I concur with the stance that we are all predisposed to bisexuality from the outset, and remain curious about what determines foreclosure or lack of it on object choice. I expand on bisexuality for trans men in my findings chapter.

The splitting or repression of bisexuality & identification with father

The splitting or repression of bisexuality and the reluctance to split or repress it strikes me as being highly significant in the early and later formation of a sexed and gendered identity. Might the pronouncement of a bisexual identity at puberty or post-puberty be a manifestation of *a refusal or real difficulty to relinquish the wish to be both sexes and 'have' both sexes?* There is a distinction within the bisexual position of either *the wish to be both sexes* or the belief and conviction *that I am both sexes*. To be and to have all possibilities is also reminiscent of early infantile omnipotence, where there is no foreclosure on object choice or object aim. This infantile experience re-emerges during puberty, when the body is developing sexually. Renouncing all possibilities may well enter into consciousness as the first 'gender shock', that being born one sex and not the other sets in motion limits, a sense of belonging or not, and a social classification. These limits can ignite a protest, that can sometimes manifest in gender identity.

This connects to the theme of a trans identity in which possibility can turn into certainty. Adopting a trans identity can substantiate the phantasy of bypassing uncertainty. This could also be thought of as a conflict in identification: if a girl struggles to identify with her mother in the form of projective dis-identification, she may adopt an intensified identification with her (actual or imagined) father. The Oedipal wish to 'marry' him could be replaced by the belief that 'I am him', 'I am just like him', 'I always have been him/ a man', or I can become him or a better version of him. Identification with father might be preferable as he inhabits a non-female space away from that of mother, but is not an overly 'masculine' man. The

drive for this identification may be more about the need to divorce (identification from) mother than the wish to marry father. It can be the location of a preferred identification. It can also be a defence against (imagined or actual) incest with father that is enacted in the body via a male gender identity.

If one thinks about the role of the father as a potential and active aid in assisting the girl with separating from her mother, the part that the father plays in this role is crucial. His task is not straightforward, as in time he needs to desexualise his sexually developing daughter who turns to him for her 'freedom pass' from her entangled tie with mother. Simplistically put the father moves into the scene as 'a good object' to counter the 'bad object mother' in the girl's conscious and unconscious mind. But the good object father is not helpful to the daughter if he becomes too good an object or inappropriately seductive, as the daughter needs to move out into the world of other objects away from him. In this way, *she too needs to 'desexualise' her tie to her father*. This is the location and locus of dissenting views between Freud and Jones on how the girl manages the move from mother to father and from masculinity to femininity. I have elaborated on this in chapter two. Mother also plays a crucial role in enabling her daughter to 'flirt' with father and then separate both from her and from him. If the bond between a father and daughter is too threatening for the mother, she can disable this important relationship through her own Oedipal difficulties.

The father's unconscious plays a part here too, in terms of how the daughter perceives and relates to his 'masculine' unconscious (Wieland 2000). His whole

relationship to masculinity and femininity will bear upon his daughter's negotiation and navigation of her masculinity and femininity.

... I see masculinity and femininity as constructed within the mind, as complementary opposites, and as mutual projections and phantasies which define themselves in relation to one another. Consequently, an understanding of masculinity is essential to an understanding of femininity. Nowhere is this clearer than in the father-daughter relationship *which shapes the feminine unconscious. The formation of femininity within this relationship I view as the daughter's response to the father's masculine unconscious.* As I see it, a collusion with masculine phantasies and anxieties is essential to the formation of femininity (my italics); (Wieland 2000:10).

Mother's choice of object is significant too in terms of how the child reads the phallic ambition of the mother. If mother has chosen an absent partner who might be threatened or unsure about his masculinity, how does the (female) child interpret mother's role as the phallus and might there be subsequent identifications with either the phallic mother, or father as the emasculated man? I expand on the subject of masculinity in chapter four.

The adoption of a bisexual identity can often provoke hostile reactions. Perhaps it can generate envy: why do you get to have it all, when I have had to choose and relinquish? It can represent a somewhat anarchic/omnipotent position of refusing to adhere to the 'social order' of homosexuality or heterosexuality. This might make it sound like an arrogant choice rather than a confused struggle, and perhaps both of these descriptions are projections. There can, of course, be many manifestations of bisexuality and my interest lies in how the choice or lack of choice emerges unconsciously and consciously. Does the bisexual position evoke a

difficulty or disavowal of a dyadic choice whether hetero or homosexual? By adopting bisexuality, might the capacity to bear (Oedipal) exclusion be bypassed? If a trans man identifies himself as 'straight' and is in a sexual relationship with a female, are there aspects of homosexuality that are more easily endured as a straight trans man than a gay woman? The sexual orientation that can emerge for a trans man, as different to the pre-transition sexual orientation can be hard to disentangle, as bisexuality can subsume homosexuality. I elaborate on this aspect of sexuality in chapter seven.

In her writing about bisexuality, Layton (2000) refers to Michel (1996) who terms a bisexual narrative as "an ongoing construction". This differentiates it from a comingout (sic) story with a clear telos, or a lifelong unquestioned heterosexuality. I find the idea of an ongoing construction to be interesting and useful. It also implies no foreclosure on object aim or object choice, and perhaps the freedom for sexuality to take shape over a lifetime with no specific end date to the construction works.

Blechner (2015) refers to 'biphobia': "An open bisexual meets prejudice on all sides". He goes on to say: "In our current culture, bisexuals are often pitied or condemned as being indecisive, unreliable, or otherwise pathological" (Israel & Mohr, 2004, Kaestle & Ivory, 2012, as cited in Blechner 2015). He suggests the category 'bigender' as a description for people who combine female and male gender identities as he sees the word bisexual as being more limited to sexual attraction to both sexes (2015: 503). "Bigender would describe people who combine two gender identities and alternate between two gender identities.

‘Bisexual’ would henceforth apply only to people with sexual attraction to both sexes” (2015: 512). I am unsure about this attempt to delineate gender and sexuality as I see these categories of identity as inherently fused. I suggest that bisexuality might be selected or inhabited when one’s gender identity is either confused or too fused as it bypasses the need to pin oneself to one sexual orientation or to one gender. One could also interpret it as a lack of Oedipal ‘compliance’, an unwillingness, impossibility or conflicted struggle with knowing how to navigate the move from one parental object to the other and then out into the world of sexual and gendered objects. In this sense bisexuality bypasses monosexuality and converts it into pan-sexuality: a polymorphous and limitless sexuality with no defining borders.

Kinsey (1948) influenced the more rigid categorisations of sexual identity as divided into heterosexual or homosexual with his famous Kinsey scale. He acknowledged the continuum upon which sexuality existed, and saw the categories as imposed by humans.

... It is a fundamental law of taxonomy that nature rarely deals with discrete categories. Only the human mind invents categories and tries to force facts into separated pigeonholes. The living world is a continuum in each and every one of its aspects (Kinsey et al 1948: 639).

As Kinsey found the categories of homosexual, heterosexual and bisexual narrow, he devised a seven-step measuring scale that measured sexual orientation on a continuum known as the “Kinsey Scale”. This measuring scale was heavily criticised, although Blechner points out that it corresponds to Freud’s discussion of

“amphigenic inverts” whose “sexual objects may equally well be of their own or the opposite sex” (Freud 1905/1953: 136).

Salamon (2010) is curious about Freud’s writing on hermaphroditism and his questioning of the divisibility of humans into male and female. She sees Freud as reliant on both ‘the anatomy of genital morphology’ and the wider cultural challenge to sexual boundaries.

The intersexual body refuses to conform to the binary of sexual difference by which it could be easily categorised as “male” or “female”. And yet, the means by which the cultural binary is challenged is the body’s stubborn manifestation of a binary in which both male and female characteristics are legible at the surface of the body. Thus the body’s stubborn insistence on a legible binary is precisely that which renders a categorical binary illegible (2010: 15).

Salamon appears to be disappointed by Freud’s attempts to find a link between inversion and hermaphroditism: by extrapolating from the originally bisexual physical disposition into a unisexual one that leaves behind the sex that has become atrophied. Freud does not pursue this line of thinking and thus unsettles the question of the relationship between hermaphroditism and normal bisexual psychic disposition (2010:17).

Freud’s use of the term bisexuality, in his writing about inversion, is challenged by Salamon who states that bisexuality cannot be restricted to one referent “... but always works between registers” (2010: 18). She differentiates between various forms of bisexuality: one in which masculinity appears alongside femininity, another in which the body and psyche hold different and distinct registers,

attributed by Freud (1923) to Karl Heinrich Ulrichs (1864). Freud rejected this latter theory as it replaced the psychological problem with an anatomical one. For Freud it is necessary for there to be a consolidation between psyche and soma in order for sexual legibility to be possible. Salamon appears to see this view as a (possibly regressive) return to the need for a clear binary of man or woman (2010: 18-19).

Boy-girl

Yanof (2000) described psychotherapy with Jennifer, whose ritual at the age of three years and nine months, was to roll up a diaper that she labelled her penis and position it in her tights or pants¹ before she would leave her home. The behaviour was explained by Jennifer as her wish to be a boy. This ritual worried her parents who brought her to psychotherapy. Yanof described this wish for a penis as a “multilayered compromise formation” as a response to the fears of loss and anger about separation (2000:1445). The oscillations in Jennifer’s struggles with femininity and masculinity, separations from her mother, her mother’s and father’s relationship and how these emerged in the transference are described through the nature of the play in sessions.

This psychotherapy showed a small girl’s use of gender as a means to play out difficulties with attachment, sexuality and aggression. The wish to be a boy via the diaper, showed a more concretely enacted defence against painful feelings. The ‘no penis’ body limitation had become a strong metaphor for a psychological conflict. Yanof showed how the nature of the phantasy altered from the penis to Jennifer’s own female body with phallic elements. To my mind this showed a relinquishment

¹ Packers are now available for small naturally female children who wish to identify as male.

in the need to enact the loss of the other sex and a development in the capacity to accommodate the reality of gender in the body one has. I concur with Yanof's acknowledgement of the importance of individual context and the multi-layered and multi-determined aspects of gender (2000: 1460-1461).

In a paper by Grossman (2001) on contemporary views of bisexuality Herzog presented the case of six-year-old Jane who early on in her two-year analysis experienced herself as a "boy-girl". Herzog described Jane as knowing she was a girl but entertaining fantasies and beliefs about mixed genders. She had an imaginary pet cockatiel, Matilda, described by Jane thus: "Matilda's a very odd boy, he isn't just a boy, he is a boy-girl. That's why he's called Matilda, although you could also call the bird either Mall or Tilda". As Matilda misbehaved Jane became confused about her role as both the father who could spank and the mother who could groom. She claimed to be both. In reality she felt her father's lack of presence and involvement, and could become very angry about her wish to keep her mother close. At one point Matilda would not go to bed and Jane displayed an angry movement whilst stamping her leg, killed the bird and then cried. Herzog thought of this as a communication of Jane's tie with her father's conflicts with aggression as manifested in her girl-boyiness. Thereafter a new character appeared named Lou Shoe, a girl that could express aggression, but described by Jane as being both a girl and a boy. Herzog understood that for Jane: "... girlness and boyiness did not fit together well, and her inherent bisexuality had incorporated her parents' conflicts with aggression". He concluded that "Jane's inherent bisexuality had served as the scaffolding upon which developmental conflicts particular to her family and her

endowment were elaborated and then emerged within the analytic encounter”
(2001: 1373).

In these case descriptions I find the ‘girl-boyness’ identity pertinent to the eventual or potential for trans male identity, as it alludes to the early sense of persistent boyness in the girl which can also be thought of as early bisexuality or, to use Blechner’s term, bigendered identity (2015). I am interested in Herzog’s reference to the difficulty that Jane appeared to have with her father’s incoherent relationship with his aggression, as though she wished her parents to fit into more coherent gender roles, so that she could then work out her own identity in relation to them and to herself. Herzog felt *that Jane already had the concept of bisexuality*, it was not that he had to hold this in mind on her behalf (2001:1374). I would add that Herzog’s capacity to contain her conflicts enabled her to both inhabit and enact bisexuality, perhaps a retrospective pull to an undifferentiated or ungendered phase.

Early bodily experience

Bernstein (1983) thought that Freud and others lay too much emphasis on phantasy in favour of bodily experience. She states:

In the body of her infant daughter, a mother can see her own past self; the body is known and familiar, one with which she can have total identification. In contrast, a boy can only be experienced by a woman as different from herself; there cannot be the deep biological understanding of the male body that a woman has with her daughter. The mother’s experience of her daughter as like herself, and her experience of her son as different, is overtly and subtly communicated to her children. (1983: 191).

In 1966 Barnett suggested that small girls have an awareness of an opening and a potential inside space. She referred to this as *introitus*, by which she meant a space behind the external opening of the genitals that has conscious and unconscious kinaesthetic perceptual representation, that functions as a precursor of a more precise representation of a vagina. (2000: 1385).

Mayer elaborated on Barnett's observation, by theorising small girls as having a mental representation of their genitals as an opening that can be endangered and that all others must have and be the same. Mayer sees the pre-oedipal castration anxiety as "the frightening possibility that such an opening *in a female* could be endangered, lost, or closed up as that opening is imagined to be in males" (Mayer 1985 in Lasky 2000). In chapter two I pointed out the reversal, the boy's fear that either mother or sister had something removed or castrated with connotations of a punishment. Although of course the fear for the girl of a boy having had something closed up is a very different kind of fear to castration anxiety, in phantasy both symbolise foreclosure through either the loss of a genital or a loss of sexuality (Jones 1927). Horney saw the uncertainty and fear of vaginal injury that includes the expectation of punishment (through dint of anatomy) as exchanged for a concrete idea via the phantasy of castration (1926: 336). This implies a form of 'castration-identification', removal preferred to intrusion.

As an elaboration of these ideas, I wondered whether the small girl's wish for a penis might also in phantasy correspond with the wish for a genital that feels less prone to leakages or prone to (the danger of) penetration. In this sense the wish or phantasy of having a penis would function as a cork that closes up the entrance and

exit of the vagina. The phantasy is that of a “cork-penis” or “caulke-penis” that both keeps fluids in and prevents them from seeping out. Of course, for the small boy, his experience of a penis that can betray feelings of excitement or arousal may not feel so contained as it is prone to erections and leakages.

Moving from the actual genital and phantasies about it to the function or ‘use’ of the child as a cork for mother’s uncontained needs, McDougall (1980) has written about the “cork child” who fulfils the mother’s excessive needs and requirements. The plight of the cork-child is that he cannot leave his mother as she “is the abyss awaiting fulfilment” (1980: 426). The child can take up the role of mother’s sexual and narcissistic complement, but nothing he will do will be sufficient to repair her or make her content. The child represents for the mother an object of vital need and can reflect the parents’ unresolved sexual conflicts. McDougall states:

Such mothers are often excessively “maternal”, not “good enough” in Winnicott’s sense, but “over-good”: they over-care for, over-love, over-worry about, over-feed their children as often as not. However, in the child’s mind this is apt to be experienced as psychic abandonment, as being cared for by a mother who appears totally indifferent to her infant’s psychological needs and various affective states. Many such mothers are remembered at a later stage as having been uninterested in the child’s mental pain, but quickly aroused and involved with any bodily pain or symptoms he might produce (1980: 425).

The ‘cork child’ and the ‘penis as cork’ phantasy

McDougall describes the way in which some mothers can ‘use’ their child as a cork. The child in these scenarios will have a notion of a mother as a void of endless need. I am curious about the impact of this kind of mothering on female children in

relation to their developing sexuality and gender. One concrete solution to separate from a (needy and narcissistic) mother, who cannot separate her own needs from that of her child's, might be to separate into another gender. A bodily separation from any identification with mother and her femaleness could be seen to be a viable, albeit concrete, option. A child's perception of a mother as a void of endless need in phantasy can be linked to the female body and female genital particularly if the mother has been an overtly sexual mother either in relation to the child or others. The phantasy of an 'open mother' who allows danger in might convert into a wish to close that opening, so to speak, with a 'cork-penis' and a change of gender.

The antithesis of wishing for a penis in order to stem unwanted intrusions or extrusions into or from the vagina, is the fear of female aggression towards the penis. Chasseguet-Smirgel (1970) highlights the idea of incorporation guilt: "... *a basically feminine wish to incorporate the paternal penis*, which invariably includes the anal-sadistic instinctual components." (1970: 102). She discusses the experience of (hetero) sexual intercourse that does involve the incorporation of a penis by the woman, and the phantasized desire to keep the penis permanently. She reminds us that Freud made this point in his paper: "On Transformations of Instincts as Exemplified in Anal Erotism" (Freud 1924), and writes about incorporation fears of the imagined or phantasized penis in the vagina, that can develop into sexual fears. In this domain of thought the vagina can become a frightening orifice that can damage or imprison the penis. It has dangerous and greedy oral qualities.

A different angle is offered by Elise (1998) who suggests that for girls, the relational void in giving up the mother, may be represented genitally. The symbolic withholding of the penis (by father) through his relational distance, can then be schematized by a body that is empty of something. The emptiness can manifest in the vagina or its mental representation. The object hunger (for the paternal penis) lies behind vaginal repression or an inhibition of the role of the vagina in sexual desire (1998: 413). Elise posits that the relational void left by giving up the mother as a love object, can leave an internal self-representation as a “hole” to be filled, not unlike the function of the pacifier, when the nipple is unavailable (1998: 421).

Female genitals are, for both sexes concretely and symbolically associated with a broad range of experiences: birth, separation from the inside of mother’s body, urination, faecal excretion, sexual secretion, sexual sensation and arousal. It forms the basis of many fears and anxieties along the spectrum of neurosis and psychosis. Phantasies of being trapped inside an object, being too much outside it, as well as the phantasized fear of having an object trapped inside the self or the body can lead to claustrophobic and agoraphobic anxieties. Glasser has elaborated on this experience and refers to it as ‘the core complex’ (1979). This is also the territory of Meltzer’s concept of the Claustrium that developed and expanded from intrusive identification into three areas of the internal mother’s body: genital, rectal and head-breast (1992). Meltzer’s ideas were mainly built from Klein’s and Bion’s psychoanalytic developments.

The early experience of having a female body is bound to be associated or even fused with having a mother: a girl is born from her mother's body and (usually) with a female body like mother. The bodily identification precedes other psychic forms of identification, although very early on the baby (in all likelihood) has no notion of a gendered mother if one thinks in terms of part object relating (Klein). The urge to de-link or attack the link with one's mother, encapsulated in (unconscious) matricidal wishes, might sometimes and in some instances find a concrete outlet in re-gendering the body.

Hysterical phantasies

Freud (1908) postulated that hysterical symptoms "... arise as a compromise between two opposite affective and instinctual impulses, of which one is attempting to bring to expression a component instinct or a constituent of the sexual constitution, and the other is attempting to suppress it". He says that in some cases the symptom is not relieved by the revelation of the sexual phantasy and sometimes the resolution necessitates two sexual phantasies of a masculine and feminine character, which implies that in one of the phantasies there is an underlying homosexual impulse. In this way the hysterical symptom as well as being a compromise is also a fusion of two libidinal phantasies of an opposite sexual character. Freud here alighted upon the bisexual nature of the sexual phantasies that underlie hysterical symptoms.

The case example that Freud gives is that:

... the patient pressed her dress up against her body with one hand (as the woman), while she tried to tear it off with the other (as the man). This

simultaneity of contradictory actions serves to a large extent to obscure the situation, which is otherwise so plastically portrayed in the attack, and it is thus well suited to conceal the unconscious phantasy that is at work (Freud 1908:94).

Sodré (2015) expands on Freud's ideas about the bisexual meaning of hysterical symptoms in her chapter on 'The Perpetual Orgy'. She sees Freud's example above as conveying not only a bisexual aspect of both the positive and negative Oedipus complex but also the acting out of a primal scene phantasy:

... in which there are three actors permanently involved in the primal scene that is represented by, experienced as, the hysterical attack, the patient being in projective identification with the entirety of a triangular, part-object, perversely polymorphous intercourse (2015: 217).

In his 1909 paper 'Hysterical Attacks' Freud cites the same example as the one above in which he describes the attack being obscured by the patient's attempt to take up the roles of the man and the woman in phantasy through multiple identifications.

What might lie beneath the conscious wish for a female to dis-identify with her mother to such an extent that she wishes to relinquish her own female identity? Might there be an unconscious primal scene phantasy that incorporates multiple identifications? Britton and Sodré develop Freud's ideas about unconscious phantasies. Freud believes that all unconscious phantasies were once, albeit momentarily, conscious, and most likely linked to early or infantile auto-erotic sexuality in the form of masturbation.

Rose, in her article on transgender 'Who do you think you are?', makes the useful point that:

The bar of sexual difference is ruthless but that doesn't mean that those who believe they subscribe to its law have any more idea of what is going on beneath the surface than the one who submits less willingly. For psychoanalysis, it is axiomatic, however clear you are in your own mind about being a man or a woman, that the unconscious knows better (Rose 2016).

The Un-mourned

The capacity to mourn plays a central part in the psychoanalytic understanding of psychic growth and development. Freud made the important distinction between mourning and melancholia, where the dead object can be lodged internally and identified with rather than relinquished thus forming a pathological attachment. Klein expanded upon Freud's approach to and understanding of mourning (1940) by developing her concept of the depressive position (1952:77); a position in which attacks on the object can be mourned. Klein made a remarkable contribution to psychoanalytic theory with her conceptualisation of both the paranoid schizoid and the depressive position and the oscillation between them throughout life.

In my view the capacity to mourn is central to an attempt at understanding the development of gender and sexual identity. This capacity or lack of it begins very early on in life and is closely tied up with experiences of separation and frustration. We all negotiate separations throughout life, starting with separation from the womb. The recognition of sexual difference necessitates a separation from the phantasy, wish or desire to be both sexes. A small boy has to mourn what he is not,

and a small girl likewise has to let go of the phantasy of being both sexes. How this 'giving up' is managed ties in with the capacity or lack of capacity to mourn.

This notion of mourning, so central psychoanalytically, is further complicated by the notion that gender is socially constructed rather than biologically given. My discussion here is not about whether gender is the former or the latter, but more about where mourning fits into the contemporary claim that I am what I feel psychically and I am not what I am biologically. The capacity to mourn what one is not, in my view, is part of the capacity to bear reality with all the limitations that reality bestows on us as human beings; for trans men this might be more in the realm of bodily reality. Trans identity might require a different kind of mourning, more in the area of managing incongruence between the psychic and physical manifestations of identity, that can struggle to align. As a psychologically vital part of development, mourning might, in some cases of gender identity, get bypassed, particularly if there is hostility or denial towards the sex that one is born. If a loss is not mourned, it becomes denied, displaced, disavowed or repressed and does not disappear. Where a psychological working through of the loss might have been, a concrete solution in the form of renewal, replacement or a manic solution can take hold. My discussion here is necessarily schematic, and does not have a generalized application to gender variance. My attempt is to explore what the more conscious solution might be if the loss (of being the other sex) is disavowed and not psychically integrated.

Psychoanalytically, the difficulty with mourning is linked to ambivalence and hostility towards the object. At times these ambivalent feelings can be extremely

attacking and murderous which complicates the capacity to separate from the object (Wieland 2000:22). The object in this scenario is not just a dead object but a murdered object. A bad object can exert enormous power over a child, not least because the child cannot get rid of it. If a child's parents are experienced (in phantasy or reality) as bad objects, the child is thrown into a double bind as he/she needs their parents and hence is trapped with the internalised bad objects inside (Fairbairn 1943: 67-8).

The bad internalised object for the child is part of their own projective system that involves both introjective and projective identification. Bion wrote about the way in which absence is managed in the infant's mind and how an absent object can become a bad presence, unless it converts into a thought in which the absent object can be represented as benign (1984: 112). If the loss is experienced as traumatic and cannot be transformed into a thought, it becomes lodged internally as a bad and persecuting presence with which the individual is projectively identified. In this way the bad object becomes both part of the self and something alien.

The present bad object has to be murdered, annihilated, or endlessly projected – yet, in each of these 'solutions' the object refuses to die because it is never mourned. Additionally, if the object is never mourned then the subject cannot acquire a capacity for mourning, or for thinking. An endless vicious circle develops, in which projective identification becomes the dominant mode of operating (Wieland 2000: 26).

We Are Not Self-Made: the Good Enough Mother

The 'good enough mother' is a term that Winnicott (1965: 56) introduced in relation to mothering and the pervasive anxieties that can accompany the experience of mothering. It is helpful for the girl's development and move from mother to father, and then away from father to others if she is able to maintain a 'good enough internal mother' with whom she can have a 'good enough identification'. If the girl's separation from her mother is too full of hostility, the not good enough internal mother is likely to influence the girl's relationship to her own femininity and femaleness.

I referred earlier in this chapter to the girl's relationship to her father's masculine unconscious. Her mother's unconscious is also bound to play a pivotal part in how the mother relates to her daughter and how the mother's experiences of her own parents reside within her unconscious. The unconscious is transmitted from generation to generation, to and from both parents. The line of transmission is projected and introjected unconsciously and is bound to have an impact on sexual development. Laplanche (2007) referred to enigmatic signifiers and Faimberg (2005) has written about the impact from one generation to the next.

The Bad Enough Mother

The management of the move from mother (as first object) to father, has at its core the nature of the separation from mother. Father's function in this dynamic is to offer an alternative object relationship, from the (at times) more enmeshed and complex one with mother. Father can offer the possibility of relief from hostile and persecutory feelings towards mother. However, my description pre-supposes that

this is a smooth move, and that fathers are always present, which they are in the unconscious of both the mother and the daughter. The degree of hostility towards the mother and how this is managed internally and externally is paramount.

Britton (2002) introduced the idea of the Athene-Antigone complex in women that can arise when there are difficulties with the girl's infantile maternal relationship that is compensated for by idealisation of the relationship with the father either through phallic identification (Athene²) or through becoming the father's seer (Antigone). In Anna Freud's language the former being identification with the aggressor' and the latter 'altruistic surrender' (1936). Apollo, Athene's brother, hailed her suitability for her role "by virtue of being her father's clone unsullied by intrauterine residence. He also regarded all mankind as essentially the progeny of the father: the mother's role being simply that of incubator." (Britton 2002:107-109).

In Athene's position, Britton describes the phallic identification that leads to a triumphant denial of being ordinary as a woman and in Antigone (the daughter of Oedipus and Jocasta) there is a more general belittling of femaleness through self-disparagement. Both Athene and Antigone hold characteristics that fit Freud's theory of 'female castration' and 'masculinity complex' or Jones' description of relinquishing femininity or the erotic tie to father, thus exchanging either the object or the wish (Britton 2002:107-117).

² I have used the spelling of Athene here as it is used by Britton (2002).

The daughter “as a boy in relation to a man”

By looking at both Young-Bruehl's biography of Anna Freud (Young-Bruehl 1988) and the paper by Blass on Anna Freud's first analytic paper (1922) 'Beating Fantasies and Daydreams' (Blass 1993); Britton clarifies that Freud's paper (1919) 'A Child is being Beaten' must in part have been influenced by his analysis of his daughter. The beating fantasies in Anna Freud's paper are the fantasies of a girl in which a boy is being beaten by a man. She (Anna Freud) discusses these early infantile masochistic fantasies and the later development of the girl's 'nice story' daydreams. Whereas she saw these daydreams as sublimations of the earlier masochistic fantasies, and the masturbation itself as a source of guilt or shame; significantly Freud viewed the guilt as emanating from the actual content of the masturbatory fantasies. From both these beating fantasies and nice stories Anna appears to have seen herself: "... as a boy in relation to a man. There is no mention of the 'girl's' mother at all in her paper". Britton extrapolates further by saying that "Freud makes Anna his son and puts her in the position she occupied as the young man of her daydreams, imprisoned by a knight fearing torture and condemnation only to be triumphantly reconciled." (2002: 111).

It is the influence of his analysis of his daughter Anna on Freud's analytic theories of female sexuality that Britton particularly focuses on here:

I suggest this led to Freud making phallic monism the basis of a revised account of normal female sexual development. His theory rapidly became controversial within psychoanalysis and it remained so ever since. It also made psychoanalysis unacceptable to feminists of both sexes as Freud predicted it would. It seemed not only counterintuitive, but counter to the

thrust of his previous thinking about the Oedipus complex in the normal development of both sexes. My belief is that he espoused his new theory of female sexuality as a reaction to his analysis of his own daughter's psychopathology. (Britton 2002: 111).

The Athene complex is relevant to my writing about matricidal wishes or unresolved hostility from the daughter towards her mother. For Klein, it is the mother who has the satisfaction of father's penis as well as breasts and babies that the pre-pubertal daughter does not yet have. The daughter's wish to undo this state of affairs is to rob the mother of this penis and hence to castrate the mother, but that leaves the mother both damaged and robbed by her wishes which leads on to depressive anxiety and guilt. At its peak the masculinity complex is one in which the Athenesque daughter triumphs over mother, manically denies her significance or indeed the significance of mothers more generally as inferior. It is not unfeasible therefore to deduce that in some cases what can be described as 'the masculinity complex' is likely to be influenced by early (conscious and unconscious) difficulties in the maternal relationship. The ways that this can manifest analytically is by the missing mother in the transference, idealisation of the male analyst, denial of sexuality in the patient, a servile attitude in the female patient towards her father (Antigone) or a difficulty with forming a mutually satisfying sexual relationship (albeit not necessarily a heterosexual one).

Raphael-Leff (2008) in her discussion of psychoanalytic gender theorising, introduced the concept of '*generative identity*': "... defined as a psychic construction of the self as creative, rooted in recognition of procreative difference".

The markers for it are: Gender, Genesis, Generativity and Generation. She argues that: "...acquisition of generative agency constitutes a quantum leap in self-definition" (2008: 246). She sees the recognition of anatomical difference for toddlers as bi-phased, in that it is "... reinterpreted through an awareness of *distinct procreative capacities*." (Raphael-Leff 2007: 506).

Sexual difference confronts us with what we are not, instigating further awareness of what we are/have. Generative identity proposes that beyond one's 'core' sense of embodied *femaleness or maleness*, and, in addition to mental representations of *femininity/masculinity* and articulation of *erotic desires*, there is a further psychic construction of oneself as a *potential pro-creator*. Freud's primal question 'where do babies come from?' initiates a process of acquiescence to a simple fact of origin: we are not self-made. Formation of generative identity entails recognition of external origins and demarcation of distinct reproductive capacities of the sexes. (Raphael-Leff 2007: 506).

Concluding thoughts

I have introduced and developed the idea of matricide as a consequence of an ambivalent maternal tie. I have suggested that this might lead to the killing off of femininity and femaleness in oneself as a concrete enactment of the wish to rupture a maternal identification, and consolidate a masculine identity.

I describe how Orestes, who commits matricide, is absolved by Athene through her allegiance to the phantasy that she was *born of her father*. I try to show how the triumph of patriarchy loomed large in Greek mythology, whilst matriarchy was subsumed if not literally swallowed up by Zeus, as he devoured Metis and gave birth to Athene through his head. One might think of this as a metaphor for the

birth of an idea, not unlike the trans man's idea of being male: an idea that is born not through being one of the two sexes at birth, but through bypassing the conventional tenets of physical reality, and finding an agreeable place on the spectrum of gender identities. Zeus appears to have swallowed Metis without digesting the reality (within the myth) that Metis was Athena's mother. The mother is then removed or unacknowledged, thus paving the way towards Athena's endorsement of patriarchal law through the trial that absolves Orestes of matricide. The procreative couple are also disavowed, as Zeus replaces his male head with the female womb of Metis. The parthenogenic birth incorporates physical appropriation via rape and psychic appropriation as the male head takes over the female womb.

In his writing about the Athene/Antigone complex, Britton referred to the ambivalent tie between a mother and daughter that can show through as *the missing mother* in the transference. Freud's analysis of his daughter Anna's beating phantasies, following Britton's interpretation, place *Anna as a boy in relation to a man*. This raises the question of the sexual identity of the daughter in her father's mind, and of the daughter's sexual identity in relation to both parents, with the mother again strikingly absent. In some of the interviews that I conducted with trans men, I noticed the missing mothers in the material, or the difficulty with forming a good enough identification with her. I will discuss 'the missing mother' more in my chapter on the interviews.

The act of killing can be thought of as the concrete enactment of a fantasy in which the object is eradicated. In the myths of Oedipus and the Oresteia the

murder of the father and the mother (albeit in very different ways in each myth) appear to be sought as solutions to feelings of abandonment, separation and the quest for identity. I have cited Jacobs and Wieland who notice how matricide is the more forgivable or sanctioned crime, which then paves the way for the law of the father to trump the law of the mother. Jacobs views the theorising of femininity and the maternal law as lacking in the building of psychoanalytic theory. Wieland sees the separation from mother as lying at the heart of the development of gender identity. Irigaray sees matricide, operating at a primal level, as foundational in society and culture at large (1991: 36).

In the Oresteia the drive by Electra and Apollo to kill Clytemnestra comes out of an allegiance to the murdered father, Agamemnon. Wieland sees the paternal identification as helpful to the woman in her separation from mother, but that it comes at the cost of a better maternal relationship (2000:28).

Loewald (1979) emphasised the necessity of patricide as a developmental, psychically organising step into self-authority and adulthood. Perhaps (psychic) matricide for the daughter has a similarly organising function as some form of rupture from the maternal object is necessary for individual and independent development. The extent and form that this rupture takes is pertinent to my exploration of the place of the maternal and the feminine in the gender identity of trans men.

André Green (1983) has written about 'The Dead Mother' as a presence that lacks aliveness for the child who struggles with the deadness of a depressed maternal

object. One could conjecture that the child might then need to bring to life the objects that are dead in mother's mind, which might include the dead masculinity of the father in mother's mind (either her father or her husband). Another way of allaying identification with a depressed or hysterical mother might take shape through relinquishing femininity. I explore and question whether identification with a damaged maternal object, which is always intertwined with phantasy, can be so intolerable psychically, that it necessitates a concrete physical and bodily move into another gender, thus enacting matricide by proxy.

Central to the development of the young girl is how her separation from mother is managed and what psychological shape (consciously and unconsciously) father has both in her mind and in the mind of her mother, as it is conceptualised by the daughter. What I have tried to address in this chapter is how this separation from mother, which is a universal developmental move, shapes gender identity: how does it affect masculinity and femininity in the girl, daughter or woman?

I describe the primal scene and bisexuality as the location of early (gendered) phantasies and identifications, at the heart of which lie the poignant questions: 'where do babies come from?' and 'who in the primal scene does the infant identify with?' These questions open up the potential for confused dual identifications. The case studies that I refer to show how the parental relationships seep through into the child's confusion and attempt to work out her gender identity. These cases demonstrate how the child's struggles were aided by the patient and facilitative quality of these therapies and how open psychoanalytic work can offer a safe space for acting out struggle and conflict with gender identifications early on in life. This

opportunity might prevent them from becoming more entrenched difficulties during later years, particularly at puberty.

I include thinking about early life sensory experience in the body. Early awareness of the body and sexual difference unleashes phantasies about female and male genitals. The fact of life that one is born *from* a female body that required seminal input *from* (in whichever format) a *male* body, lays bare the reality of two sexes or differently sexed bodies, the primal scene, and the genital requirements for generativity. This is external reality but can be a struggle to locate as psychic reality.

I suggest that the capacity or lack of a capacity to mourn loss is primary in an attempt to understand aspects of reality that include the emergence of sexual difference and the emergence of gender identity. The recognition of the difference between the sexes is one of many poignant realisations or losses during early development. It is inextricably linked to a capacity to mourn what one can and cannot be, that in turn links with a generative capacity as Raphael-Leff points out. Yanof and Herzog show how these losses can manifest at a young age, and how they can be usefully understood.

There are several threads to this chapter that all tie into my attempt to explore the varied motivations to change gender from female to male. This wish, always made individually, links into the daughter's tie to her mother as the earliest prototype of femaleness, in whichever way the mother might convey this to her daughter consciously, unconsciously and transgenerationally. The daughter's tie to her father, and his unconscious relationship to masculinity is also significant, as is the

daughter's perception of her mother's phallic ambition expressed not only in her own way of being but also through her choice of and mode of relating to her partner.

From birth, and before birth, elements of femininity, femaleness, masculinity and maleness are passed onto and into the natively female child. This is a continuous flow of conscious and unconscious projections and introjections, or enigmatic signifiers that mould individual identity. I have placed the nature of the separation of a daughter from her mother, which necessarily involves mother's capacity to separate from her own mother and her daughter, as central. I posit psychic matricide as a necessary developmental step towards achieving an optimal separation. I question whether forms of separating into a masculine or male gender might at times concretely enact this struggle.

Chapter 4

Masculinity and the Phallus

In this chapter I will explore various forms of masculinity, and introduce ‘Non Phallic Masculinity’. It is a form of masculinity that is *not* based on being born male, with male genitals. It necessitates a distinction between being male and being masculine. It is different to what has been called ‘female masculinity’, neither is it ‘masculine femininity’. It is a gender identity I wish to consider specifically in relation to trans men rather than natal men who may identify as non-phallic. It is felt, known and carries conviction in the mind. The natal body may or may not be altered hormonally or physically through surgery in order to corroborate the gender *as felt and seen in the mind’s eye*. The conflict between what is biological and what is psychic, and hence biological versus psychic determinism, is necessarily embedded in this form of masculinity.

I will include several facets of masculinity that have been theorised by others and introduce concepts of *non-phallic masculinity*, the *trans phallus* and *après coup masculinity*. I include: Connell’s (1982, 2005) theory of (non-hegemonic) masculinity, Seminal Masculinity (Figlio 2010), the role of the testicles (Bell 1965, Freidman 1996) in castration anxiety, the phallus/penis distinction (Freud 1923, 1925, Lacan 1958, Gallop 1981, 1988, Nguyen 2008, Moi 1999, Hsieh 2012), as well as the idea of a different phallic temporality (Gallop 2019). I refer to the Freudian, Lacanian and Lesbian phallus (Butler 2011, Halberstam 1998, Hsieh 2012). I discuss the Masculine Vaginal (Hansbury 2017) and introduce the concept of the *trans*

phallus as an elastic and transplantable phallus. This elasticity and transplantability of the trans phallus collapses the distinction between phantasy and reality; it allows a flow between femaleness and maleness that transgresses the difference between the sexes. It finds a place between illusion and disillusion not unlike Winnicott's (1951) concept of transitional space; it could be called trans space.

Am I a man or am I masculine?

"Penis as the measure of man". (Saketopoulou 2015: 282)

If a man is only 'truly' a man if he has testicles and a penis and can procreate with a female, where does that place the gender identity of trans men without invalidating their masculinity? Unlike the anatomical penis, the concept of the phallus can be thought of as inherently bisexual and ungendered as it denotes a phantasy of possessing magical power. The object (in the psychoanalytic sense) might have this power; in the Lacanian sense it is what mother has (from father) that the child cannot give her. Although it is derived from and linked to the masculine penis, it is not the actual penis. It is hard to 'de-link' the phallus from the penis, not least as the word phallus is almost automatically associated with the image, symbol of or actual penis. When I refer to the phallus, I am distinguishing it from the penis as part of the anatomy of natal males, it is more antinomy than anatomy. If the penis, that the phallus represents, is not required for masculinity to be authentic, then non-phallic masculinity or trans-phallic masculinity is open to both sexes in all sexualities. The difference being that whereas the phallus is a phantasy, non-phallic, or perhaps more accurately non-genital, or trans-phallic masculinity is a lived

experience. This tension between phantasy and lived experience is central to my exploration of gender identity, and I include it in my hypotheses in chapter 7.

In psychoanalytic writing, there is a lack of clarity about what is meant by the phallus, not least as it has garnered multiple meanings across different psychoanalytic schools of thought. Lacan addresses some of these difficulties in his paper 'The Signification of the Phallus', (1958, 1982) which was a significant text within feminist thinking, and brought psychoanalysis to feminism. I expand on Lacan's paper in the section on 'The Lacanian Phallus' in this chapter.

Non-hegemonic, seminal, medicalized, pharmacological Masculinity

Non-Hegemonic

The Australian sociologist and trans woman Raewyn Connell's theory of masculinity (1995, 1987, 2004) was influential in the field of men and masculinities and in the field of gender studies. It has drawn much interest as it gives a critical feminist analysis of historically specific masculinities as well as recognising the extent to which individual men contribute to the reproduction of dominant forms of masculinity. Three areas cited by Wedgwood as overlooked in Connell's work are: the important influence of psychoanalysis including the use of case studies as a method; the significance of non-hegemonic forms of masculinity and cathexis as a concept (Wedgwood 2009: 329).

Gender issues became apparent to Connell through research on class structure in education, politics, culture and history. This interest was extended to both children and their parents' educational histories as a forerunner to an interest in gender.

The term 'hegemonic masculinity' was first used by Connell in a short publication 'Ockers and disco-maniacs' (1982), as part of his (now her) work in and on education. It referred to culturally dominant ways of being that become viewed as the general pattern of masculinity (Kessler *et al.* 1982: 10 as cited in Wedgwood 2009: 331).

In another publication of essays: 'Which way is up?' (1983) Connell "... tried to link class analysis, gender analysis, psychoanalysis, cultural critique, and mainstream sociology" (Connell 2004: 16). One chapter looks into the link between the construction of masculinity and the social power structure of patriarchy through masculine embodiment. These essays developed into a number of publications that consolidated Connell's theory of masculinity and theoretical model of gender (1987, 2004).

Connell's approach to writing on masculinity was feminist. A seminal paper 'Toward a new sociology of masculinity' (Carrigan *et al* 1985) addressed the social determinism of sex-role theory. The paper endorsed the study of historically specific masculinities rather than adopting a more homogenous approach. "Male domination, they argued, is a dynamic system constantly reproduced and re-constituted through gender relations under changing conditions, including resistance under subordinate groups" (1985: 598). The publication clarified the term 'hegemonic masculinity', which climbed to the top of the hierarchy of masculinities as "... a culturally exalted form ..." (Wedgwood 2009: 332). The spotlight on the psychodynamics of gender in addition to the social relations that construct masculinity was what made their approach progressive. The stress on the

visibility of men's bodies as an object of practice (1985) later evolved into Connell's book 'Masculinities' that used case studies to "... reveal how the relationship between the body and the social is two-way and simultaneous and how practice itself forms and is formed by the structures within which bodies are appropriated and defined" (Connell 1995: 61).

Wedgwood explains how Connell's approach dissents:

Unlike Foucault's bodies, Connell's bodies are not always docile, they are not blank pages on which cultural messages are written but are 'addressed by social process, and drawn into history, without ceasing to be bodies. They do not turn into symbols, signs or positions in discourse' (Connell 1995, p.64). Thus, they neither stand outside of nor prior to history but are open to change through social processes. Because Connell's theoretical approach to embodiment grows out of life history research it is informed by practice and this is what keeps Connell's bodies alive and anchored in their own worlds/historical contexts. It thus takes into account the many different ways in which people are embodied, with a particular focus on gender but not to the exclusion of race, class, age, sexuality, ethnicity, disability or other factors (Wedgwood 2009: 334-335).

It is important to stress that Connell's approach is more sociological than psychoanalytic, as he (now she) was writing about actual men and their conscious embodied roles in a cultural and historical context. This is distinct from Lacan's approach to writing about the father and his call for a return of the father away from the psychoanalytic theorising and emphasis on the mother and child dyad. Lacan situates his thinking in the realm of metaphor and fantasy away from the actual environmental presence of either parent, he calls this the *paternal metaphor* (1958).

Seminal Masculinity

Figlio (2010) makes an original contribution in his paper on phallic and seminal masculinity by pointing out that the word 'seminal' has lost its original meaning and is often used without reference to its source. He explores the omission in psychoanalytic theory of the creative and essential part that seminal masculinity offers. He points to the omission of the notion and experience of a male interior space, as this concept is so often attributed to women's bodies and psyches. He states that: "The male seems simply to lack an internal procreative space with structures and processes uniquely male and equal in importance to those in the female. The anxieties associated with them remain marginalized, misrepresented or unrecognized in clinical work" (Figlio 2010: 120).

He highlights the fact that testicles are not often written or thought about psychoanalytically, even though they are the source of castration anxiety as well as anxieties and phantasies of their disappearance into the body. Testicles are also a particularly vulnerable part of the body, which may require phallic compensation. Figlio cites Anita Bell who, in the 1960's, made the prescient observation that castration anxiety has been interpreted only in relation to the phallus thereby encouraging a taboo about the testicle and scrotal sac (Bell 1965: 189, as cited in Figlio 2010: 121).

In a psychoanalytic paper by Freidman (1996), rare in its focus on testicles and their role in male psychological development, he cites Bell's important observations (1965, 1968) that testicular retractions provide the psychobiological substrate for all later castration anxieties, and that:

... because of cremaster retractions early testicle fears become deeply unconscious and are condensed into the later phallic castration complex. The enormous affect that the little boy invests in the penis is due partly to the fact that it does not actually disappear, so that the later phallic castration fantasies serve a defensive function against the earlier and more realistic testicle fears. (Bell 1965, 1968, as cited in Freidman 1996: 209-210).

Bell proposed that the little boy experiences “a testicular stage of development” that takes place between the anal and phallic stage and invokes identification with the creative and active mother. She viewed this identification as stemming from a defence against the frightening passivity of involuntary testicle retractions.

Freidman points out the feminine connotations that testicles have, not only with breasts but also in their connection with the inner body embryologically, physiologically and psychologically. (Bell 1968, as cited in Freidman 1996: 210).

I would add that the identification with mother might emanate from the fear and experience of loss (of the retracted testicles); mother’s presence may provide the little boy with a secure feminine presence that does not ‘retract’, although she does of course come and go. The anxiety associated with testicle retraction can be extended into other early experiences of or attempts to manage presence and absence, that Freud noticed in the Fort da game (1920).

Figlio highlights the trend of moving away from phallic monism that serves further to conceal the non-phallic and seminal aspect that may lie beneath more overt phallic phantasies and dreams. He cites Boehm (1931) who makes the salient observation whilst reviewing the cultural evidence for the Oedipus complex: “I am almost inclined to believe that the child’s jealousy of the parent of its own sex is

due less to the idea of pleasurable sexual union than to the envy of the capacity to beget and give birth to children” (Boehm 1931: 449, as cited in Figlio 2010: 123).

Laufer refers to reality for the adolescent boy who now has the actual capacity to impregnate, thus lending a whole new context to his genitality (Laufer M, 1976: 301). I would add to this, that incestuous phantasies can become fused or confused with reality, as there is a real physical possibility of incest with mother. I will return to the adolescent girl’s experience of the real possibility of incest with her father.

In revisiting Freud’s analysis of Little Hans (1909a), Figlio noticed that both Freud and Hans’s father do not directly address Hans’s curiosity about what father did to produce babies. Freud thought that Hans might have reached his own conclusions had he attended to his own “premonitory sensations” of excitement in his penis whilst thinking about it (Freud 1909: 134, as cited by Figlio, 2010). Figlio infers that Freud roots *the threat of extinction in sensation* making the penis the nexus of narcissistic cathexes, thus promoting a phallic definition of masculine function and castration anxiety that left out both the contribution of the father to having babies and sensations emanating from the male’s internal genital space. Semen remained absent from the analysis of Little Hans.

Instead, his theory of castration anxiety refers to the phallic stage, before testicular function, but at a time when sensations in the penis established it as an erotized organ, which could be lost and could serve as a fixation point in regression. And if it corresponded –now, as then – to a cultural stereotype of masculinity, as well as to a fixation point, then alternative representations would not be apparent, because neither analyst nor patient had the language for pursuing an investigation outside these bounds. The male

would seem simply to lack an internal procreative space and processes uniquely complementary to those in the female; and therefore, also to lack internal objects of either envy or admiration. By default, analyst and patient would represent internal resources with female imagery, and represent invasion, occupation, usurpation and intrusion with male imagery (Figlio 2010: 124).

In spite of a survey and discussion of theoretical literature on aspects of seminal masculinity, Figlio finds the fields disparate with no clear theory for the observation of non-phallic masculinity, even though depressive anxiety is central to it. Phallic masculinity and its concurrent anxieties take the lead, although seminal phantasies and anxieties exist and are there to be seen. This, he observes, is in spite of much theory and theorizing on phallic narcissism, castration anxiety, its defensiveness against femininity, male internal genital structures (Kestenberg 1968) and male destructive and reparative aims towards the female body (Figlio 2010: 135).

Medicalized Masculinity

Masculine confidence can never be purchased, because there can never be perfect potency. (Tiefer 1986).

If penile/erectile function epitomises 'true masculinity', the loss of it can feel deeply emasculating. Impotence can be injuring to a sense of virility and masculinity, if one's sense of these attributes are located mainly in the penis and its performance. Tiefer (1986) examines the significance of the use of the impotence label in the social construction of male sexuality. I will focus on two aspects of this: firstly, speciality medicine, its expansionist needs and new medical technology and secondly the male sexual script that is highly demanding. Tiefer's paper shows how these factors amongst others combine to bring about a medicalization of male

sexuality and sexual impotence that mainly limits many men although it offers hopeful options to others.

In 'Sexuality as the Mainstay of Identity' Person wrote:

What so stokes male sexuality that clinicians are impressed by the force of it? Not libido, but rather the curious phenomenon by which sexuality consolidates and confirms gender ... An impotent man always feels that his masculinity, and not just his sexuality, is threatened. In men, gender appears to "lean" on sexuality ... the need for sexual performance is so great. ... In women, gender identity and self-worth can be consolidated by other means (Person: 1980, 619 & 626, as cited in Tiefer 1986: 580).

Although this reads as dated, Tiefer is attempting to trace the social origins of the drivers of masculinity that can make impotence catastrophic, not least as *masculinity is genitally focussed* (Nelson 1985, as cited in Tiefer 1986). It is the medicalization of male sexuality that Tiefer questions especially the surgical implantation of a device into the penis, the penile prosthesis.

It struck me when reading about this that the procedure for the "inflatable" prosthesis that was used for impotence in 1978 appeared to be very like an optional part of the phalloplasty surgery for trans men today thirty years later. It raises the question of whether the penile prosthesis holds more legitimacy when it is 'resolving' impotence in a natal man than when it is bestowing the capacity for erectile function in a trans man? In both instances *there is a quest for masculine sexual function, or masculinity as sexual function*, albeit the natal man is born with a penis and the trans man is not.

Tiefer remarks on the impotence industry that promotes the potential solution to male sexual dysfunction in the form of the penile implant. She describes the booklet 'Overcoming Impotence' as having a tone that is "relentlessly upbeat". I wondered about the purpose or metaphor of this tone as a wish to subliminally convey the promise of a phallus that will not disappoint, perhaps an allusion to a never-ending erection. She points out the message to the reader that the problem will be solved through a mechanical solution that renders the person as irrelevant (Tiefer 1986: 586). It is the absence of focus on the psychogenic aspect of potency difficulties that Tiefer is curious about, as she cynically comments:

Thus the search for *the* etiology that characterizes so much of the biomedical approach to male sexual problems seems to have less to do with the nature of sexuality than the nature of the medical enterprise. (Tiefer 1986: 586).

Pharmacological Masculinity

Preciado (2013) coined the term 'pharmacopornographic' in his book about the relationship and influence of techno-capitalism, global media and biotechnologies on a new bodily experience; one that is exposed to surgery, endocrinology, and biotechnology. This is a body that *wears its psyche externally* as it is subjected to these new technologies that also include technologies of representation such as photography, cinema, television, cybernetics, video games etc.

After World War II, the somato-political context of the body's technopolitical production seems dominated by a series of new technologies of the body [...] and representation [...] that infiltrate and penetrate daily life like never before. These are biomolecular, digital and broadband data-transmission technologies. This is the age of soft, featherweight, viscous,

gelatinous technologies that can be injected, inhaled - “incorporated”.

(Preciado 2013: 77).

The (prescient) name that Preciado gives to this new era is “pharmacopornographic capitalism”. Preciado is looking at the body from the outside in, which creates an interesting new angle to the usual psychoanalytic stance. I associate the external psyche with an exoskeleton. He is also not separating the body (its form, gender, sexuality) from the political context that the body is subject to: freely available pornography online and the pharmaceutical industry that makes substantial profit from the sales of hormone replacement therapy. His thesis implies that capitalism thrives from and feeds the ‘requirements’ of the mind and body. Preciado states:

The success of contemporary technoscientific industry consists in transforming our depression into Prozac, our masculinity into testosterone, our erection into Viagra, our fertility/sterility into the Pill, our AIDS into tritherapy without knowing which comes first: our depression or Prozac, Viagra or an erection, testosterone or masculinity, the Pill or maternity, tritherapy or AIDS. This performance feedback is one of the mechanisms of the pharmacopornographic regime (2013: 34-35).

I think that not knowing which comes first is highly significant and relevant to the cultural explosion of multi gender identities, gender always being rooted in a cultural climate both internally and externally. Preciado sees the death or dearth of an *inside* to be discovered in sex or sexual identity. He sees the pharmacopornographic industry as the *invention of a subject* followed by its global reproduction (2013: 35-36).

In my view, the death of an inside and the externally worn psyche relate to aspects of gender identity that I am exploring in the context of how outer and inner reality coincide, particularly with psychic registration of the difference between the sexes. The desire for or feeling of maleness in the mind can drive the motivation for outer reality to match the conviction of inner reality. A trans man will usually want to be perceived as male not only by his mind's eye but also by the gaze of the other.

External reality, via the external gaze that looks and perceives a body *might have to alter* in order to correspond and equate with the inner reality of how a trans man feels himself to be. Segal (1957, 1986) gave the term symbolic equation to extreme experiences of conflation of outer reality and inner phantasy, in which the symbol substitute is felt to actually be the original object. The substitute is recruited so as to deny the absence of the ideal object or to control a persecuting object. In this sense the object cannot be represented by a symbol. (1986: 57). Fonagy & Target (2000) write about the phenomenon of a dual psychic reality and hence a kind of playing with reality. They describe borderline patients' failure to mentalise adequately as:

... the persistence of an undifferentiated mode of representing external and internal experience. This is rooted in a childlike understanding of mental states in which feelings and ideas are construed as direct (or equivalent) representations of reality with consequent exaggeration of their importance and extension of their implication. (2000: 853).

Physical reality becomes the same as unconscious as well as conscious feelings or experiences, and this equivalence restricts the capacity to suspend the immediacy

of their experience, or play with reality. It can be thought of as a defensive attack on or disavowal of difference, or feelings that threaten through their intensity, that cannot be accommodated and lead to concreteness. The concrete state of mind cannot, will not, or does not want to see that 'this means that' which is central for the comprehension of interpretation, metaphor and symbolisation and hence the reality of difference is eradicated. There appears to be a defensive protest against difference in concreteness, an attempt to make the 'outside' (external reality) converge with the 'inside' (internal psychic reality) which creates the illusion of undifferentiated symmetry. The writing of Matte Blanco (1975) expands on the structure of symmetry and asymmetry in the unconscious. An attack on or disavowal of difference, flattens out the existence of two sexes, the sexual couple and primal scene and the difference between the generations. These correspond to Money Kyrle's facts of life, as necessary albeit challenging to metabolise for optimal cognitive development (1971).

The Freudian, Lacanian, Lesbian and Feminist Phallus

The Freudian Phallus

In the same way that Freud might have benefitted from Melanie Klein's ideas, he might have also been intrigued by Lacan's ideas about the phallus. According to Laplanche & Pontalis (1973: 312-314) Freud does not make a particular distinction between the penis and the phallus, and the term phallus appears in his writing infrequently. He refers to 'the phallic stage' (1923) as a stage of libidinal development following on from the oral and anal stages of development for both sexes, a stage which is highly significant as it includes the castration complex as well

as the establishment and resolution of the Oedipus Complex. The 'having or not having' the phallus is not quite the same for Freud as the Lacanian meaning of this presence or absence as a signifier of desire; although Freud does encompass in his use of the term both the anatomical part of the body and the virility that it symbolises in the child's mind in relation to objects.

Although Freud cited the phallus in his theory of symbolism as a universal object of symbolization, its blueprint as the male penis has subsequently been controversial. There is some ambiguity in the use of penis or phallus for Freud, its unconscious or conscious meaning, how it fits into a symbolic equation, or is used interchangeably: the daughter substitutes her wish for father's phallus with her wish for a baby.

This ambiguity extends into penis-envy:

The term '*Penisneid*' crystallises an ambiguity which may be a fruitful one, and which cannot be disposed of by making a schematic distinction between, say, the wish to derive pleasure from the real man's penis in coitus and the desire to possess the phallus *qua* virility symbol (Laplanche & Pontalis 1973: 314).

The Lacanian Phallus

The phallus as devised and defined by Lacan represents potency but is not the penis. As Bailly puts it:

The whole point of the word *phallus* is that it refers to an entirely imaginary object invested with an *entirely imaginary and undefined power*: it is the imaginary-ness that is important ... Lacan appropriated the word to denote the imaginary object-of-power that the infant hypothesises *draws mother away*, or that *perhaps I have, which brings her back*: it is an imagined perfect object (Bailly 2009: 76).

That which takes mother away more often than not is the father, or something that the father has and can give the mother. The father enters the scene of both reality and the unconscious, and sets in motion the notion of a third. Lacan calls this new metaphoric structure the Name-of-the-Father. It does not have to denote a live and present father, but can be abstracted as the 'Other' person who brought the child into existence (2009: 79). The Other also has the function of liberating the child from a frightening form of (more primitive) omnipotence; it also reformulates mother's omnipotence in the child's mind as she has needs and is not entirely self-sufficient and all powerful. This Other for the child is both a loss of being all powerful and also an aid to reducing mother as all powerful and hence frightening (2009: 80).

The child's submission to the paternal metaphor also paves the way towards Symbolic functioning. Mother has to enable this metaphor to take shape in the child's mind, through sufficient forms of communicating it. If these do not happen, a failure for the child of these structuring developmental moves can occur. The absence of the communication to the child of the Other in her (mother's) mind can lock the child into something trapped, dyadic and frightening with mother, or the belief that (s)he is the mother's phallus: a law unto himself. Both these scenarios can lead to extreme forms of social instability and the potential absence of the symbolic realm.

Early awareness of the phallus and moves towards accepting it assist the child towards acceptance of the symbolic castration that are set in motion by this metaphoric structure of the Name-of-the-father/phallus hypothesis. It functions as

protection from anxiety and in time the child can come to realise that no one has the phallus. This stage can be reached through the acceptance of castration, the phallus eventually becomes relegated to the field of lost objects, objects that were once lost but can be regained.

Inequity in the distribution of the phallus

Gallop (1981) points out that Lacan pursues work on sexual difference that refers to Jones in the very year that Jones died in 1958. Phallocentrism appeared 'wrong' or disproportionate to Jones, as he states in his article on symbolism: "There are probably more symbols of the male organ itself than all other symbols put together." (1916: 103). However, in spite of this finding and Jones' dissent from Freud on female sexuality, Gallop sees Jones as sidestepping this 'disproportion' and moving away from it into a more general discussion of sexual symbols that are equally applicable to males and females. So, although Jones gets credit as it were, for advocating an equal place for female sexuality in psychoanalytic theory, Gallop reads this missed opportunity as a denial or disavowal (*Verleugnung*). The very word that Freud applied to the traumatic experience of the perception of castration, especially the absence of the woman's penis. She states:

... it is striking that Jones's response to the discovery of a sexual inequity first in symbolism and then in psychoanalytic theory coincides with Freud's description of a certain response to the discovery of an inequity in the distribution of the phallus (Gallop 1981: 255).

When Jones proposes *aphanisis*, the total loss of sexual libido, as an alternative to castration anxiety (the fear of phallic loss) in the comprehension of female sexuality, Gallop sees this move of Jones in 1916 from the phallic to sexual symbols

as one that he repeats in 1927 when he moves from phallic symbols to sexual symbols. She sees this as Jones acting out the very mechanism (*Verleugnung*) that Freud advocated when a disturbing perception is disavowed.

Lacan takes an altogether more blatant approach to the phallus by stating that “The phallus is the privileged signifier” (1966: 692). Lacan moves *from symbols to signifiers*: it is through the function of the phallus as a (privileged) signifier that its symbolism can be conceived. Gallop, perhaps somewhat ironically, sees that what Jones lacked was access to both modern linguistic theory and the rule or ‘domination’ of the signifier over the speaking subject. She sees Lacan’s insistence on returning to Freud’s concept or experience of castration as a conceit, as it revisits and relocates the centrality of the phallus or “retains a term that unveils the obscene privilege of the phallus”. Gallop states that: “... it is glaringly disproportionate for one particular signifier to “designate” all the effects of signification” (1981: 257).

The Feminist Phallus

Jane Gallop and Judith Butler, American feminist academics, attempt to decode the phallus and its meaning. They are both well versed in the psychoanalytic writing of Freud and Lacan, and are both highly skilled in their capacities to excavate meaning from these texts. My focus will be on the penis/phallus distinction, Butler’s concept of the ‘Lesbian Phallus’ and my own ideas on the ‘Trans Phallus’.

What emerges from my reading of their understanding is the difficulty for the phallus as a concept to dissociate itself from the penis, although it is not the same

as the penis. This appears to happen even if we think of the phallus as ungendered, and equally applicable as a concept to male and female experience. It is robustly masculinised, which could be attributed to how it was held in Freud's mind originally in relation to infantile sexuality and the phallic stage. As Gallop put it:

The phallic phase is organized by the opposition phallic/castrated (one either has a phallus or one has nothing); adult sexuality, according to Freud, is organised by the distinction masculine/feminine. The phallus thus belongs to a monosexual logic, one that admits to no difference, of no other sex; whereas the penis can be inserted into the realm of adult sexuality, where it can encounter the feminine. [...] To distinguish penis from phallus would be to locate some masculinity that does not necessarily obliterate the feminine. Yet it remains an open question whether there truly exists any adult sexuality, whether there is any masculinity that is beyond the phallic phase, that does not need to equate femininity with castration. (1988: 125).

Gallop recognises the need to think of a masculine that is not phallic and to think of sexuality that is not caught up in the phallic phase. This both necessary and impossible task throws the penis/phallus distinction into a double-bind that can remain endlessly circular (1988:127). My understanding of Gallop's grievance with the Lacanian position on the phallus, is that although phallocentrism is not the same as androcentrism for Lacanians (because the phallus is not a penis) and although the signifier phallus is distinct from the signifier penis, it does at the same time always refer to penis. In this way Lacanians want to have their cake and eat it: they wish to polarise synonyms and locate meaning in language but perhaps also control meaning through language (1988:126). Lack of this capacity to control the meaning of the phallus leads to what Lacan called symbolic castration.

Parker (1986) attempts to understand how reference to the body regulates and limits the discipline of psychoanalysis. He explores the Freudian and Lacanian stances on the place of the body and how it fits between the unconscious and the anatomical. Given that Freud saw hysteria as a “malady through representation” (Laplanche & Pontalis 1973, as cited in Parker 1986), Parker asks whether representation can be viewed as the “... malady of psychoanalysis ...” (1986: 98), because it relegates hysteria to an unconscious realm prior to and other than the body. He juxtaposes Lacan’s sentence “There is nothing in the unconscious which accords with the body” (1958, 1982) with Freud’s ‘instruction’ to keep psychoanalysis separate from biology. The “swerving” from the body is seen in Freud’s Three Essays and the deviation is seen in Lacan’s semiotic order that does not refer to the body but to internal relations between signifiers. It is in relation to the phallus that the distinction between signifier and referent can collapse, as Gallop pointed out. Parker argues that, “... the phallus cannot not be confused with the penis” (1986: 101), and that the body never ceases to haunt the presumed autonomy of the unconscious. The conundrum appears to lie at the frontier between the mental and the physical, where Freud placed the drive; and between psychoanalysis and biology that cannot remain permanently divorced.

The Lesbian Phallus

In Butler’s paper on the lesbian phallus, she writes that “... any reference to a lesbian phallus appears to be a spectral representation of a masculine original ...” (2011: 33). She discusses the difficulty of the accessibility of anatomy through an imaginary schema that denotes the indissolubility of the psychic and the corporeal

(2011: 35-36). She questions where and what the body is, if it can only be psychically and phantasmatically invested albeit through projection: "Bodily contours and morphology are not merely implicated in an irreducible tension between the psychic and the material but *are* that tension." (2011: 36). Butler elaborates that although the process of signification is always material, that which allows for a signifier to signify is never only its materiality, it necessitates an expansion of linguistic relations. There is constant ongoing negotiation between *referent* and *signified*, the materialities of language and the world it attempts to signify (Butler 2011: 38).

I intend to discuss further the place of the maternal body as a palimpsest for all other emotional, psychological, physical, gender and sexual development. Lacan's mirror stage (1936) and concept of The Real (1953) are relevant here as are the foundations of Object Relations in (classical) psychoanalytic theory. There is no escape from the reality of the maternal body as the *original* body. I discuss the lesbian phallus as being tied to and yet freed up from an original. Nguyen writes about the lesbian phallus:

For the phallus to maintain its power, it needs to remain veiled as, according to Lacan, its exposure would also be a revelation of its lack (Jagodzinski, 2003). As such, the lesbian phallus might be the ultimate phallus, for it exists only in an endlessly deferred chain of signification (Rosenberg, 2003). The lesbian phallus *can* not be the dildo/strap-on in ways that the male phallus can never *not* be the penis, and the removal of the lesbian strap-on does not produce the same sense of de-phallicization as the removal of the penis. The lesbian phallus does not experience the threat of being severed as it is already severed and is instead located elsewhere, but exactly where cannot

be determined. Thus the lesbian phallus is “radically unbegotten” and “the more we want to see it, the more the lesbian phallus becomes a joke at the expense of the visual field altogether”. (Nguyen 2008: 678-679).

This next section that I will quote is highly applicable to the trans phallus. Nguyen quotes Hart:

... the lesbian dick *is* the phallus as floating signifier that has no ground on which to rest. It neither returns to the male-body, originates from it, nor refers to it. Lesbian-dicks are the ultimate simulacra. They occupy the ontological status of the model, appropriate the privilege, and refuse to acknowledge an origin outside their own self-reflexivity. (Hart: 1996 in Nguyen 2008, 678-679).

Hsieh (2012) proposes that feminists and psychoanalysts turn away from the metaphysical language of the phallus. She admires Butler’s analysis of the lesbian phallus but feels that it is still founded on the realm of the phallus, thereby reproducing the master’s system. Hsieh appears to be both discrediting of and advocating for psychoanalysis in current thinking about femininity and sexuality. She elaborates that:

In the ‘post phallic’ scene of poststructuralist feminism, Power is sexing rather than sexed, and sexual oppressions can only be tackled when the encompassing Power/Discourse is deconstructed. With the turn to Power it seems that feminisms are done with the Phallus (2012: 101).

Hsieh cites Moi (1999) who in turn cites Wittgenstein’s (1953) notion: “A *picture* held us captive. And we could not get outside it, for it lay in our language and language seemed to repeat it to us inexorably” (Wittgenstein 1953: 1. 115). Moi puts forward the idea that the opposition of sex and gender, the language of phallus and penis and the endless discussion of the outside and the inside fall into

this concept of the picture that holds us captive (Moi, 1999, as cited in Hsieh 2012: 102).

Lacan takes issue with Abraham for introducing the notion of part objects, disliking both Melanie Klein's notion of introjected body parts and Ernest Jones' adoption and acceptance of these ideas. Lacan does not think that the phallic phase should be understood as a repression. In the light of these 'rejections' Butler asks:

If the position for the phallus erected by Lacan symptomizes the specular and idealizing mirroring of a decentred body in pieces before the mirror, then we can read here the phantasmatic rewriting of an organ or body part, the penis, as the phallus, a move effected by a *transvaluative denial* (my italics) of its substitutability, dependency, diminutive size, limited control, partiality. The phallus would then emerge as a symptom, and its authority could be established only through a metaleptic reversal of cause and effect. Rather than the postulated origin of signification or the signifiable, the phallus would be the effect of a signifying chain summarily suppressed. (Butler 2011: 49).

Further questioning emerges for Butler about whether the body (in pieces or parts) before the mirror is (initially) without the phallus, symbolically castrated, but comes to have or assume the phallus through specularized control (through the ego that is constituted in the mirror). She sees the phallus already there, however, in the described body that is in pieces before the mirror hence "... the phallus governs the description of its own genesis and, accordingly, wards off a genealogy that might confer on it a derivative or projected character". (2011:49)

Rose explains the Lacanian phallus thus:

... the phallus is not a fantasy, if what is understood by that is an imaginary effect. Nor is it an object (part, internal, good, bad, etc...) in so far as this term tends to accentuate the reality involved in a relationship. It is even less the organ, penis or clitoris, which it symbolizes. And it is not by accident that Freud took his reference for it from the simulacrum which it represents for the Ancients.

For the phallus is a signifier ... (Rose [1982:79] as cited in Butler 2011)

Butler is sceptical about Lacan's claim that the phallus "is not an imaginary effect", as she sees it elevated to the status of a privileged signifier by his own convergence of meaning onto it. The way that the phallus is dependent on the penis is taken up by Butler, she sees a relation of identity holding between them. But this dependence is complicated as the phallus is bound to the penis through "determinate negation". By this she means that the phallus both needs and negates the penis, but also that "... the phallus would be nothing without the penis". The question that follows is why the phallus requires this particular body part, and why it could not symbolise other body parts, which paves the way to the lesbian phallus. This (other) phallus incorporates both *having* and *being*, the threat of castration and castration anxiety (2011: 51). Butler cleverly shows how the lesbian phallus is no different to the 'non lesbian phallus' and from this she concludes that the phallus takes up an ambivalent site of identification and desire that differs in a significant way from normative heterosexuality. The (Lacanian) "veiled" phallus has a place within lesbian sexual exchange just as it does in other manifestations of sexual exchange, because it is an idealization not a reality that a body can approximate, and hence the phallus is a "transferable phantasm" (2011: 50-53).

I have cited much of Butler's discussion as I think it has relevance to an understanding of the trans body, and the resignification of masculine to feminine. She points out that her introduction of a lesbian resignification of the phallus pulls into question the stability of masculine and feminine morphologies, as does trans identity qua "the crossings of phantasmatic identification" that Butler cites. It might be controversial to posit the idea that maleness for a natal female is 'phantasmatic', and more equitable to think that there are phantasmatic aspects to the adoption, adaptation and inhabiting of the other sex.

The Phallus in a new Temporality

The phallus is what one had in the past but lost or what one has in the present but fears losing in the future. This is the normative temporality of the phallus; that the phallus has been or will be lost, that the phallus is imbued with pastness whether in the present or in the future. This overwhelming pastness of the phallus, its insistent connection to loss even when it is present is what we call psychoanalytically castration anxiety. (Gallop 2019: 16-17)

Gallop (2019) introduces the idea of thinking about the phallus in a different temporality to the one in which it is held in (Freudian/Lacanian) psychoanalytic theory. She is interested in transposing the phallus into a new temporality, where it might appear not only in the past but as something promising in the future. She sees the (normative) temporality of castration anxiety as that of losing it once and for all. With a different kind of queer temporality there is the scope to move from castration to phallus as well as in the other direction (2019:20). What can return in this new temporality is different to the normative phallus, that which belongs to a

man and not a child, that which can impregnate a woman. It is a perverse phallus, albeit no less exalting.

Gallop advocates for a departure from 'the normative hold of reproductive sexuality' to enable entry into other phallic temporalities, and sees the limitations of a temporality that only goes in one direction, namely that of progressive decline. She applies the notion of castration to experiences such as aging or the onset of disability where something once had, is lost, but can be regained in a different form. She thinks of castration anxiety as combining a loss of sexuality with a loss of gender identity.

In some respect the trans man's phallus shares in this perverse temporality, that is unbound by normative physicality. The notion of the phallus 'in the mind's eye' that Gallop discusses seems relevant to the experience of non-phallic masculinity in the trans man. In her demarcation between femme and butch lesbians, she describes femmes as phallic because of how they look and butches as phallic because of what they do. The issue of *being the doer* is significant in relation to who in the primal scene the infant boy or girl identifies with, and later on what role or identification in phantasy one wishes to have sexually when with another. A trans man may not be comfortable in his pre-transition identity as a girl with a boy, or a girl with a girl, but might be more comfortable as a trans boy with a boy or a trans boy with a girl. This strikes me as being connected to an identification with the (phantasy of) the person who 'does' to the other, rather than the person who 'receives' from the other. Clearly there can be multiple identifications between two people within the sexual act, as Freud pointed out in a letter to Fleiss in 1899 (1985 Masson: 364). My

interest lies in a specifically masculine identification, which may denote (in phantasy or reality) more control or power, the control or power of possessing the phallus. This might denote the illusion of masculinised sexual control in relation to the desired other; in this context the identification in the primal scene is with the father and definitively not with the mother.

Female Masculinity

... I do have a few proposals about why masculinity must not and cannot and should not reduce down to the male body and its effects.

(Halberstam 1998: 1).

Although I am differentiating non-phallic masculinity from female masculinity, they have some things in common. The term 'female masculinity' as described and elaborated by Halberstam has sought to define a form of masculinity that is *not rooted* in the (natally) male body and can be enjoyed and experienced *in and of itself*. It dissents in its meaning from male and masculine forms of masculinity. My attempt to distinguish female masculinity from the non-phallic masculinity of some trans men throws up the distinction between *what it means to be masculine as a female who wishes to retain a female identity and as a trans man who wishes not to*. There has been conflict between these identities and identifications, not least as trans men can at times be perceived as turning away from femaleness and hence turning away from feminist ideologies. This differentiation is central to the identity of trans men: the drive to identify *as male and be identified as male* and not remain a masculine female (lesbian) or retain aspects of female identity. The wish not to be identified as a lesbian appears to be a central aspect of trans male identity (my italics).

In her book 'Female Masculinity' Halberstam attempts to prise masculinity away from the white male middle class body and hence away from structures of privilege, power and patriarchy at large. She makes a case for the recognition of another form of masculinity rooted in the female body that is not new and has been in existence (albeit covertly) since the nineteenth century. She refers to 'epic masculinity' characterised or stereotyped in Bond films in which the white male hero's masculinity is supported by a massive sub-structure of government groups, the army, well funded scientists, beautiful good and bad women and (always) a bad guy (1998:4).

My understanding of Halberstam's approach and analysis in her book is that, writing in the late twentieth century, she is frustrated by a lack of space for female masculinity that does not hinge on male masculinity. She sees the adolescent tomboy girl as struggling with the onset of puberty as this goes against her masculine identity. I would add here that the onset of puberty ushers in a reality that affirms femaleness for the tomboy girl in a way that can be especially difficult if this (visceral) femaleness is unwanted or disavowed. It is a particularly difficult aspect of development as femaleness and female sexuality in the form of growing breasts and menstruation make themselves known corporeally. The disavowal or rejection of femaleness becomes impossibly challenging.

Whereas pre-pubescent tom-boyishness is acceptable to parents, Halberstam points out that it is not so easily accepted post puberty, when pressures can come in (for the daughter) to become and look more feminine and hence to conform to and comply with her birth gender. Portrayals of female tomboys in popular cinema,

as surveyed by Halberstam, show this more as a resistance to grow into adulthood rather than the more specific resistance to adult femininity. I am not convinced that these are distinct entities, as growing into adulthood as a female might well include an acceptance of femaleness and femininity and all that this might entail sexually whether it is desired or not.

The mission that Halberstam sets out to achieve in her book is to make her own female masculinity “plausible, credible and real”:

For a large part of my life, I have been stigmatized by a masculinity that marked me as ambiguous and illegible. Like many other tomboys, I was mistaken for a boy throughout my childhood, and like many other tomboy adolescents, I was forced into some semblance of femininity for my teenage years. When gender-ambiguous children are constantly challenged about their gender identity, the chain of misrecognitions can actually produce a new recognition: in other words, *to be constantly mistaken for a boy, for many tomboys, can contribute to the production of a masculine identity* (my italics). It was not until my midtwenties that I finally found a word for my particular gender configuration: butch (1998: 19).

Initially Judith, now Jack Halberstam saw the adoption of ‘butch’ as a viable term for her own masculinity. This precedes a subsequent trans identification as Jack Halberstam with the preferred term: trans* as it advocates that the asterisk better captures the provisional nature of sex reassignment. It endorses the non-specificity of the term “trans” and expands it beyond “the life narratives of a specific group of people” (Halberstam 2018: 53).

The description above could also apply itself to the identity of some trans men, who feel masculine albeit not necessarily butch. There is a significant distinction between the female masculinity of a lesbian woman who may or may not wish to be butch and some trans men who do not want their masculinity to have female associations or necessarily wish to be 'stereotypically' masculine. There have been tensions if not wars, between feminists, lesbian women, and trans men, in which trans men can be seen to have turned away from femaleness and signed up to masculine maleness, and feminists can be seen to have rejected trans men or trans women. The derogatory term 'Trans Exclusionary Radical Feminists', known as 'Terfs' has gained currency in the last ten years. This clash of allegiances reflects the tensions that can and do emerge in the fragile yet highly differentiated territories of sexuality and gender.

The Masculine Vaginal, Female Phallus and Trans Phallus

If the phallus can be de-linked from the penis and is ungendered, the vagina can be thought about as a female phallus. Even if it were to be called 'Phallussa', it would still have a male origin: it is difficult to de-gender associations to the phallus. Griffin Hansbury (2017), a psychoanalyst who is openly a transgender, has written about a female symbolic counterpart to the Phallic in his paper: 'The Masculine Vaginal: Working with Queer men's embodiment at the transgender edge'. In this paper Hansbury clarifies his concept as the embodied experience of many transgender men, he also thinks this concept is applicable to natal gay or heterosexual males. He discusses a clinical case of a gay man who treated his anus as a vagina, physically and symbolically. Hansbury describes the versatile relationship of the body to its

various representations as the ‘transgender edge’. This is a space in which men who are cisgender¹ or not can develop the freedom to explore ‘other gender’ aspects of their sexual fantasies and experience: what Kubie referred to as the “drive to be both sexes” (1974). This “is a border that, when unpoliced, becomes porous, allowing outlaws to penetrate, sliding into a zone not easily defined” (2017: 1010).

Hansbury describes the Vaginal:

I hope here to delink the Vaginal from the strictly female so that, like the Phallic, it can be more acceptably accessed by the analyst working with people of all genders and all sexes. This concept goes beyond the conceptual to the real, embodied experience of many transgender men, who live in whole, partial, and/or temporary “female” bodies (2017: 1010).

He goes on to ask “a transmodern” question:

... can we conceive of the vagina and the symbolic Vaginal as multivalent, by turns feminine and masculine, depending on who is using it, in what style, and to what aim? (2017: 1015)

Lacan dislodged the anatomical penis from the biological to the symbolic in ‘The Signification of the Phallus’ (1958, 1982). He saw it as central to the whole symbolic order inhabited by the human subject. This brought about a momentous shift from body to symbol, a severance from ‘anatomy is destiny’, rendering all human subjects as symbolically castrated with their own individual relation to the phallic signifier. As Wilson, who introduces Hansbury’s paper, describes:

Anatomical form and function – a classically normative pairing – are increasingly *queered*, as the simple binaries of male/female,

¹ This term is used to describe someone who identifies with their phenotypical sex. For some, this is a controversial term as it is seen as based on a scientific syllogism.

heterosexual/homosexual, vagina/anus are questioned, problematized, and deconstructed (Wilson 2017: 1006).

Moss (2017), in his paper 'Pussy Riot: Commentary on Hansbury' argues that the 'psychoanalytic edge' subsumes the 'transgender edge'. He asserts that the Masculine Vaginal for Freud would be "... a product of psychic polymorphous fantasy ...", and that "... Hansbury is granting extraordinary, transmutative power to psychic reality" (Moss 2017: 1053-1054). This power eradicates the difference or edge between psychic and material realities as seen in psychosis, or hallucinations in which the object that is perceived is not there. Saketopoulou (2017), another respondent to Hansbury's paper, is more embracing of the emergent possibilities of his new ideas calling for the need for "new translational forms" and a new discourse in order for diverse and non-normative gender identities to be understood clinically (2017: 1040).

Non Phallic Masculinity and the Trans Phallus

The masculine Vaginal as invoked by Hansbury introduces the concept as a helpful psychic and symbolic space to be acknowledged, explored, opened up for interpretation. It undoes the shame sometimes associated with female or feminine identification or desire. My interest is in thinking about this more specifically in relation to trans men who identify as male and masculine, and who are usually more concerned with having top surgery (an excision of the more visible female anatomical part of the body). This brings into focus the notion of a trans phallus as well as the complex awareness of having a vagina.

Phantomization is a not unusual aspect of transgender embodiment (Ramachandran & McGeoch 2008). Trans men can experience the feeling of having a penis without any genital reconstructive surgery (Hansbury 2017: 1011). I discuss Stoller's ideas about a sense of masculinity with or without a penis in chapter one. I have referred earlier in this chapter to the Lesbian Phallus and to Female Masculinity. A woman may present as phallic in aspects of her identity or identifications. Hansbury introduces the "empowered male vagina", not as emasculated or castrated, but as a counterpart to the Phallic accessible to all genders and sexes.

I introduce the trans phallus as an aspect of non-phallic masculinity; it is a multivalent phallus unconstrained by phallic symbolism. It is transient, transplantable, transportable and transgressive, not least as it is psychically and imaginatively created. It is not unlike Winnicott's notion of transitional space (1951,1987) although in this instance it can bridge the transition between gender identifications. The trans phallus is also akin to a conception that is met by a realisation not unlike Bion's theoretical proposition that thoughts precede thinking. An infant can have an innate pre-disposition to expect a breast (the pre-conception), the realisation occurs when it meets the breast, but the thought only arises from the frustration brought about by the absence of the breast which provides the apparatus for the thinking of thoughts (1967, 1984). I have brought in Bion as the phallus is linked to an absence that creates a desire. It is that which is in the mind of the infant's mother that he/she cannot fulfil. Similarly, the trans phallus

is elusive, powerful and desired. The trans phallus like the Lacanian or Lesbian phallus is linked to a lost object that splits the subject.

The term 'phallic' is metaphoric and symbolic, it denotes a particular kind of masculine functioning, personality trait or aspect of identity initially derived from a stage of genital psychosexual development as described by Freud (1923). If one joins this word up with masculinity, it expands the metaphor and locates it more specifically in relation to a masculine and non-feminine way of being. If one negates the term 'phallic' through the description and term 'non-phallic masculinity', it both negates and enhances the metaphor into something more transient and less categorizable as I suggest might befit the desire and identity of some trans men. Although I refer to non-phallic masculinity and the trans phallus, it might be equally fitting to use the terms non-genital masculinity and the non-genital phallus.

Après Coup Masculinity

The term *après coup* has garnered various psychoanalytic meanings. Whereas Lacan (1953, 2004) initially drew attention to Freud's concept *Nachträglichkeit* in his discussion of the Wolfman, Laplanche & Pontalis (1973: 111-114) highlighted its importance in Freudian theory where it links to a reconfiguration in the mind subsequent to sexual maturation: "Human sexuality, with the peculiar unevenness of its temporal development, provides an eminently suitable field for the phenomenon of deferred action" (1973: 112). Strachey translated *Nachträglichkeit* as 'deferred action'. In psychoanalytic practice interpreting in the 'here and now' subsumes the existence of *après coup*, as the session material in the present is

more often than not seen to be a live version of past object relationships. I wish to focus on the aspect of the concept when something in the present is perceived with a retrospective meaning and the application of this phenomenon to gender identity.

Birksted-Breen (2003) discusses the workings of a complex temporality in the 'here and now' that incorporates the ambiguity of the two directions of temporality: the past in the present and the present in (or perhaps as) the past. The past in the present is generally presumed to be a reinterpreted past as seen in the present unfolding through the prism of internal object relations within, into and onto the setting of the analysis and the specific analytic dyad. Breen refers to this as "*... a new creation of the past.*" (2003: 1503). This phrase has particular poignancy in relation to gender identity when the past identity is at times *re-visioned through the present lens of who I am now*, that can convert into *who I have always been: I am therefore I was*. This re-vision can revise unwanted history and tamper with temporality that includes natal sex, childhood and sexual development.

The Sexual Unconscious

For Laplanche the unconscious is the enabling condition for language and in this way of thinking he dissented from Lacan's view that the unconscious is structured like language. Laplanche (1987) understood the infant as being on the receiving end of not only care but also 'enigmatic signifiers' through the attachment relationship to its caretaker. These signifiers are transmitted through the sexual unconscious of the parent. The infant is thus subjected to or perturbed by not only the asymmetry of the parent/infant dyad but also to messages that cannot be translated or

decoded by the infant. This was described by Laplanche as “... a thorn in the flesh of the ego ...” (1987: 129), denoting an irritation that impels the child’s attempt to try and make sense of the enigmatic message by trying to translate it. As it cannot be translated it sediments and forms the subject’s sexual unconscious through primary repression. The enigma, which is unconscious for the parent, is translated through the borrowing of existing cultural forms of the family and from the mytho-historical, and through what is already intelligible both socially and culturally. Laplanche discussed gender as “... a product of culture nominated in the effort to cull the untameability of the infantile sexual.” (Laplanche 1987, as cited in Saketopoulou 2017a: 51).

I extrapolate from this theorising of Laplanche that ‘après coup masculinity’ can be thought of as a form of decoding the enigmatic message transmitted from the parents to the infant’s sexual unconscious.

Concluding thoughts

In this chapter I give an overview of forms of masculinity, and attempt to open up an understanding of the terms ‘non-phallic masculinity’, the ‘trans phallus’ and ‘après coup masculinity’ particularly in relation to the gender identity of trans men, that I do not view as a homogenous group with a cohesive identity.

I explore the term masculinity broadly, concretely and symbolically not only in relation to natally assigned men but in relation to many manifestations of gender identity. I look at the meaning of the Lacanian phallus and include objections to the phallogentricity associated with it. I include the somato-psychic space of the

masculine Vaginal (Hansbury) and suggest the term 'trans phallus' in an attempt to open up thinking about how the phallus might be conceptualised or embodied by trans men. I introduce 'après coup masculinity' as a form of masculinity that restructures retrospective meaning in the present. My writing and use of theory traverses traditional and contemporary psychoanalysis including aspects of queer theory.

Physical intervention and psychological intervention are different ways of getting help with gender identity struggles that are not mutually exclusive, although there might well be more resistance to psychological help if trans men suspect that the therapist is at worst prejudiced and at best ambivalent. I have included several domains and ways of thinking about 'masculinity', the phallus and 'non-phallic' masculinity. If one understands non phallic as non-penile, although biologically valid, it can miss the complex psychological terrain of transmasculine identity as a bespoke form of masculinity, one that embodies the tension not only between masculine and feminine but between sex and gender. It is bespoke, as the maleness and masculinity are worn like a made to measure tailored suit, or second skin (Bick) that is personally designed and inhabited. The second skin serves to shield and protect the natal femaleness or femininity that forms a more vulnerable core. The bespoke aspect necessarily recruits *psychic equivalence* between phantasy and reality, but not in the way that this can manifest in psychosis. It is a particular form of a *symbolic realisation* (Sechehay 1951) in which inner and outer reality become symmetrical.

Chapter 5

Fluidity, Concreteness, Representation and Temporality

It is a nebulous identity, however you conceive it. It lives in cavities. It cannot be computerised or tabulated. It transcends the body as it defies the test tube, yet the consciousness of it can be so powerful that it can drive someone (like me) relentlessly and unerringly through every stage of life. (Morris 1997: 156)

In this chapter I will describe early states of infancy, when sensory experience is bodily, and the mind is pre-symbolic and pre-metaphoric. I look at symbolization, phantasy and moves towards representation as well as fluids that reveal the female and male body as responsive sexually. I address concreteness in relation to a developmental capacity to symbolise, represent or use metaphor. I question and explore whether aspects of altering the body to meet the psychologically constructed or aligned gender can at times be thought of as manifestations of concrete functioning.

I will also focus on forms of representation that cannot be put into words (Botella & Botella 2005) and on translation in the context of Laplanche's (2011) concept of enigmatic signifiers, transmitted from the parent's sexual unconscious. I look at the link between unrepresentable psychic states and untranslatable enigmatic messages to the forming of gender identification and identity. Lastly, I bring in aspects of negation and temporality in relation to gender.

The body's early sensory experience

The ego is first and foremost a body ego, it is not merely a surface entity, but is itself the projection of a surface. (Freud: 1923).

I am particularly drawn towards this aspect of early life in which the infant, through a combination of phantasy and reality, builds up a personal universe that begins with concrete bodily sensations of repletion and depletion, filled up (sated) and emptied out (void), ingesting and expelling, warm and cold, touch and isolation, something or somebody there and not there, all of these creating the universal origins of anxiety. Ferenczi refers to Freud as attributing the birth act as evoking the first anxiety affect that remains prefigurative for all subsequent anxiety and anxiousness (Ferenczi 1916, 2012: 187). Early bodily handling by mother, father or carer necessarily has a bearing on how an infant goes on to experience or hold themselves in their body, skin and psyche. As Freud pointed out the ego is first and foremost a body-ego. In the beginning *we are our bodies*, sensation is transmitted to and from the body, there is not yet a developed mind that can think *about* the body, the body and mind are one. Bodily sensations pre-empt a thinking mind.

The early sense of differentiation would be at a pre-verbal, undifferentiated stage, in the realm of sensory experience. I am hypothesising that a very small infant is aware of a sense of repletion (milk from the nipple or bottle inside the body) and depletion (a presence of emptiness or depletion that creates a cry of hunger), a feed that might upset the rudimentary digestive system, urine or faeces that the body emits, or struggles to emit, the warmth of a parent's handling, exposure and vulnerability when a nappy is being changed, immersion in water, waking up

distressed, falling asleep sated from a good feed. A gradual and rudimentary awareness of 'he-ness' or 'she-ness' might emerge from these sensory experiences of self in body or body in self. This barely perceptible emergence of difference is neither a concrete sense of the body, nor a psychic notion of being one sex and not the other. It is primitive and builds very gradually from within and from without: the different sounds of mother, father, sister, brother and the sense of an inside that is not yet separate from the outside. My description is schematic, as I am interested in the very early emergence of 'the self/ in the body/ in the world' that I conceptualise as necessarily relational. From birth and before birth there are projections from parents that land both psychically and physically. There are differing schools of thought about whether the infant is object relating from birth or not.

These sensory experiences are present before and after birth as manifestations of affective states that precede thought and language. They can be perceived, noticed, observed and described in familiar forms of language, from the outside. They have been stored or preserved in our bodily experiences, as we all know what it is to feel and be vulnerable, cold, hot, hungry, frustrated, satisfied or sated. The body and mind may not initially be separated into psychical and physical: there is fluidity between body and mind with early feeding experiences necessarily yielding the sensory experience of actual fluid that is vital for the infant's survival.

Recognising this original state of being is important, when thinking and writing about the body of adolescence and adulthood. There was once a body that was completely dependent for its survival on the care, feeding and handling of a parent

or carer. That parent's state of mind was crucial to how its baby felt in its own body early on in life. The post birth baby cannot yet distinguish him or herself from the body of his or her mother or primary-carer, here too there is fluidity between 'me' and 'not me'. The individual constitution of the baby, to my mind, will also have an influence on the formation of the bodily ego; not just the state of the primary object. It is unlikely that a very young infant is able to perceive whether their primary feeding object is male or female, and more likely that this differentiation comes about at a later stage, initially experience is preverbal, and pre-representational. The difference between the sexes has not yet entered the small infant's consciousness. Unconsciously it may begin to have a shape, experienced as sensory. But broadly the feeding mother is un or pre-gendered at the beginning of life.

The notion that something might feel or be like something else, the 're-presentation' develops later, when the universe opens out into a space that is less concrete through the early relational development (of language) and the emerging capacity to symbolise and think or speak in metaphors. In her examination of metaphor, Freeman Sharpe (1940: 201) maintains that the use of metaphor in language is psycho-physical, and she cites Grindon (1879) who claimed that "No word ... is metaphysical without its having first been physical" (Grindon 1879, as cited in Freeman Sharpe, 1940). Freeman Sharpe's theory is that it is only after the control of bodily orifices (in my understanding this denotes an inside, outside, retention and emission) that metaphor can evolve in language or the arts. Early

experiences of infant life are expressed through metaphor, thus converting the material to the immaterial. (1940: 202).

Holmes points out that dynamic therapy is redolent with metaphor (1992), and that metaphor, as a narrative device, is fundamental. This can manifest through a memorable image that lends personal meaning to a patient's difficulty and enables a problem to be objectified:

It lies transitionally between patient and therapist and is not wholly the property of either. It is thus 'oedipal', in the sense that it both pulls patient and therapist together and separates them from the lure of narcissistic fusion or collusion (Holmes 2000: 138).

Metaphor is seen by Holmes as the narrative equivalent of a scientific hypothesis, albeit with terms that are not interchangeable.

Phantasy

In Klein's paper "Weaning" she wrote:

... Infantile feelings and phantasies leave, as it were, their imprints on the mind, imprints which do not fade away but get stored up, remain active, and exert a continuous and powerful influence on the emotional and intellectual life of the individual. [...] Analytic work has shown that babies of a few months of age certainly indulge in phantasy-building. I believe that this is the most primitive mental activity and that phantasies are in the mind of the infant almost from birth. It would seem that every stimulus the child receives is immediately responded to by phantasies, the unpleasant stimuli, including mere frustration, by phantasies of an aggressive kind, the gratifying stimuli by those focussing on pleasure (Klein 1936: 290).

Klein thought that the child's relationship to their own body, mind, family and everyday activities was underpinned by phantasy. With the deepening of her analytic experience, she became more confident that the mother's body and its phantasied contents was what formed the initial and basic symbolic relation to the external world. This was a development of her earlier thinking, influenced by Ferenczi, who had proposed that the infant perceived the world in identification with parts of his own body (1913). Another significant influence on Klein was Abraham, who associated the oral stage of development with cannibalistic phantasies and the later anal stage with phantasies of retaining, controlling or expelling the object (1916: 258-275). This corroborated the notion Klein was to build on, that phantasies existed from earliest infant life. It was symbolization that imbued the external world with libidinal significance for her, and without this the world would have a mechanical quality as she discovered through her analysis of a psychotic child, Dick (Klein 1930; 221).

Britton (1995) discusses Klein's prescience, through her work with Dick, in suggesting a few years prior to Kanner's description of Autism (1943) that there was a childhood counterpart to schizophrenia. Dick took refuge in a phantasy of being enclosed inside the dark contents of his mother's body. This phantasy provided him with a refuge from the external world in which the symbolic representation of the internal world would be met; in this way, as Britton put it, phantasy is used as a defence against phantasy (1995: 86-87).

For Klein (1928), the Oedipal drama unfolds in relation to part objects: the infant's phantasy of father's penis inside mother's body (albeit not in a concretely sexual

manifestation). Envious feelings towards the mother bring about the wish to enviously attack and destroy the contents of her body. These phantasies stir up a fear of retaliation from the mother experienced as persecutory anxiety. For Klein envy originates in very early aggression in the form of attacking phantasies stirred up by not having what the other has; this is very different from Lacan's phallus: that which preoccupies mother's mind and takes her away from the infant to father. In the sense that both represent something the other has, I do not have and I want, there are similarities albeit occurring at different phases of development.

Meltzer's (2002) contribution to a book on babies by the Psychoanalytic Group of Barcelona beautifully describes the early life of a baby:

This is an attempt to formulate a metapsychology of the neonate: its aloneness between feeds, ignorance of the mother's mentality, schooled only by the rhythm of her services, unable to form symbols and have meaningful dreams, bound to sensation, at best anecdotal in recollection, not even linear, on the verge of chaos. It is not surprising if it comes out like Genesis. In the beginning was the feed ... In the beginning object relations and identification are simultaneous (Meltzer 2002, in Harris Williams 2010).

Daniel Stern (1985), a professor of psychiatry, had a particular interest in how babies experience the world around them and has based his theories on both research and insights from psychoanalysis. Stern argues and shows in extraordinary detail that almost from birth infants begin to differentiate themselves and then move through progressively complex modes of relatedness. He asks whether the infant can not only experience an already grasped sense of organisation but also "the coming-into-being of organization?" He makes the suggestion that the infant

can indeed experience emerging organization as a process which he refers to as the *emergent sense of self* (1985: 45).

When the diverse experiences are in some way yoked...the infant experiences the emergence of organisation. In order for the infant to have any formed sense of self, there must ultimately be some organization that is sensed as a reference point. The first such organization concerns the body: its coherence, its actions, its inner feeling states and the memory of all these. That is the experiential organization with which the sense of core self is concerned (1985: 46).

What's in a word?

In an article that explores the multiple uses and attributions of concreteness to people, Robinson (2020) finds that the term concrete by therapists denies much needed potential. He notices its overuse, and how it can be recruited to mean a mind that can no longer safely imagine. The word is applied not only to people but also to buildings as concrete mothers. The Maudsley hospital was referred to affectionately as 'the brick mother' by Henri Rey (Melanie Klein Trust) when he worked there as a psychiatrist; although not concrete, it belongs to the same category of a building material that creates maternal solidity. Robinson refers to Segal's over use of the word but also to her important conception of how symbols are transformative in the development of relationships by way of symbolization. I find it interesting that the sound of the word 'concrete' almost evokes its very substance, whereas 'symbol' has a lighter more melodic sound. Robinson surveyed 150 trainee psychiatrists about their use of the term 'concrete'. His analysis revealed that it is used in autistic clinics, eating disorder wards, psychosis teams, dementia services, anxiety and depression units and other places. He found that

trainee psychiatrists sometimes describe patients as concrete “... who don’t behave as we want them to.” (2020: 390). This can happen more frequently in personality disorder settings, in which therapists might use the word to unburden themselves from aggressive feelings towards the patient or from having to think about the patient more. He cites texts on personality disorder that describe “... concrete understanding as ... the most common category of poor mentalizing ... typical of 2-3-year-old children.” (Bateman & Fonagy, 2016, p.130, as cited in Robinson 2020). Robinson describes tensions for therapists:

As therapists, we strive to imagine in spite of feelings generated in us: hate, disgust, anger, sadness, and so on – feelings which could aid our imaginations instead of prompting us to shovel ‘concrete’ as a quasi-technical label onto patients. After all, this building material, now so reviled, was once a wonder-stuff which rescued failing structures, housed people, kept us safe from explosives: this need for safety may reflect the true origin of those concrete necessities of mind we are so quick to condemn (2020: 397).

The word is clearly open to misuse, but appears to often be relied upon to cement misunderstanding, as a stand in for something or someone who is hard to understand or configure psychologically. In that sense theory too can be used as a concrete substance that fills in the cracks of doubt or uncertainty.

The Concrete Original Object

Ferrari (1992) refers to the body as the ‘Concrete Original Object’, by which he meant the initial location and source from which mental phenomena are generated and “... against which they are constantly measured”. Lombardi takes Freud’s conception of affects (1915) as linking the somatic and the psychic as his

foundation, and further explores aspects of psychoanalytic observation that are concerned with “... *events lying between the bodily and the psychic fact...*” (Lombardi 2002: 363). I think that this relates directly to the tension between biological determinism and gender as constructed in the mind. The ‘Concrete Original Object’ was the term used by Ferrari about the body, implying that it is the initial source and location that generates mental phenomena and it is this concrete body against which these mental phenomena are constantly measured. Lombardi, writing about Ferrari’s concept and theory, emphasises the importance of how the body is perceived for the initiation of mental activity that is genuine and non-imitative (Lombardi 2002: 363).

Ferrari (1992) appears to treat analysands with great respect for their sensory functioning, almost as if he sees the newly born baby on the couch struggling with oscillations between bodily manifestations that assume mental characteristics. He focuses on the difficulties that can emerge in the stages from the concreteness of the body through to the progressive development of mentalisation to the abstraction of thought. The Concrete Original Object, with its sense organs and perceptual capacities, is different to the sense of a body in the phenomenological or medical sense.

Let us assume that mental functioning commences with the first registration of a sensory perception, so that the operations of perceiving a sensation and of registering it take on different meanings ... The registration is presumably due to the need to place the sensory perception, which would otherwise be completely invasive, at a distance and, at the same time, to confer meaning on it (Ferrari 1992: 35).

Ferrari's perspective has been thought of as unusual as he sees the 'constitutive reverie of the maternal function' as already present in the 'concrete original object' and the projective-introjective dynamics with the external world as secondary (Mancia 1994: 1286). This sequence differs from Bion's concepts and theory of beta and alpha elements (Bion 1984: 115), where only alpha elements are thinkable. For Ferarri, it is a misunderstanding in the mind-body relationship or a lack of internal dialogue in which sensory elements are rendered unthinkable. This is a revision of Bion's psychotic and non-psychotic areas of the mind (1957), into entropic and negentropic areas (Lombardi 2002: 368).

Concrete thinking

The meaning of the term concrete as applied psychoanalytically usually refers to a (defensively driven) lack of a capacity to think metaphorically or symbolically:

If one has to believe that one's perceptions provide indubitable knowledge of "reality", the possibility of interpretation is pre-empted. *To interpret always implies that one thing might mean another.* The "concrete" patient paradoxically defends against just this possibility while remaining in analysis. [...] The overall thesis I will develop is that persistent "concreteness" is the result of *complicated defences against the possibility of differentiation itself* (my italics), (Bass 1997: 645).

The term 'concrete' has been levelled at non-normative gender identities. A commonly held psychoanalytic stance might be that it is concrete to have surgery in order to re-form one's gender identity. This might not sound unreasonable, that the idea of the wish to alter the body originates in the mind that might then become concretely enacted, as is the case in Anorexia Nervosa. This implies a lack of a capacity to symbolise in the mind of the person who might believe that altering

their body will alter their gender. I'd like to offer a counter position: might the idea that gender cannot be acquired through physical intervention that follows psychic conviction also be a form of concrete thinking? It raises the conundrum of *where or in whom does the concrete thinking reside?* Might the more traditional psychoanalytic stance on gender identity require thinking that is more fluid to counter a more concrete stance as a way to avoid the binary between queer and psychoanalytic schools of thought? Is a texture of thinking that is not so oppositional or projective possible? Perhaps clinicians could benefit from expanding their 'symbolic vision' or 'gender lenses' in order to accommodate, reflect and have the capacity to include multiple and varied individual genders. This may need to have as its starting point a capacity to be uncertain and open about one's own gender. Hansbury refers to the kind of disruption that analysts might feel in the consulting room with trans patients as transphobic countertransference. He feels it is important for the analyst to have the capacity to mentalise the unmentalised in their patient (Hansbury 2017: 384, 399).

During the course of early development there comes a moment when we notice (or choose not to notice) that we are not both sexes but only one sex that is different anatomically to the other sex. How this recognition of difference becomes internalised or mentalised is highly relevant. It requires a capacity to give up the more omnipotent or 'polysexual' phantasy of being the sex that one is not (the other sex) male and female (both sexes) or neither (no sex). It marks an entry into a world in which physical or anatomical awareness has a huge impact on psychic awareness and vice versa. If I am a small girl, I do not have a penis (like my father

and brother) and if I am a small boy, I do not have a vagina or breasts and hence cannot give birth or feed babies. This can be seen as a very early stage of Klein's depressive position. It raises the poignant question: *how do we internalise the sex that we are not?* As quoted above it requires complicated defences against the possibility of difference itself (Bass); and the capacity to manage rather than disavow asymmetry (Matte Blanco) in the starkly naked truth of the difference between the sexes. It also requires a capacity to mourn the loss of the omnipotence to be all things, and triumph over the restrictions that reality and the facts of life (Money-Kyrle: 1971) impose.

In phantasy and unconsciously we can always 'be both' and in this sense there is always the scope for gender fluidity; in reality the (persistent) drive to be the other sex can necessitate concrete intervention: hormonal, surgical and psychological. The change in gender also requires the other to change in their way of orienting towards the 'new' gender. It pushes my acceptance of the reality of my gender towards your capacity to alter your perception in relation to me, and in that sense can be thought of as projective. Perhaps there is something about difference that is fundamentally unmentalizable, and especially the difference between the sexes.

Representation

Freud made a distinction between two kinds of representation: the memory of a thing (or experience) and (the verbal designation) the memory of its name (Freud 1915: 201). Whereas the preconscious mind holds 'word' presentations, it is the unconscious that holds 'thing' presentations. Freud's technique was verbal in that it

relied on words, whereas Klein's technique also had the symbolic value of children's play.

Freud wrote about the struggle to represent experience in terms of 'thing-presentations' and 'word-presentations'. Internal representations are a prerequisite for the capacity to symbolise. Difficulties with symbolising occur when there is intrapsychic conflict that can lead to repression or other defences.

Levine (2018) points out the distinction between representing in the sense of standing for and re-presenting as in presenting again:

It was Freud's genius to have understood that in order to create an inner world, a *psychic* reality that points, reflects and stands in for concrete internal (somatic) and external (perceptual) reality, the mind uses "manifestations" and signifiers, which are connected to and reflective of past experiences, especially object relations, invested with emotional quality and significance (Levine 2018: 46).

Experience that can be thinkable is re-presented when the mind can make connections between experience and the re-capturing of it. The capacity to hold an absent object in mind enables thinking to convert the loss into something present in the mind. Freud initiated this idea with Fort da (Freud 1900a). Klein called this 'memories in feelings' (Klein 1957: 180), and Bion expanded the notion of lack of a capacity to think when the absent object cannot be held in mind and the creative act of thoughts that can emerge in the mind, when the absent object can be tolerated creatively (Bion 1967, 1984: 112).

According to Levine's (2018) discussion, thought that is meaningful requires psychic work that has emotional resonance beyond the registration of events, in order for

the thoughts to become “representations”. A history of satisfaction from an object is also necessary. This is what Freud referred to in the infant’s capacity to hallucinate the first successful feed when the next moment of hunger is experienced. Hence, representation gives form to feeling, the form is linked to phantasy, memory, perception, associations and words that symbolise and signify the meaning of this construct (Levine 2018: 48).

Psychic reality for Freud is thought-reality, distinguishable from material or external reality. It is the area in which our experiences can be represented to ourselves, and it necessitates a capacity (Bion’s alpha-function) to represent experiences. When this is lacking and experience cannot be processed, it just is, the ‘non experience’ becomes what Bion referred to as beta-elements (1962, 1984: 6). Parsons elucidates the specific psychic function of representation:

The point of representation is that it is not the thing itself. It denotes what it is a representation of, but what allows experience to be processed is the separation between the representation in psychic reality and the thing itself in literal reality. The representation, in fact, is *instead of* the literal reality. Making use of the representation means setting aside, for the time being, the thing of which it is a representation, just as understanding the psychic reality of a patient’s communication means setting aside the ordinary reality of its surface meaning (Parsons 1999, as cited in Kohon 1999: 62).

Negation

Psychic reality and symbolism are closely related as both necessitate a negation of ordinary reality. Psychic work is possible within psychic reality as a result of a relinquishment of ordinary reality. Klein understood symbolism as underlying phantasy and sublimation, the foundation of a relationship with the outside world

and reality (Klein 1930: 221). If the symbol cannot be placed and held in psychic reality and it is equated to the object in ordinary reality, the differentiation is erased in the form of a symbolic equation (Segal 1957: 53). A detachment from the original object is a necessary part of symbolising: “The symbol at one and the same time points to the object and negates it as it exists in ordinary reality. Without that negation there is no symbolisation.” (Parsons as cited in Kohon 1999: 63).

Lack of a good enough object experience can create a void in which it is not possible to represent the lost object. This kind of void is different to repression, it is a negating of representation that leads to disavowal. In place of the representation or the reality of objects there is a negative, a void instead of the object in the mind’s experience. There have been psychoanalytic contributions (Green: 1998) on how best to work with this kind of presentation in analytic treatment. How can the analyst reach this void with their patient in order to help them out of it? Cesar & Sara Botella (2005) have written about ‘figurability’, a term or neologism designed to stress that what cannot be represented also cannot be understood psychically by the same means that representation is understood. It requires a particular capacity for retrogressive movement in order to enter into the patient’s non-representability so that a perception of the void can be grasped and then become representable. The Botellas’ suggested additional sequence is from drive to object-representation and thought. This is different to the original regressive work of psychoanalysis from undoing the repression, uncovering the fantasy and discovering a better outcome for the conflict (Parsons 2005: xviii-xx).

Decades earlier, Ferenczi cited Freud on anxiety that is 'prefigurative':

Freud has incidentally pointed out that the sensations of the child during the birth act probably evoke the first anxiety affect of the new being, which remains prefigurative for all later anxiety and anxiousness (Ferenczi 1952).

I am interested in the pre-metaphoric state of early infancy, before the capacity to symbolise, re-present or think in metaphor develops. I am curious about aspects of trans identity as encompassing traces of a pre-symbolic/metaphoric state. An example of this might be the belief that having a mastectomy brings forth maleness, so that the body is used as a symbol to realise a wish. What can disappear or be disavowed from consciousness is the actual and symbolic aspect of being female and having breasts, and what they have represented in the bodily history of the individual (maternal nurture, adolescent sexuality). They can be reduced to something material and de-linked from what they represent and symbolise. This de-linking can also bring relief as it severs a material tie to femaleness in the body. There is inevitably a vast array of variation in the motivation to have 'top surgery', and in comprehending the meaning of this move, both consciously and unconsciously.

I think that in order to enter into an understanding of trans identity, there might well be a requirement for the therapist to develop the capacity that the Botellas describe as: a particular capacity for retrogressive movement in order to enter into the patient's non-representability so that a perception of the void can be grasped and then become representable. This could manifest as countertransference, that necessitates deep empathic identification. The retrogressive movement would also require an entry into trans-temporality, that restructures linear development.

Sexual fluids

Lasky (2000) has written about how the experience of tumescence of erectile tissue and the involuntary vaginal secretions of sexual arousal may influence how feminine gender identity is organised. Lasky discusses the difference in how boys and girls process bodily excretions that emanate from sexual arousal that may encourage externalization in boys and internalisation in girls, and the specific experience for girls of involuntary vaginal excretions. He is attempting to move away from a more visual stance, that of seeing and noticing the anatomical differences between the sexes and the ensuing phantasies (Galenson & Roiphe 1976; Greenacre 1950; Jones 1927, 1933; Kulish 1991, Lerner 1976; Mayer 1985, 1991), to the actual experience of what is happening in and to the body.

Sexual arousal announces itself differently for boys and girls, but for both sexes it conveys a message that the body is sexual and responsive. For boys the sensation and visibility of an erection can betray arousal to others in an unwanted way and even when successfully hidden, is known to the self. Mothers and fathers are aware, even if they choose not to be, of their small boy's erections. I find Lasky's focus on involuntary vaginal excretions to be an interesting one, as the associated phantasies of the actual bodily experience are evocative of something leaking or spilling out over which one has no control and could be associated with enuresis (flooding) or soiling (spoiling). Sexual arousal can then become linked with a fear of losing bodily control over one's orifices: what comes out and what goes in. A small girl might feel that boys with penises have a genital that has more control: it makes its presence more known and is visible. A small girl's wish to have a penis, which is

sometimes enacted by a penis substitute (Yanof 2000) may originate in the fear of having an orifice that can betray sexual arousal and the phantasy that something akin to a penis would be more under control.

In his paper on 'The Secretory Imagination' Sekoff (2018) alludes to Shakespeare's mention of bodily fluids:

While Shakespeare's predilection for the use of bodily substances pales in contrast to his *voluminous* allusions to sexual matters, it remains the case that what might be termed the '*secretory imagination*' makes significant appearances upon his stage. Bodily fluids and secretions—the material platform for the '*secretory imagination*'—prove not merely a mirror to our mortal condition, but a potential space for contemplating vexing themes—power, lineage, gender, desire; as well as pondering confusing states—fear, rage, grief, pleasure, disgust, amongst other emotions and passions. (2018:2)

Sekoff continues:

And so we find two rivals, '*fluidity*' and '*fixity*' as poles of the secretory imagination. That said, a caveat is in order—it's too easy to romanticize fluidity and malign fixity. In reality, we need both flow and anchor and we are always at risk of either flood or dead weight. Bodily fluids move and congeal; secretory metaphors both reveal and conceal; and phantasies involving secretions may arouse or entrap or terrify often at the same time. (2018:3).

In his paper, Sekoff asks where the secretory imagination seeps into sexuality in relation to sexual response, sexuation, infantile sexuality, unconscious phantasy and *après coup*. He refers to the symbolic limbo into which women's sexual fluids are deported when their naming is taboo. In the domain of psychoanalysis, social

discourse between patients and analysts can struggle when it comes to menstrual blood, vaginal discharge and sexual lubrication (2018: 7).

Elizabeth Grosz (1994) is cited in Sekoff's paper (2018: 8)) as her questioning on the subject of female bodies is poignant:

Can it be that in the West, in our time, the female body has been constructed not only as a lack or absence but with more complexity, as a leaking, uncontrollable, seeping liquid; as formless flow; *as viscosity, entrapping, secreting; as lacking not so much or simply the phallus but self-containment* - not a cracked or porous vessel, like a leaking ship, but a formlessness that engulfs all form, a disorder that threatens all order? (Grosz 1994)

The Infantile Sexual, Gender and Temporality

When the word 'infantile' is used psychoanalytically it usually refers to something childlike that in turn refers to a period in time prior to the next phase of development. The explanation can be limited to a temporal phase. Scarfone (2014) deploys Laplanche in excavating a deeper understanding of the 'Infantile Sexual', which can be understood as a-temporal, not just a sequential part of growing up that eventually matures. Scarfone distinguishes between the sequential developmental line of maturational infantile sexuality and the infantile sexual that remains as the unconscious centre of adult sexuality and precludes evolution and maturity (Scarfone 2014: 335).

Scarfone (2002) differentiates between "infantile sexuality" and the "infantile aspect of the sexual", as he feels the meanings of these terms can become blurred. He connects Freud's tendency to use myths when the question of origin arises, with

the timelessness of the unconscious. Myths are connected to periods that are outside time, outside origin and outside chronology. Whereas Freud used 'actual' initially (as in actual neuroses rather than psychoneuroses) he then moved to a psychic timelessness in his conceptual system. Scarfone sees an extratemporal dimension connecting infantile sexuality with the infantile aspect of the sexual. He sees the sexual as a remainder, surplus or excess that is specific to psychoanalytic space and time as conceived after Freud; and does not see a clear differentiation between infantile sexuality and adult sexuality. As I understand Scarfone, he is not in favour of a reversion or reduction to a historical beginning, and is more in favour of 'the actual' as a temporal category specific to the unconscious:

The actual is what is not inscribed in a chronology but lies beneath the chronological level and functions as the generator of history that is itself not able to be historicized. It seems to me that this is what the infantile aspect of the sexual represents, in that it transcends the particular event, the vicissitude, and thus, by necessity, can only be transferred, that is, transmitted as an excess part, never entirely admitted into a process that could be completed, come to an end (Scarfone 2002: 106).

The notion of time that is not rooted in chronology is pertinent to the experiences of my interviewees, who largely did not welcome the historicizing of their experience. It is as if, in some cases, the experience of transgender identity exists somewhere outside linear time, in a more unconscious than conscious suspended space, that cancels developmental time. Past time is set up against present time in what can become a negation of origin that includes conception. I bring this into my hypotheses and discussion chapter.

In this section I want to look at *the relationship of gender to time* and the inter-relationship of time and gender. In a developmental context a sense of one's gender develops physically in a sequence of linear and chronological time, that of infancy, childhood, latency, adolescence and adulthood, namely the life cycle. The physicality of gender shows itself through secondary sex characteristics that disrupt the body and sexualise it: into (usually) either male or female. Growth and development work within the ordinary sequential flow or movement of lifetime. When gender develops, emerges or is felt to exist psychically in a different form and register to the gender assigned at birth or manifesting in the body, the sequence of developmental and generational time is altered, arrested, negated, re-navigated and reformed. The relational axis of the sex I was born as or into turns and twists chronological foundations so that past, present and future are no longer sequential. The temporality of gender sets its own pace, it undoes the (more linear) movement of sequential development in the body over time.

The relationships between parents and their hitherto sons or daughters are also altered. A mother/daughter relationship converts to a mother/son relationship and a father/daughter relationship converts to a father/son relationship. The dynamic of female to female in the case of mother and daughter or female to male in the case of daughter to father are dissolved and disoriented. The alteration of gender cuts across what might be referred to as 'Oedipal time' or Oedipality as it locates in time.

In writing about time, the German novelist Erpenbeck (2020) asserts that:

Time has the power to separate us, not only from others, but also from ourselves – a fact that’s hard to grasp. We know that time also separates us from circumstances that might have turned us into very different people. We know it, but we don’t understand it. (Erpenbeck 2020: 42-43).

In her expansive writing about time, Baraitser (2017) explores the nature, history, culture and political implications of temporal experiences in multiple contexts. Events that resist or frustrate the regular flow of time interest her, particularly in relation to practices of care. She writes about discipline or transdisciplinary formation, not as a linear development but (following Michel Serres 1991) as *temporally folded*: this involves a process whereby old and new events can be placed side-by-side, the new can reanimate the old or imbue it with fresh meaning (Baraitser 2017: 32-34, 180). I found aspects of these ideas pertinent to experiences of gender-time or time in gender in which the present gender identity revises the past gender experience so that gender identity can be thought of as temporally folded. Although I cannot do justice to the wide-ranging writing about time in her book, this particular concept resonated for me in relation to what I have termed *après-coup* masculinity, that I discussed in chapter 4.

One way of thinking about the wish to undo one’s female gender is as a defence against father/daughter incest. As the feminine and female sexuality are excised from the body, so is the risk of incest or pregnancy. A reductionist description of the Oedipal constellation is the daughter’s wish to marry her father and have his baby albeit in phantasy, and her ‘goal’ is to manage to find another man or partner with whom she can achieve this. At issue here is the distinction between phantasy and reality, as my proposition of a defence against incest implies that in the

daughter's mind this idea has become a feared or wished for reality given that the 'solution' is in the form of bodily and gender alterations in identity.

In her analysis and interpretation of Laplanche, Butler joins Fletcher (2014) in asking the poignant question: "... how do we account for gender if Oedipus is no longer the exclusive framework in which we consider the formation of gender?" (Fletcher and Ray 2014: 127). I'd like to add to this question: how do we find new psychoanalytic ways of working with non-normative gender identities if Oedipus is no longer the exclusive framework? I return to these questions.

Laplanche (1999) makes a pronounced distinction between instinct and drive. The infant's development is necessarily subject to impingements from the other, usually the primary caretaker. These impingements are transmitted enigmatically, from the unconscious of the caretaker/parent/other to the unconscious of the infant. In her reading of Laplanche, Butler suggests that given the varied forms of these transmissions, they do not presuppose the Oedipal structure. Seduction is the generalised term that is given to the adult's intervention which separates the drive from the instinct:

The instinct makes the drive possible, but the drive institutes a life of fantasy that is qualitatively new, and which is not constrained by the teleologies of biological life (Butler 2014: 123).

In conceptualising the impact of the rupture that the drive institutes, Butler concurs with Laplanche in the 'transgression' of an Oedipal structure that presumes a mother and father as the archetypal template for parenting. She sees gender as embedded in the enigmatic adult messages that transmit adult desire. For

Laplanche gender assignment is considered as an unconsciously transmitted desire that emanates from the sexual unconscious of the parents (2007).

Traumatic time

Seligman (2016) has written about how central disorders of temporality are to traumatized subjectivity. In a discussion of Seligman's paper on the experience of time Vermeule states:

It isn't just that the future, like the present, cannot be different from the awful past, but that the future as a category of experience has hardly any dimensionality at all: *Temporality itself is collapsed, obscured or absent, not only by the persistence of a terrible past, but by the mangling or deprivation of the possibility of an orderly flow of events in the meaningful emotional and interpersonal area.* This is of course not a matter of the clock, but rather a disorder of temporal sequentiality as a basic principle of the subjective sense of self (Vermeule 2016: 143).

Vermeule goes on to locate the "orderly flow of events" (2016:143) within the parent-infant bond, following a quoted section of Seligman's paper in which he describes a benign and intuitive sequence of relating between a mother and a two-month-old baby. The mother's capacity to match the baby's initial gesture "vitalizes" the forward flow of time (Seligman 2016: 115). It gives time and the sense of oneself in time meaning, through a capacity to feel vital, effective and linked to an object. Vermeule refers to this image as more one of constellation than causation (2016: 144).

Given that the flow of time cannot be arrested, and it is within the forward movement of the flow of time that we live, grow, develop and become sexual; what

can be altered is the gender identity I feel and have albeit, not necessarily aligned with my birth sex. Although *this cannot alter time* or the primary object that has looked after me in time, it can alter the *constellation of who I am in relation to others and who they are in relation to me*. In this sense time *can be negated* and perhaps also the original primary object, at least in phantasy. I can now identify as a son instead of a daughter in relation to my mother and father, and this ‘born again’ identity cuts through the Oedipal constellation and the generational constellation. This identity is *self-generated*, and bypasses the ‘laws’ of nature, biology, physiology, chromosomes and endocrinology. It disorders and reorders the status quo of prior relationships, it moulds and shapes a new landscape, one that dissents fundamentally from that which was there before. In this context gender identity alters temporality, and re-translates reality.

Psychic Equivalence

This is a mode in which inner and outer reality are equated, so that one’s thoughts become reality, and other viewpoints or interpretations are not feasible. It is usually applied to patients who have poor mentalising capacities, and was initially introduced by Fonagy & Target, in a series of papers dealing with psychic reality and its failure in borderline patients (1996). They proposed the term ‘psychic equivalence’ to specify “... domination by psychic reality in Freud’s sense ...” (1996: 218). Two forms are used: ‘psychic equivalent’ and ‘pretend mode’, that differ in the assumed relationship between internal and external realities, in a small child. They maintained that the subjective sense of oneness between what is internal and external in the development of children is a universal phase. For the small child,

inner experience is equivalent to and hence mirrors external reality, and this extends to feeling that others have the same experience that he does; and that the very young child does not yet have the capacity for the *merely representational* nature of ideas and feelings (1996: 217-219). Psychological and physical pain are equated in instances of psychic equivalence, so that psychological pain is experienced as bodily pain.

One's body can feel like an 'alien self-part' or 'a machine that is out of control and that doesn't function properly', as expressed by patients in an article about a mentalization based approach specifically to aid functional somatic disorders, by Lutyen, Van Houdehove, Lemma, Target & Fonagy (2012: 129-130). I use the term 'psychic equivalence' in one of my hypotheses (chapter 7), as to my mind it is applicable to aspects of gender identity struggles, in which there is often an equivalence of the gender in mind with gender in the body, and also an equivalence between emotional struggles and gender struggles.

The term psychic equivalence connotes symmetry, which has been written about extensively by Matte Blanco (1975). His original ideas attempted to explain the laws that govern the unconscious, in mathematical terms, with the purpose of new possibilities for understanding psychoanalytic work. The aspects of his work that I wish to pluck out are the principle of symmetry, asymmetry, symmetrical identification, succession and temporality as I see their relevance and application to gender identity. Freud's words that "The governing rules of logic carry no weight in the unconscious; it might be called the Realm of the Illogical." (Freud 1940: 168-169), are acknowledged by Matte Blanco's principle of symmetry in which the

system Unconscious treats the converse of any relation as identical with the relation. His example of asymmetry is that 'if John is the father of Peter, the converse is: Peter is the son of John' and here the relation and its converse are not identical; whereas 'If John is the brother of Peter, the converse is: Peter is the brother of John' and here there is symmetry because the converse is identical with the direct relation. From this Matte Blanco extrapolates that 'When the principle of symmetry is applied there cannot be succession' (1975: 38-39).

My extrapolation from these ideas and principles is into the realm of gender identity: in which there is basic asymmetry between male and female, but perhaps not so in the unconscious. And in female to male transgender identity there can be no biological succession, unless parts of the female body are retained as was the case with Freddy McConnell¹, who paused taking testosterone so that he could conceive. The High Court and the Appeal court (2020) maintained that the person who gives birth is legally the mother of their child, regardless of their gender, and came down in favour of the right of the child born to a transgender parent to know the biological reality of its birth, rather than the parent's right to be recognised on their birth certificate in their legal gender. This situation cuts into the biological/gender conundrum, and the 'wish to be both' sexes. (McConnell 2020).

In the principle of generalization Matte Blanco introduced the idea that

... the system Unconscious treats an individual thing (person, object, concept) as if it were a member of a set or class which contains other

¹ The first British transgender man to carry and give birth to his own child in 2018 was detailed in the documentary Seahorse in 2019. He is appealing to the European Court of Human Rights to be registered as his child's father. This opens up the complexity of the 'trans womb'.

members, it treats this class as a subclass of a more general class, and this more general class as a subclass of a still more general class and so on (Matte Blanco 1975:38).

Fink (1989) adopts and applies these ideas to elements of time, space and difference between part and whole that all cease to exist when the principles of generalization and symmetry are applied. These apply to primary thought processes in the main, that occur in the unconscious and are more id based, rather than secondary thought processes that are more conscious and ego based.

Fink (1989) utilizes Matte Blanco's ideas to show through case studies that time does not exist in the thought system of symmetry: "An event that occurred yesterday can also occur today or tomorrow or at any other occasion in the past or in the future and therefore by excluding temporality, everything has happened, is happening, or will happen, all at the same time ..." (1989: 482). This collapse of sequential time lends itself to my suggestion that for trans men now is then and then is now, which erases the notion of developmental time with causal chains that have meaning.

Seduction in Time

Laplanche (1999) separates the drive from the instinct through an external series of interventions that become transmitted via a generalised scene of seduction. This means that the drive acquires aims that are not self-preservative or emanate from the life instincts or the biological reproduction of the species. For Laplanche the drive forms a kind of rupture and thus brings about something qualitatively new. In

Butler's words: "This drive is sexuality in general, and it may well be pre- or para-genital, as well as genital" (Butler: 2014). This sexuality is fantasy based, although the fantasy is not generated by the self, rather it is generated by the impingement of the other. These impingements are transmitted through enigmatic signifiers that can feel overwhelming, and occur at a time when the child is receiving necessary bodily care that is vital to its thriving and survival. Butler views the generalised scene of seduction that Laplanche advocates as the initiation of the sexual life of the child, and as separate and different to (experiences of) sexual abuse. (Butler: 2014: 122).

The child cannot make sense of all aspects of the transmission of messages from the adult. It is the parts that are enigmatic, the remainders or source-objects of the drives, that form the child's unconscious. The unconscious for Laplanche is not bound by temporality or time which he understands as the binding of thoughts into something linear that can create a discourse. He firmly dissented from Lacan's view that the unconscious is structured like language, which then makes it temporal (Fletcher & Stanton 1992: 25). What is striking about Laplanche's stance and theorisations is that he makes a definitive move away from a family structure that is 'informed' by the paternal law, heteronormativity and Oedipal constellations. This is a move away from both Freud and Lacan. It is the chain of enigmatic messages that inscribes itself onto and into the skin (or primitive skin-ego) of the infant, just as their mother or father or caregiver have similarly absorbed enigmatic messages themselves. It is the untranslatable residues of the messages that forms the unconscious. There is a foreign dimension to desire that remains foreign, and to

some extent unknown: it is the source of the drives and that which forms the self as a desiring subject (Butler 2014: 126).

Excluding Oedipus: a new translation

Laplanche relegates The Oedipal structure from its primal position, making it culturally contingent rather than universal. This position dissents from Lacan's central concept of the paternal metaphor (Fletcher 1992: 118). As the enigmatic signifier takes precedence over the paternal law and Oedipal structure, aspects of sexuality are no longer biologically determined or shaped to fit a heterosexual norm. In this respect, Laplanche offers a nuanced psychoanalytic perspective on the formation of desire, sexuality and gender.

Working with gender identity in its multiple manifestations requires clinical fluidity and agility in the mind of the clinician. Clinicians may need to abandon Oedipus as the central tenet of psychoanalytic theory and clinical work. This does not mean that issues of exclusion, triangularity, murderousness, cannot be considered and worked with. There is work of translation required in the clinicians' minds, a re-translation of classical theory that would fit better with the current climate of gender variability. If this does not happen there is a risk that psychoanalytic work will not be sought out or benefitted from in the sphere of patients who present with gender identity issues.

When Saketopoulou (2017) comments on the paper 'The Masculine Vaginal' (Hansbury: 2017), she speaks of the importance for the analyst to be open to emergent possibilities in the analysis which she recognises in Hansbury's capacity to

remain open and enabling of his patient's struggles and at times extreme risk taking. These experiences are thought about by Saketopoulou as a translation of the infantile sexual; an unbinding of translations that were previously bound with the aim of freeing up enigma and opening the possibility for the patient of a new translation. I agree with Saketopoulou's advocating of new translations for both the patient and the analyst. She is referring specifically to work with non-normative subjects. She recognizes that subcultural communities facilitate discourses that are alternative within the analytic space, discourses that can retranslate the sexual in a better fit for the patient (2017:1036). Sometimes this will mean a better fit than their original object, who might not have accommodated the gender identification of their child. This approach of rethinking the analytic working tools blends into my notion of the concrete thinking that at times resides in the mind of the therapist. Scarfone (2014) puts it well: "... what we need to do in analysis is not to discover hidden sexual meanings, but to uncover the personal equation by which the individual analysand deals with his sexual complexion" (Scarfone 2014: 342).

Extinction of temporality – as rebellion?

Green (2008) explores how Freud used the concept of temporality in psychoanalysis. I will home in on some aspects of his exploration. He speaks of repetition compulsion as "the murder of time" (2008: 1037), because in the very act of repeating, time stops short rather than being transformed into thoughts that can be analysed. Green, following Freud, distinguishes repetition compulsion from the timelessness in the unconscious. The repressed does not collaborate, it takes up its own room in the unconscious separate to the experience of reality.

When this is applied to time in the session, Green explains Freud's schema: Where a path from a to b (in the patient) is cut off due to repression, it is unavailable. The patient then develops a network (alpha, beta, gamma, delta) that is called the lateral cathexis. Green's proposition is that there must be a connection between the unavailable 'a to b path' and the network as a whole represented by the ego's lateral cathexis (Freud 1895). Whereas Freud described neurons, Green describes associations and stresses the importance of noticing the (bilateral) movement backwards and forwards, as well as the oppositional aspect of the representative system and the system of motion or movement. This tension and difficulty between construction and destruction, Green terms the extinction of temporality (Green 2008: 1037-1038).

I think that these ideas are also applicable to a conceptualisation of or struggle with gender identity. A developmental pathway that moves in time is diverted or repressed and takes a lateral move into a new gender. Chronology is interrupted and so is the intergenerational system. A whole new network is set up that defines its own relationship to time and to objects that exist in time; time and being in time are thereby self-generated and self-generational. By self-generational, I mean that gender identity alters the relationship to parents, and hence to the generation they belong to as mother/daughter can become mother/son. The invention of a new temporality stands in antithesis to Freud's advocating 'remembering, repeating and working through' (1914). This ties in with the cultural idea of "The Century of the Self", a BBC documentary series by Adam Curtis (2002).

Uncanny temporality

The notion of negation is embedded in Freud's paper on the Uncanny (1919), in which he elaborates on the discomfiting and disturbing experience of the familiar becoming unfamiliar: "Thus *heimlich* is a word the meaning of which develops in the direction of ambivalence, until it finally coincides with its opposite, *unheimlich*" (Freud 1919, 1990: 347). There is an uncanny element to gender re-assignment, a juxtaposition of the unfamiliar with the familiar. We have to step outside and beyond the established categorisations that root us in the familiar or homely/*heimlich*. This perception of the unfamiliar is not unlike a lateral cathexis that requires us to plug into a whole new network, as described earlier.

The analytic setting invites the emergence of uncanny temporality as past, present and future combine and distort. The past can feel alive or dead, familiar or unfamiliar. Chronology loses its linearity as thoughts and feelings can either surface or become repressed through the analytic process that brings forth the 'here and now' as well as the 'there and then' of life experience, mainly in the transference. Analytic time and gender time create an interesting juxtaposition.

Gozlan (2015), a Lacanian psychoanalyst, describes analytic work with a 40-year-old transsexual² (male to female) woman, S. He felt caught up in a universe in which masculinity and femininity were experienced (both by his patient and himself) as concrete facts, outside time, space and movement. Gozlan understood this experience as a re-enactment of S's childhood experience of enmeshment with her mother until she was 12, and sent to boarding school. Her father was an absent

² This is the term used by Gozlan (2015).

figure. S could not feel masculine or feminine, and so was stuck, persecuted and confined, as was Gozlan's experience. He did not see her difficulty as that of choosing a gender, but rather as a disavowal of internal difference:

... between time and timelessness, union and separateness, being and doing – that manifested itself through gender and where femininity and masculinity came to represent polar opposites and already made categories, neither of which she could embody and which she tried to escape through her gender oscillation (2015: 64).

S was unable to settle into an identification in which there was a possibility of the tolerance of otherness; so that her maleness could not tolerate her femininity and vice versa. Gozlan understands temporal boundaries as crucial in aiding the capacity for differentiation, and sees sexual difference as an area in which temporality and atemporality are held in suspense. If they cannot be, as was the case for S, who could not relate to her body as a signifier for integration that was wished for (but rather a dreaded repetition of past enmeshment with mother), she was unable to return to the past, unable to settle in the present, and the future was not imaginable (2015: 65).

For Gozlan, it was important not to get caught up in the decision for S about whether to transition, but his concern was what S did in relation to her reality and desire (2015:70). This impasse of integration within the self, born of complex internal and external family dynamics, highlights the fragile relationships between temporality, the location of sexual identity, and the wish for a concrete solution enacted in or on the body.

Chapter 6

Methodology

Herein lies the paradox of psychoanalysis: the very things which other fields of science seek to exclude from their experiments ... are the phenomena which psychoanalysis seeks to explore. The very thing which other fields use as a means for observation psychoanalysis chose to exclude from its observation (Pumpian-Mindlin 1952, 1970: 136 -137).

My research question is: 'How can psychoanalysis understand gender identity'.

Within this broad field I focus my study on trans men; I understand my question as a theoretical one with practical implications. I thought that direct experiences of trans men and their gender identity would enable me to place this question in a contemporary context, so I conducted interviews with trans men with the aim of analysing this material to provide an empirical counterpart to my theoretical investigation. In my 'findings' chapter, I discuss my analysis of the interviews in relation to my theory chapters and apply psychoanalytic concepts as my research tool. This methodology chapter will discuss my rationale for the approach I have decided to take, that includes utilising my training as a psychoanalytic psychotherapist. Later in the chapter I expand on my specific methodological approach, where I employ aspects of the Psychoanalytic Research Interview (Cartwright 2004), and Interpretative Phenomenological Analysis (Smith & Osborn 2003), for the analysis of the interviews and derivation of hypotheses. I also outline my approach to interviewing and the ethical considerations involved.

By 'use' of psychoanalysis as a research tool, I mean that I am holding and applying traditional and contemporary psychoanalytic theories, concepts and unconscious processes in mind, in both my theory chapters about aspects of gender identity and in my findings from the interview transcripts. My use of theory involves more than relating to it or identifying with it; it includes a capacity to know the theory is there and can withstand (dissection and) destruction, just as Winnicott proposed in his 'Use of an Object' paper (1969: 712-714), and Mitchell followed up on in her 'Theory as an Object' paper (2005). Mitchell expands on Winnicott's original and illuminating idea: that optimally a subject makes the developmental move from relating to destroying the object and then noticing that it has survived, whence it can be moved into the realm of being separate and outside of the subject's omnipotence, and is no longer a projection. It is a loving destruction that elicits the capacity for fantasy as the object is no longer omnipotently controlled. Mitchell proposes that (psychoanalytic) theory can similarly be thought of as an object that withstands usage; it survives the destruction and in so doing moves from something either related to (merged with) or identified with. This changes the nature of the relationship to it as it becomes external to the self or 'user' (Mitchell J., 2005: 33-36).

In my use of psychoanalysis as a research tool I am allowing myself to destroy or test theory at the same time as knowing it can and will survive my destruction. It is an object I can use, and a very useful object for the purposes of my research. Like a good enough mother (Winnicott 1960), it both stands outside me and withstands me, it is not a narcissistic extension of myself and is hence reasonably unbundled by

projections as far as this is possible to achieve given that I affect my subject and subjects and it and they affect me. Beyond the destruction or testing of theory, I am also constructing new theory as a creative part of my research.

The interviews provide a clinical dimension not unlike and yet highly distinct from therapeutic sessions and my role was as an interviewer for the purposes of research and not as a psychotherapist. I do, however, use the method in which I'm trained to work as a psychoanalytic psychotherapist in my analysis and discussion of the transcribed interview material, albeit with the use of hypothesis and interpretation as a means of furthering my understanding of the interviewees' experiences in relation to my research question, and not with the aim of therapeutic work as would be the case in a psychoanalytic session. I am treating the interviews as empirical material with a clinical dimension and I am interpreting the material through a psychoanalytic lens that does not have the interpersonal or intra-psychic tension of an actual clinical session in which a patient is coming for therapeutic help. Unconscious processes will be retrospectively identified in order to further my understanding of the material.

The Psychoanalytic Interview

Cartwright (2004) proposed 'The Psychoanalytic Research Interview', as a way to expand psychoanalytically informed research inquiry outside of the treatment setting. He suggested that psychoanalytic concepts can be transported into and applied to these interviews, and that the basic hermeneutic principles that are usually applied to comprehend research interviews are lacking when the understanding of unconscious meaning and processes are sought. He makes the

salient observation that psychoanalysis above and beyond being a theory is a methodology in itself, one uniquely developed for the investigation of unconscious processes. But as the methodology is usually conjoined with the treatment setting, there has been a dearth in the use of psychoanalytic principles for developing other forms of research methodology (Emde & Fonagy 1997). Cartwright questions whether other methodologies can be used to capture unconscious processes, which then opens up the bigger question of the nature (and application) of “psychoanalytic knowledge”, and how it is set up between interviewer and interviewee in the Psychoanalytic Research Interview (Cartwright 2004: 209-210).

The Psychoanalytic Research Interview is a meaning-centred approach that strives to explore unconscious processes, self and object representations, defences, and so forth through the analysis of narratives as they are constructed around the subject of the interview (Cartwright 2004: 211).

It was noticed and discussed by Kvale (1999) that the psychoanalytic interview was both missing from and unacknowledged by psychology textbooks in relation to research methods in spite of it underlying many of the methods used. He advocated the usefulness of it as an innovative form of knowledge that interview researchers in the social sciences would do well to refer to. Kvale highlights the extreme positions of the therapeutic researcher that works from case histories at times without methodological reflection on the evidence, and the contemporary therapeutic researcher who is much more positivist and quantitative who can become removed from the actual therapeutic endeavour. This can result in a ‘no-method’ or ‘all method’ divide that Kvale likens to Odysseus caught between Scylla

and Charybdis. He argues for psychoanalytic theory as a major contributor and generator of research in psychology, and specifically for the psychoanalytic interview as a fount of clinical observational and interrelational detail that has potential as a research method (Kvale 1999: 87-113). This he sees as collaboration between investigator and subject who:

... together seek knowledge of a social situation in order to change the situation and then apply this knowledge through new actions in the situation. In this form of participatory inquiry validation of the findings goes beyond a possible consensus collusion of the researchers by testing the validity of their knowledge in praxis. (Kvale 1999: 110).

My analysis of the interviews is influenced by the propositions of Cartwright and Kvale, who both have valuable ideas about the transporting of psychoanalytic modes of relating into research in the social sciences. Later in this chapter I discuss how I also use aspects of Interpretative Phenomenological Analysis.

The interviews as clinical narratives

As I am reading the interviews through a psychoanalytic lens, I infer meaning from the underlying (unconscious) process of the dialogue within the narrative. The inference of meaning does not relate to an establishment of historical or factual accuracy or truth in the material, as this will inevitably always be subject to interpretation, variation, phantasy and revision. My interest lies in how the self or interviewee paints a picture of their gendered life, what colours, textures and creative medium they choose and how this is expressed through words or non-verbal cues. This shapes the form of the narrative, and what Cartwright referred to as "... a metaphorical elaboration of what was 'fact' ..." (Cartwright 2004: 217). The

differing and common themes of the narratives then form the gallery of my research, from which I curate my findings. These common themes are important as they indicate the existence of regularities across a group of human beings that can generate hypotheses.

There has been much conflict and sectarianism within psychoanalysis about valid forms of research and these references are by no means exhaustive (Schachter & Laborsky 1998, Caws 2003, Luyten, Blatt & Corveleyn 2003, Edelson 1985, 1986, Wallerstein 2000, Shedler 2004, 2006, Shevrin 1995, Rustin 2003, Hinshelwood 2013, Tuckett 2008). There is a pronounced split between the camp that feel that psychoanalysis can only be put under the microscope in individual case study form and the camp that make the case that it can and needs to expand from individual cases to systematic empirical investigation and indeed has been expanded in the form of useful published psychoanalytic research. This divide has also been thought of as one between idiographic and nomothetic approaches to science: the former prioritising the idiosyncrasy of the individual and the latter more attuned to the discovery of regularities across individuals; “master narratives” alongside “idiosyncratic narratives”, from which inferences can be made or theories that propose probabilistic regularities in human behaviour (Luyten, Blatt & Corveleyn 2006: 580- 581).

Popper (1959) made a distinction between the context of *discovery* in the origin of scientific ideas and the context of *justification*, when these ideas are tested and subjected to falsification. His well known claim was that psychoanalysis has not been open to falsification and is rooted more in its quest for verification and

confirmation, and is therefore unscientific. The notion that psychoanalysis has a wealth of discoveries and dearth of justification for these ideas has been endorsed by Fonagy (2003).

What the listener projects

Grunbaum (1984, 2001), like Popper, did not think that the psychoanalytic method for harnessing empirical evidence via free association within the case study constituted good scientific evidence as the analyst by means of their theoretical expectations *influences the data* and hence contaminates it. The implication is that the analyst can manipulate the patient to succumb to the wished-for theoretical stance (1984: 211).

Accordingly only research outside of the actual psychoanalytic situation is valid, and can provide a legitimate context for the testing of psychoanalytic hypotheses.

Although I do not fully agree with Grunbaum's position in relation to psychoanalysis, I suggest that the psychoanalytic research interview can to an extent provide the context that he suggests is optimal for psychoanalytic research. I will expand on this later on in the chapter.

In their paper on Interpretation, Britton and Steiner (1994) take up Bion's concept of the 'selected fact' (1967) and distinguish it from an 'overvalued idea'. Bion contended that a fact can emerge in the analyst's mind, (just as it can do for the scientist) that holds particular significance and towards which other related facts gravitate, thus forming a configuration. This emanates from the material produced by a patient, and is an experience of something acquiring sudden coherence from a

mass of seemingly unrelated phenomena. It appears to relate not only to the current unfolding situation but also to other situations hitherto not seen to be connected together (Bion 1967: 127). Britton and Steiner suggest that the new fact can emerge as the centre of a hypothesis which enables fragmented parts of the patient to integrate in the analyst's mind. Although they go on to discuss the testing out of this configuration in the form of a psychoanalytic interpretation, I am borrowing aspects of Bion's concept and Britton and Steiner's elaboration of it, and applying these to my analysis of interview material and the emergence of configurations in my thinking and development of hypotheses. I am also adopting the concept of an overvalued idea as something to be cautious about in my reading and analysis of the transcripts: the hazard of carrying elements of my (conscious and unconscious) world view or theoretical underpinning and finding confirmation of it in interview material in relation to the development of gender identity.

In a further development of what can become crystallized within the analytic process, Feldman (2009) discusses the unconscious influence on the emergence of doubt or conviction. He writes about the disturbances to the dynamic balance or flexibility in the analyst's mind that can steer them either towards conviction or lack of it in relation to the patient's mind, as a defensive manoeuvre. The defence can manifest itself in an attachment to a formulation that can get in the way of a more open or receptive stance (Feldman 2009: 232-235).

Semantic Holism and Hermeneutic Turmoil

Just as there is no such thing as objective truth in clinical material that is relayed (by patients or interviewees) in narrative form, whether in a psychoanalytic session or

Psychoanalytic Research Interview, there can also be no (absolute) objectivity in my analysis and interpretation of these narratives. Although I aim to be neutral and unbiased, my thoughts, feelings and ideas are rooted in the world of knowledge and experience that I inhabit both consciously, unconsciously and culturally. However, by employing a thorough and rigorous process of analysis and re-analysis, I mitigate this as far as possible.

Widlocher (1994) argued eloquently that “a case is not a fact” not least because understanding it presumes “semantic holism” in that a “world of knowledge” as well as infinite work of inferences is required for consideration of any mental state. In this sense he sees the psychoanalyst as describing what they believe they discover, which may well further psychoanalytic knowledge and understanding within the field; but with the ‘fact’ emerging more from the interaction between the mind of the patient and the mind of the psychoanalyst, than only from the mind of the patient.

In a similar way the meaning in the narrative of an interview is co-constructed around a particular focus, rather than in an attempt to find a historical or “factual” truth thought to be rooted within the interview material. Spence (1982) investigated the validity of historical truth as opposed to narrative truth in clinical cases and believed that there was usually an invisible leap of shared faith in the generalised acceptance of case material (leading to psychoanalytic formulation and insight) not least due to restrictions on the evidence. I subscribe to his thinking and ideas about narrative truth, and have approached the interviews with this in mind. I am treating the narratives as subjective descriptions of life experience, as seen by

the mind's eye, both their minds and mine. The mind's eye is coloured by wishes, needs, feelings and emotions that depict memories of experience that are being verbalised within the specific context of the interview. The focus of the interview is gender identity, and the interviewees have voluntarily agreed to speak about this for the purposes of my research.

Edelson (1985, 1986), a professor of psychiatry and psychoanalyst, wrote with great precision and erudition about the jeopardy for social scientists of “scientistic deviation”, in that they can overlook the personal and social forces that influence the nature of the data and how it can be obtained, which he refers to as a hermeneutic deviation. Given that in the social sciences the investigator is bound to affect his subjects and vice versa, this impacts the validity of his hypothesis as against other hypotheses (within his field) and can lead to an overestimation of his own hypothesis and an uncritical interpretation of the data. He warns against:

... overinvestment in one's own conjectures about the world and an inability to imagine what rivals they might have or what plausible alternatives might account for the data obtained in attempts to “confirm” them. (Edelson 1985: 574)

The deviation occurs when the research sidesteps a “thoroughgoing scepticism” (Edelson 1985: 567- 571). I could be accused of being this kind of investigator, as I am locating my empirical research within the field of psychoanalysis and embedding it in a PhD with a strong theoretical dimension. Although I am not recoiling from the practice of generating hypotheses by privileging discovery over justification, in this PhD my scope for testing hypotheses is more limited. I do however hope to make an original contribution to current psychoanalytic thinking

through psychoanalytically based propositions, forged from my theory chapters and analysis of interview material.

Hinshelwood (2013) addresses the rift between the hermeneutic approach and the psychoanalysis-as-science approach. He argues that material from single case studies can constitute adequate research data as long as the research question is formulated precisely and the use of the data follows the protocol of a precise research design. He opens up the issue of subjectivity in relation to the data and the instrument of observation: the psychoanalyst's mind.

Both Edelson and Hinshelwood address the question of hermeneutics in relation to single case studies with a forensic attention to detail. They attempt to cut through and work through the objections that are often levelled by psychoanalysts, that psychoanalytic research has special needs, and therefore stands outside the usual regulations of scientific research.

Rustin (2003) makes a case for the consulting room as the legitimate and appropriate location for psychoanalytic research. He advocated the consulting room as the laboratory, and only laboratory for psychoanalytic findings. He refers to other methods of scientific research as more taxonomic (Rustin 1997, 2003).

The central tenets of the 'case study' school are that the subtle movements in the unconscious dynamics of a session cannot be captured and generalised, as they are highly individual and mostly invisible other than to the patient and analyst, although it is precisely the extrapolation into descriptive narratives of this kind of

unconscious process and communication that creates psychoanalytic theory.

However, this requires readers to share in the belief system or knowledge base of the writer. There is much frustration in other psychoanalytic domains around the notion that this is the only kind of valid psychoanalytic research, as it does not expand out into the broader world of systematic empirical evidence that support psychoanalytic assumptions and therapies (Bornstein 2001, 2005; Shedler 2002; Blatt & Auerbach 2003; Fonagy 2003, Westen 1998, Edelson 1985, 1986).

I suggest that the Psychoanalytic Research Interview can stand as an alternative laboratory for new psychoanalytic findings whilst still using the clinical research method, albeit one adopted and adapted to the interview setting. In doing so I am defining a new category of research: the psychoanalytic method as applied to research interviews. I believe that this setting can offer one way to bridge the gap between the so called two cultures (Snow 1959, Luyten et al 2006) within psychoanalysis and within the wider research debate. Snow's Rede lecture in 1959: 'The Two Cultures', about the split in society between the arts and humanities, and the sciences brought this debate to prominence. I have a foot in each camp and each culture: a trust in the consulting room as a valid laboratory and a trust in broader nomothetic forms of research.

The research interview as resilient autobiographical narrative

In a paper 'Narrative in the Study of Resilience' (2006) the authors Hauser, Golden & Allen endorse the usefulness of narrative studies to the study of resilience as applied to the psychoanalytic study of the child. Resilience in this paper is defined and understood as the individual ability to prosper in situations and circumstances

that usually might defeat others, a capacity to adapt in serious adversity (Hauser, Golden & Allen 2006: 207). The use of narrative is advocated as an extremely helpful means to reflect on experience and derive meaning in this process. It contains both cause and effect, as reflection effects new experience.

Narrative, therefore, is most profitably seen as both cause and effect. It reflects experience, but it also conditions new experience. Our stories are hubs in the wheel of our perpetual psychological work. From experience we derive meaning: from meaning-making we imagine new actions; new actions lead us to new experiences; from new experiences we evolve new meanings – all in our own real-life contexts. ... The study of narrative ... allows us to investigate how resilience *evolves* ... (Hauser, Golden, Allen 2006: 209).

The authors stress the significance of context for personal narratives and caution against the overvaluing of individual stories which can remove them from their context. By this they mean that as well as the personal narrative, influences on the person's context of the environmental factors such as opportunities and constraints need to be taken into account. Life experience is situated in a specific context that includes family, school, current views on adolescence at the time, and community norms amongst others (2006:210). I am aware that the interview narratives that I am using are similarly in jeopardy of overvaluation, and over extrapolation particularly as I have conducted one interview rather than multiple interviews for each interviewee. I have therefore applied a wide lens to my analysis and discussion, as a caution against homing in on cause and effect too readily as I have stated earlier. My group of interviewees although each individually identified as trans men, was by no means a homogenous group. I will expand on this in my findings chapter.

Cause, Effect and Affect

Anyone who has ever carried out scientific research knows that data are uncertain, that much depends on the way they are interpreted, and that all methods have their limitations (Sheldrake 2013: 298).

Part of the psychoanalytic method of analysis is to make meaningful links that can help a patient connect present to past, and conscious modes of behaviour with their underlying unconscious counterparts. When interpreted, these links can be received thoughtfully, defensively, symbolically or concretely. The experience of psychoanalytic work, for both patient and analyst, usually includes the exploration of cause and effect in the historic past and dynamic present and often in the way in which an interpretation is received or rebuffed, the affect that it generates. In this sense the effect of a cause carries psychoanalytic weight in the work of analysis, and can transgress current and past time zones through *après coup*.

In Edelson's paper 'Causal Explanation in Science and in Psychoanalysis' (1986), he sets out to prove that the psychoanalytic case study can enhance and bolster the credibility of psychoanalytic theory as long as it meets the 'criteria of adequacy' that he outlines through giving a detailed analysis of Freud's explanatory intent and strategy in the Wolf-Man (1917-1919). Edelson demonstrates how Freud's intent was to provide empirical evidence for causal claims, that were founded on the same conception of the causal structure of the world and causal explanation that occur in the natural sciences, albeit excluding the paradigm of hypothesis testing. When a psychoanalytic case study achieves this, Edelson states, it also holds up the credibility of causal explanations that include theoretical entities.

Freud tells a causal story and constructs a causal account, one in which his interpretive interventions take effect. This strengthens the argument for the existence of the unconscious ideas put forward as causal. Use of a causal account for Freud prioritises chronology and the time relation between cause and effect. Edelson points out helpfully that the psychoanalytic theory Freud used in the Wolf-Man case is:

... a *concatenated* theory, whose components “enter into a network of relations” and, typically, converge upon some central point, each specifying one of the factors which plays a part in the phenomenon which the theory is to explain”, rather than a *hierarchical* theory, which “is a deductive pyramid, in which we rise to fewer and more general laws as we move from conclusions to the premises which entail them” (Kaplan 1964: 327-336, as cited in Edelson 1986: 99).

The accuracy or validation of chronological sequences is an uncertain challenge in psychoanalysis because of the difficulty of distinguishing factual events from phantasies, in recalled memories or historical accounts. Contemporary psychoanalysis is less concerned with the exactitude of these accounts and more concerned with the nature of object relationships, inevitably shaped by the past, that the patient forms both in their external lives, their dreams, phantasies and as manifesting in the analytic relationship through transference and countertransference.

The Trigger is not the Cause

Kubie (1970) makes an important differentiation between ‘trigger and causal mechanisms’; between description and explanation in psychological theory: two kinds of causative relationships. He states poignantly that “The finger that pulls a

trigger releases a bullet, but it does not impart to the bullet its energy". There are many trigger mechanisms in various psychological states that are triggered by the unconscious symbolic meaning that exercises a trigger action (Kubie 1970: 107). I will expand on this notion in relation to the underlying cause that might trigger the wish or impulse to move from one gender identity to another.

Motivation

One of the areas that I explore through both the interview material and my theory chapters is that of *conscious and unconscious motivation in relation to gender identity*. Freud adjusted his thinking about motivation when he introduced his dual instinct theory in 1920 in *Beyond the Pleasure Principle*. The notion of a conflict between a life drive and a destructive drive shaped important aspects of his thinking from thereon in that both the reality principle and the ego (1940) can obstruct a more direct line towards pleasure or drive satisfaction. Freud attributed a motivational function to the ego and moved away from the notion that pleasure is (sexually) libidinal, or located in the Id.

A subsequent theory of motivation was put forward by Westen in 1997, one that tries to integrate psychoanalytic theory with psychological thinking and research. He points out that motivation has been attributed to affect not least as theory and clinical data became more aligned. He states:

Clinically, we go where the affect is (or where it should be but is missing) because we know that in the affect (and in conflicting feelings towards the same object) lies the motivation to pursue, avoid, or create compromise solutions. (Westen 1997: 523)

Westen points out that the move away from drive to affect opens new difficulties: how affect fits with biological drives, the place of genetically based proclivities in the actual experiences that shape motives and what the mechanisms are through which motives develop after the first few years (1997:523). Westen's aim was to extend the thinking on the links between drive and affect to that of motivation and affect, whilst maintaining important roots laid down by Freud. His interest lies in the specific activating conditions that have historically been lost in the tendency to put forward broad motives. These include socialization practices, how social experience channels impulses, representations of self and others, physical stimuli that have accompanied pleasurable or painful states in the past, and how we come to cathect or 'care about' the particular goal states that we are driven to follow throughout life. The goal states can encounter discrepancies between a desired state and reality, that can lead to an altering of the reality perception in order to achieve the wished for goal state (1997: 531-536).

I have discussed Westen's ideas in some detail as I find them applicable to manifestations of gender identity, and the complexity of motivation embedded within the 'other gender' as a goal-state. In my analysis of the interviews, I will be making links and adopting the method of causal explanation and trigger mechanisms, as well as their underlying unconscious or symbolic meaning, in order to generate hypotheses or inferences that can be thought about objectively and address my research question. The interviewees are relaying subjective stories that contain their own cause and effect explanations; and my analysis of the material

lends these stories an external objective position not unlike the function of analyst in relation to his patient via the medium of interpretation.

There appears to be apprehension within the LGBTQ+ community of causal explanations for manifestations of gender identity, particularly if these are rooted in psychoanalytic ways of thinking. The understandable fear of being pushed into a clichéd “this means that” mode of thinking in relation to sexuality or gender can indeed be considered pathologizing. There can be a misapprehension of what psychoanalytic psychotherapy is about, but it is not a misapprehension to attribute to it an interest in causal chains, albeit for the purposes of furthering self-knowledge and self-exploration. The ‘cause and effect’ framework of explanation seems to be acceptable *if it is generated by the individual in question*, or generated within a community that is defining itself and could be interpreted as a form of objectivity in which dogmas about gender identity might be imposed or projected. This inner subjectivity and outer objectivity can form a split between the community’s internal laws or social system and that of society outside this community. If the stance for the outsider (whether this is a researcher, a psychotherapist or society at large) is too collusive or identificatory, the objective view becomes obstructed and can lead to binary oppositional stances.

My Methodology

My methodology is derived from The Psychoanalytic Research Interview (PRI) (Cartwright 2004), but also incorporates substantial elements from Interpretative Phenomenological Analysis (IPA), (Smith and Osborn 2003). This led me to an unusual design for my study in that I begin with theory and only later on bring in

the empirical dimension of the interviews through introducing hypotheses and discussing the interview narratives. The structure of beginning with theory chapters that developed specific themes in relation to sexuality and gender identity informed the way in which I conducted the interviews as well as my understanding and analysis of the interview material. The hypotheses, derived from themes in the theory chapters and analysis of the interview narratives, synthesise the earlier and later parts of my study.

Other papers that have drawn on Cartwright's (2004) psychoanalytically informed qualitative research design, used a psychoanalytically informed interview technique and involved identifying themes that emerged from the conscious and unconscious material of participants narratives, are Rodgers and O'Connor (2017) and Losty and O'Connor (2018). Both of these papers are about aspects of gender identity, the first is about transgender experiences of individuals who were assigned female at birth and the second explores non-binary gender identity. The former paper described how significant material emerged beyond immediate representation, through allowing participants to engage in relatively free association: "... an individual moves towards material that is more significant, which might not be reached in a more structured interview approach". Through the analysis of the material at different levels, the unconscious is assumed to be at least partly available to awareness (2017: 144).

Cartwright describes a search for a story line or core narrative in the PRI, that isolates a particular scene or plot that can be related to the interview topic. He advocates that "... the interview text should be engaged with in its totality, allowing

all aspects of the interview to influence the analysis of the flow of associative material.” (2004:228). He sees the careful attention to the “noise” of the interview as important potential signifiers of unconscious meaning. Cartwright advocates a contextualising of the meaning of the interview “... through constant comparison of parts of the narrative with other general themes in the interview.” (2004: 228-232). Influenced by Thomä & Kächele (1975), he sees the importance of “... correcting and refining preunderstandings” that can help move the researcher towards greater accuracy and complexity in their interpretation. In line with psychoanalytic ways of approaching an understanding of narrative, the individual’s narratives are understood to be constructed in relation to objects, with core narratives as metaphorical representations of the interviewee’s internal world (2004: 232). Although a psychoanalytic approach has a unique quality through the inference of unconscious meaning, this can become a problem for the evaluation of the interpretative validity of an account. As Spence acknowledged, the reader has to understand the inferences that the researcher makes (Spence 1982, 1998 as cited in Cartwright 2004).

Interpretative Phenomenological Analysis as described by Smith and Osborn (2003) employs in depth qualitative analysis, The method can be adapted to a particular way of working and to a particular topic that is being researched, and there isn’t a single prescriptive way to carry it out. IPA studies are conducted on small sample sizes with detailed analysis of individual transcripts and with the aim “... to say something in detail about the perceptions and understandings of this particular group rather than prematurely make more general claims”. (Smith & Osborne 2003:

54-55). IPA aims to find a closely defined and homogenous group of participants who will experience the research question as significant. My choice of 7 participants within an age range who all identified as trans men, met this criterion.

IPA findings can be linked to the readers' personal and professional experience, as well as to the claims in the extant literature; this facilitates thinking that is conducive to theoretical rather than empirical generalizability. The study can then be assessed by what can become clearer within this broader context.

I have used semi-structured interviews, considered by IPA to be the best way to collect data. The PRI also advocates the importance "... to allow the interview to take its own shape and be as unstructured as possible" (Cartwright 2004: 224). I chose open-ended questions that were not too leading, and that could be subjected to some prompting from me. This gave me an interview schedule that was open to variation within the actual interview. Smith & Osborne comment that "... this sort of work is often iterative rather than linear" (2003: 56-60). Tape-recording is endorsed in some of the IPA literature as being the best method for capturing important nuances, followed by the transcription of whole interviews.

My search for themes followed the IPA method as advocated by Smith & Osborne, of reading the transcripts a number of times, and annotating them at the same time. In this form of textual analysis, there is freedom to focus on what is meaningful and what is less meaningful. In the IPA process the initial notes are transformed into "concise phrases which aim to capture the essential quality of what was found in the text"; then emergent themes are listed and connections are

sought between them. I developed hypotheses from the repeated and significant themes that emerged in my transcripts. These connected with the themes in my theory chapters, that included psychoanalytic literature and my own ideas.

The analysis in both IPA and PRI involves a close interaction between reader and text. Smith & Osborne state that: “As a researcher one is drawing on one’s interpretative resources to make sense of what the person is saying, but at the same time one is constantly checking one’s own sense-making against what the person actually said” (2003: 72).

The themes that I develop in the five theory chapters, drawn from ‘traditional’ psychoanalytic theory, academic literature in gender studies, feminism, queer and trans studies, are ones that I identified as relevant to my research question; these themes became meaningful when applied to the material of the interviews, as I could see their resonance, sometimes recurring across different interviews, in the interviewee’s depiction of their experiences. The chapters broaden out the topics of sex, sexuality and gender; discuss infantile sexuality, sexual difference, the Oedipus complex, phantasy and reality, the relationship between mind and body; femininity, and masculinity in relation to the phallus. I introduce the theory of matricide in relation to the flight from femininity and the female maternal body, temporality of *après coup* that is applicable to gender identity, as well as issues of fluidity, concreteness, representation and symbolisation.

Having developed themes in the theory chapters, I then looked at the interview material to see if these themes resonated in the interviewees’ experience. Each

time I re-read the transcripts, I highlighted and collated themes that recurred, and that reverberated with the themes in the theory chapters. The analysis of the transcripts incorporates analysis methods from IPA (2003), using a process of noting the particular significance of passages, words, expressions, emphasis, and nuanced mannerisms, that I organised and condensed into themes from which I derived the hypotheses. In line with the philosophy of the PRI (2004), I transport psychoanalytic tools from clinical psychoanalysis into the analysis of the interview transcripts that allows for the interpretation of unconscious processes.

In the writing up of chapter 7, my findings and discussion chapter, I condense the themes into hypotheses, listed and numbered at the outset of the chapter. I then refer back to these where I find that they resonate with the material. The narratives include verbatim extracts that support the hypotheses, and the hypotheses support the narratives. This method of analysis and writing up is consistent with both Smith & Osborne's version of IPA and with Cartwright's PRI.

The hypotheses capture condensed psychoanalytic ideas about the potential drives towards gender transition for trans men, and are: phantasy that replaces reality, flight from femininity; sexuality that can transition along with gender; the maintaining of bisexuality; the realisation of a wish using the body as a symbol, and psychic equivalence between emotional and gender struggles.

I do not append whole transcripts of the interviews as appendices, in order to protect the confidentiality of the interviewees, as these extended and unedited narratives could compromise their anonymity far more than the excerpts that I

used in the Findings and Discussion chapter. I expand on this below in 'My Ethical Approach'.

The Interviews as empirical material

When first embarking on this PhD, I considered the relationship between psychoanalysis and transgender more broadly, and was uncertain what form of lived experience to draw upon. I considered the possibility of analysing memoirs as a source of oral history and first-hand accounts, having read a number of memoirs of transgender experiences and attended events in which personal trans experiences were relayed. In the early stages of the PhD the consideration of memoirs helped steer me towards the long-format informal interview that could provide a live experience as clinical material.

I had also considered the possibility of interviews with selected and experienced psychoanalytic clinicians in the field about their views on gender identity. However, as my thinking moved to a more specific research area and I decided to focus on trans men, the plan of conducting individual interviews within this group emerged, thus providing the first-hand lived experience I was seeking. The acquisition of clinical material through psychoanalytic research interviews also fulfilled the interdisciplinary ambition.

My plan to interview 6-8 trans men aged between 18-30 constitutes a small scale set of interviews that enabled me to gain a more in-depth perspective from individual experiences. In choosing a smaller group of interviewees I have let go of the different kinds of valuable insights that a quantitative approach might have

yielded. I wanted to have the opportunity for interviews that would yield in depth material of personal experience of gender identity, that could help my understanding and exploration into this area of research. The interviews gave me the live opportunity of being in the room with participants talking openly about themselves, as freely as was possible in this defined and pre-arranged setting.

The use of semi-structured interviews provided me with material similar to that of a psychoanalytic session in the context of the interviewee speaking openly about their personal lives, with the clear difference that I was in the role of interviewer and not in the role of a psychotherapist, and they were in the role of interviewee and not patient. Unconscious processes are not only present in psychoanalytic therapy sessions, they are omnipresent phenomena; neither are the complexities and nuances of dialogue only specific to clinical settings. Although it was not my role to interpret material during the actual interviews, I was nonetheless able to apply my psychoanalytic thinking to the material both during and subsequently for the purposes of my research. Emerson and Frosh argue for an open form of questioning that enables “flexible and rich talk”, the researcher acts mainly as an attentive listener (2004:32).

I chose the length of the interviews to be approximately one hour long, with a few leading open-ended questions. This allowed for a relatively unrestricted narrative, allowing both conscious and unconscious aspects to unfold in the dialogue with my opening up some aspects of the interview for more depth and specificity. The function of the interviews was to add a clinical dimension, and root my PhD question and research in a range of actual lived experiences of trans men. The use

of questionnaires, as an alternative method, would have suited a larger study group, with the potential for less open-ended and sensitive questions and answers that would have been more appropriate for a quantitative methodology.

Although I was experienced as a psychotherapist, I was not experienced as an interviewer, which became apparent to me in the first few interviews. I needed to rein in my usual tendency to listen and then interpret. My role and function in the interviews was very different to the one I was used to having when in a room with someone talking about themselves openly. This had to be acknowledged and registered by me, in order to be clear and not confuse or interchange these roles. One main difference was in the purpose of the meeting: an interview set up by me for my own purposes in which someone has agreed to take part knowing in advance what the focus was to be on. One overlap between a clinical session and these interviews was my wish to facilitate an opening up of a particular subject, if I felt it would reveal more scope for insight, albeit not with the aimed benefit for the participant. As I recognised that the interviews were for my benefit, I was very appreciative of the generosity of the participants. A more covert benefit for participants was the opportunity to speak about themselves to a very attentive listener without the agenda that they might well have experienced in other circumstances such as pre-transition consultations.

In my research, the field of observation consists of a number of one-off interviews. I am treating the material as clinical (but not therapeutic) by using and applying psychoanalytic thinking to my analysis of it. I am aware that they are not bona fide case studies as I clarified earlier in this chapter, and yet I am transporting methods

of analysis for single case study research into the psychoanalytic research interviews. This will include the generation of hypotheses.

Ethics, Context & Reflexivity

I am researching both the capacity of psychoanalysis to understand gender identity and the way in which trans men experience their gender identity in the early part of the twenty first century. The specific time in history, geographical location and cultural climate in which I am writing about this subject area is relevant socially, culturally and individually and requires acknowledgement as I discuss it.

Muller stated that:

... our dominant epistemic rule has become the rule of context: if we wish to understand an adult's actions, how a child learns a new behaviour, or the function of the organism, we have to situate these in relation to context.
(Muller 2009: 49)

Personal familiarisation with the material that is being analysed is central and in line with this I have conducted the interviews and transcribed them myself. These processes of familiarisation have enabled me to immerse myself in the transcripts or 'trans scripts', to identify themes with the aim of finding both similarities and something new that can deepen and broaden understanding of a given phenomenon. Varvin refers to this as "... new connections and structures of meaning" (2011:119).

Key concerns in terms of my duty of care towards interviewees includes the risk of them being identified from my work; or perceived to be identified with the findings of my work and thus endorsing a psychoanalytic stance. I did not invite

interviewees to approve my findings, as this might have effectively altered their status from that of research subject to collaborator. I will be making my research and findings available publicly and in doing so, I fulfil my responsibility and respect towards the interviewees' agreement to, and interest in, contributing to an accessible pool of knowledge through truthful investigation, communication of the findings, and the freedom to reflect contested positions openly. Although there are ethical considerations to making the research available publicly, in relation to interviewees, it also feels important to make the research available to be read as a contribution to the field. My aim (and stated purpose of PhD research) has been to add knowledge to this subject area, which necessarily involves the pragmatic need to take into account current sensitivities, positions and the potential for rebukes to these. I have made every effort to take a balanced approach to this.

In the highly unlikely case that an interviewee was identified (see the 'My Ethical Approach' section later in this chapter), I am mindful to avoid the risk that they might be seen by the trans community as endorsing my ideas. If they were to be accused of supporting unwished for (psychoanalytic) views on gender identity, their defence in this case would be along the lines that their participation in the project was not an endorsement of the research findings. I felt that this risk should not override freedom to write about gender and psychoanalysis, as an academic endeavour with ethical approval for the project.

I do not wish to privilege my voice over the voices of my interviewees, and recognise and acknowledge the situatedness of my position in writing this PhD, and the risks and implications of my authority as a researcher and relation to the 'other'

as the research subject; I have been mindful of this balance between research and subject. I have questioned my positionality in relation to my subject throughout the research, and it has entered each stage and mapping out of the form the research would take.

Interview questions

The aim of my questions was to try and access the actual lived experience that trans men have of their gender identity, how it began to emerge developmentally and took shape psychically and physically: their individual narratives about themselves. I also wished to explore how the difference between maleness and masculinity was comprehended; and how they related to their body (the historically female body). I moved onto questions about family support, what role their parents and family had played in relation to their transforming gender. As my research question includes the relationship between psychoanalysis and gender identity I have included questions about access and experience of psychological help, and whether in their view psychotherapy is relevant to their situation (Interview questions appended).

Finding Interviewees

This aspect of my research was challenging for me as the subject matter of gender identity is highly sensitive: culturally, politically and individually; this too meant that a smaller group of interviewees was both more appropriate and achievable. It would be fair to say that at times I felt both somewhat paranoid and persecuted in relation to this task. This seemed to be a countertransference response to the task and role of undertaking this culturally sensitive topic as my area of research. The subject area that I have chosen to research is historically controversial and

continues to be so, and is one in which the political and phantasmatic cross over. I felt that at times I got caught up in this blurring of reality and phantasy in my quest to find interviewees, as if I was stepping into a territory with undecided or shifting boundaries: both fluid and rigid.

I approached several LGBTQ+ networks and organisations: from Student groups at Universities, Charities, Counselling and Therapy Services, NHS Gender Identity Clinics, Online forums, Psychoanalytic training organisations and was often met with a total lack of response, or an ambivalent one. I was very aware of the sensitive nature of my pursuit and expected there to be suspicion towards it. I was also aware of the importance of avoiding being perceived as 'gender critical' or anti-trans, intrusive, judgemental, ignorant, an outsider, as I am not a trans activist or from within the LGBTQ+ community. One route into finding interviewees was through personal/ academic networking. This 'friend of a friend/person-to person' approach seemed to overcome some of the resistance that I encountered when approaching organisations and groups and to circumvent anxieties about my motivation. This highlighted the controversial character of the research at this historical moment and the suspicions about a psychoanalytic approach, as well as of a researcher who is not trans or LGBTQ+ identified. I wrote a flyer about my research and wish to find interviewees (appended). I tried to gauge a tone that would not be off-putting and this was hard to write. One interviewee was helpful with what might appeal and what might not. It's significant that being 'vouched for', even at second-or third-hand, but also being seen as part of an overlapping circle of academic/cultural affiliation, led to finding some of the interviewees. The

significance resides in the trust and receptivity to the exploration as important to conducting the type of interviews that I wanted to do.

Some potential interviewees were only willing to be interviewed if I was invested in advancing or endorsing trans- activism. I encountered one overtly hostile response from a trans man who questioned 'whether I was in the community' and asked me if I'd discussed my wish to do this research with trans organisations? The subtext to the hostility appeared to be rooted in the notion that I should not be considering this research as a non-trans or non-LGBTQ+ person: who was I to understand any of it? I have indeed asked myself this question at times and have tried to be sensitive to my 'outsider' position in this context. In another context I feel that I am more of an insider as a woman born female, as this gives me a more natural identification with trans men who were also born female and with a female body, albeit for them an unwanted one.

The interviewee's ages were: 19, 20, 22, 24, 27, 28, 29. At the end of chapter 7, there is a table that shows more detail about my interviewees. I am pleased that I managed to find interviewees across the age range or 18-30, as this gave me scope across this age range from late teenager to young adulthood. I selected this age range as it represented late or lingering adolescent experiences as well as the entry into adulthood. This age range also represents the culmination of adolescence, being in and experiencing the world as young adults, and the move from the former to the latter age group.

My research required careful ethical consideration and I applied for and gained ethical approval from UCL (Appendix 5). I was very aware that the subject of my PhD question was and is politically sensitive, and located in a field that is divisive. I knew it would require theoretical and clinical agility, and a capacity to navigate my way through challenging terrains. On a more positive note, the journey was always going to challenge and stretch me and my hope and aim was to emerge with nuanced knowledge and greater insight that informs my work in a way that could interest and engage both the psychoanalytic community and the trans community.

My Ethical Approach

Interviews

Part of my research involved interviewing trans men about their experience of gender identity. As the aim of the research is to enhance the psychoanalytic understanding of gender identity and particularly that of trans men, it felt crucial for me to have access to lived experience via the interviews. Ethical issues around privacy and exposure inevitably required careful thought in relation to the decision to interview trans men. I was concerned to protect interviewees by being very clear from the outset about the remit of my project. In my initial 'Information and Invitation' that I sent out, I specified that "I am particularly interested in how trans men *experience* their gender identity..." (Appended). Participants that came forward were keen to take part, and wanted their stories and experiences to present a contemporary view of what it means to be transgender, that included accounts of their journeys towards becoming trans men, for the research. That does not mean that they should not be protected from potential negative reactions to

the study that they might not have anticipated, so the process of pseudonymising set up in the outlining of my process in the UCL Ethics Approval remained crucial. The material is not clinical, as it has not come about in a clinical psychotherapeutic setting. As the PhD was an academic undertaking, it was important for me to have the freedom to interpret interview material using psychoanalytic tools such as unconscious processes and a psychoanalytically informed theoretical underpinning, as part of my methodology. The PhD consists of my theoretical chapters that form 'my stories' taken from the literature, followed by a discussion of the interview material, formed by their stories. I derive the hypotheses from both the theory that builds in the first five chapters, and material, carefully scrutinised, that the interviews generated. The theory chapters lead up to the findings and discussion chapter, that melds theory and lived experience, via the hypotheses.

UCL Ethics Application

UCL has a detailed and robust process of ethical scrutiny and review for research projects.

To gain the approval of the UCL Ethics Committee, I had to provide a clear description and justification for my research plan, that included a brief summary of the project, its intended value, as well as the research protocol, and type of procedure or research methodology.

The forms required by UCL were:

- Application for Ethical Approval: High Risk, that included Data protection
- Participant Information Form

- Consent Form
- My own publicity for recruiting interviewees:
- Invitation Flyer
- Information sheet

I outlined my plan to interview 6-8 healthy adults aged between 18-30 years, who identify as trans men. I specified that I would record the interviews and then transcribe them myself. At the point of transcription, the interviews would be anonymised and given pseudonyms. Once transcribed, the interviews were permanently deleted from the electronic recording device. I specified that material for discussion within my PhD that the interviews would yield, would be published, along with the potential for scientific papers.

I was aware of the importance of making it very clear to interviewees that the purpose of the interviews was for my research, that the content of the interviews was going to be personal, and that I'd be using material from the interviews with the use of pseudonyms. This was initially conveyed via the publicity sheet that I sent out: "I'm looking for participants willing to speak, anonymously and confidentially, about their experience of their gender identity", then in more detail in the UCL Information sheet: "Individuals will be given pseudonyms and so will not be identifiable during the transcription process or in any publications", and finally in the UCL Consent form (Appendix 4) prior to the actual interview: "I consent to the processing of my personal information on my gender identity and experience of psychological help for the purposes explained to me. I understand that such

information will be handled in accordance with all applicable data protection legislation". Initially, individuals who responded and who fitted with the criteria of my research were given the UCL Information sheet (appendix 3); at this stage of the recruitment procedure, no one chose not to take part. Following the provision of the Information Sheet and the opportunity to ask further questions, interviews were arranged with the interviewees who wished to participate. They were given the Consent form, prior to the actual interview. Participants were clear about my endeavour and the parameters of my research and they consented to this. There was no suggestion from participants that they would have issues with the material used, as long as it was anonymised.

As the subject of transgender identity is a sensitive one, was likely to be emotionally taxing during the interviews, and had the potential to feel intrusive, I provided the option of withdrawing either during the interview or up to a week after the interview. I made it clear in my UCL Information Sheet and Consent form that interviewees did not have to answer questions if they did not wish to and could withdraw at any point. I also allowed for time to debrief after the interviews. The confidentiality and use of pseudonyms was made very clear to the interviewees in advance, as was my management of the recordings and transcripts, in line with UCL ethics and GDPR.

The UCL Information Sheet that formed part of the UCL Ethics Committee Approval included a clear outline of the project, what participating would entail, how I'd record and transcribe interviews, data protection issues, confidentiality that would be respected subject to legal constraints and professional guidelines. I clearly

specify that I will use data from the interviews in my PhD thesis and potentially in Scientific journals.

The Ethics of Freedom within Research

Interviewees were all made aware of the subject of my research and knew that the interviews would be about their gender identity and, if applicable, their experience of psychotherapy. They also knew that my approach to this research was psychoanalytic, that I was not part of the trans community, or advocating for trans rights. I was mindful of the, at times, pathologizing tendencies towards transgender within psychoanalytic theory, and made it clear to interviewees that my stance would be neutral within my research. By 'neutral', I mean that I was not invested in making any judgements about gender variability, but also appreciate that there is no such thing as pure objectivity. I was keen to allow myself to have psychoanalytic and academic freedom within my study, and to form hypotheses from both the theory chapters and the interviews. The psychoanalytic underpinning of the project necessarily recruits the unconscious into my findings and discussion.

I made it clear that there would be no pressure to speak about issues that the participant did not wish to speak about. I indicated that the semi-structured interviews would have a free-flowing quality and that I might ask them to expand on some aspects of what they were telling me. Interviewees were made aware that material from the interviews, that I would use in my research, would be anonymised in order to protect their identities.

I was aware of the generosity of the interviewees to be willing to speak candidly about themselves for the purposes of my research. Whilst there are not necessarily

any immediate benefits for participants, as specified in the Consent form: “No promise or guarantee of benefits has been made to encourage me to participate”, the experience of the interview will provide the opportunity to reflect on a complex subject with someone outside their personal lives. I was mindful of the boundary between interviews with personal content and therapy sessions. The research may also contribute to a change of attitude in clinicians interested in working in this field.

This subject is a current area of psychoanalytic research and the interviewees volunteered and were interested in being involved in a project that aimed to further understanding of the trans experience. The potential to use material, through the use of pseudonyms, from the interviews was made clear from the outset, as the whole venture of the interviews was always driven by and for the sole purpose of a PhD about transgender experience and psychoanalytic understanding of it.

Practical & Ethical considerations around Transgender Now

Transgender is a contentious subject to write about and research, and I have been aware of the need to tread sensitively throughout. I think that it is, however, possible to treat the subject area sensitively at the same time as having the freedom to question, explore and ask difficult questions. I’m mindful of the fact that speaking or writing about transgender can have adverse consequences.

The current UCL President and Provost, Dr Michael Spence, has advocated academic freedom for the purposes of progress and social change. He states that:

“There can be no safe place for unchallenged thinking; in fact, I would argue that it is the job of a university to make everybody feel uncomfortable and wonder if they are wrong. That is how we progress”. He goes on to cite UCL as an institution that has been involved in asking the difficult questions and in considering the implications of the answers for social change (2021). He mentioned that prior to the pandemic, UCL hosted the Woman’s Place UK Women’s Liberation 2020 conference, that included gender critical views. The event went ahead and those who opposed it were able to protest and be heard which he called “a victory for free speech”. He’d like to see the opposing sides being able to talk, listen and understand one another in spite of strong disagreement (UCL Portico, Nov 2021).

In applying for UCL ethical approval, I was aware of my duty of care to participants, to the integrity of UCL and to my own research.

Why Trans Men?

Although my PhD question asks how psychoanalysis can understand gender identity, I decided to focus on trans men as one particular aspect of the much broader field of gender identities. My initial interest was in hysteria which psychoanalytically has the underlying question: “Am I a man or am I a woman”? This question to my mind has great relevance to the question of gender identity and specifically to transgender identity. The transition from female to male piqued my interest more than male to female transition, not only in the context of the motive to eliminate femaleness and through my own identity as a female but also because

of the huge growth in numbers of referrals for female to male transitions¹. I became interested in the ‘when, how, why and why now’. What is it about female identity that is so unwanted by young females, why is male/masculine identity sought, what kind of masculinity is being sought, what is the function of gender developmentally, and can gender become all encompassing and subsume adolescent difficulties such as Anorexia, Bulimia, Depression, Anxiety, Self-Harm, Family disharmony, Body Dysphoria and Suicidality. This list is not exhaustive, and I expand on it in my discussion chapter.

Is the ‘gender turn’ eristic?

In my discussion chapter I include thinking on *the ‘gender argument’ as an eristic argument*, as part of Argumentation Theory (Perelman 1958, 1969). An eristic argument is one that aims to successfully dispute another’s argument, rather than searching for truth. Irwin (1995) stated that “It is characteristic of the eristic to think of some arguments as a way of defeating the other side, by showing that an opponent must assent to the negation of what he initially took himself to believe” (Irwin 1995: 585). Gender identity, which has a claim to ‘rights’ can sometimes come across as eristic in its approach to social and cultural mores; although this throws open the question of what constitutes ‘the truth’ in this complicated area of identity politics.

According to Perelman and Olbrechts-Tyteca:

For argumentation to exist, an effective community of minds must be realised at a given moment. There must first of all be agreement, in principle, on the

¹ See footnote 3 of Introduction for data.

formation of this intellectual community, and, after that, on the fact of debating a specific question together: now this does not come about automatically (Perelman & Olbrechts-Tyteca 1969).

Chapter 7

Findings, and Discussion of the Trans-Scripts

I start this chapter by outlining the hypotheses I have derived from themes that emerged from the interviews and the preceding theory chapters. I will follow with a discussion of interview material that includes excerpts. I intersperse the numbered hypotheses within the discussion. The clinical part of my research involved seven interviews with these trans men aged between eighteen and thirty. I have divided the interviews into two groups, delineating the younger age group as teens and post-teens aged 19, 20 & 22 from the slightly older age group as young adults aged 24, 27, 28 & 29.

The hypotheses I generated from the theory chapters and the interviews with trans men are:

1. Phantasy replaces the reality of the difference between the sexes, when it is unmanageable.
2. The quest for masculinity is a fight with or flight from femininity.
3. I am therefore I was: Bespoke masculinity includes bespoke temporality.
4. Sexuality can transition along with Gender, although the sexual object of desire remains the same.
5. In transgender identity bisexuality is often maintained.
6. Transgender identity realises a wish using the body as a symbol.
7. Emotional struggles become gender struggles through psychic equivalence.

The main themes of the hypotheses are: Phantasy, Femininity, Temporality, Sexuality, Bisexuality, Symbolism, Equivalence. I have written about these themes in the preceding theory chapters, and have derived the hypotheses from the full transcripts of the interviews. In my following discussion of interviewees, I insert numbered hypotheses in brackets, where the material (excerpts and my discussion) corroborates these hypotheses.

Whilst discussing all interviewees I will use 'he and him', as I am thinking about them through the lens of their current gender identity as trans men.

I will be using the following pseudonyms for the interviewees: Danny (19), Casper (20), Rory (22), Jude (24), Leon (27), Hal (28) & Ben (29).

Discussion of the younger Group: Danny (19), Casper (20) and Rory (22)

Danny

Danny, Casper and Rory all experienced intense discomfort with their female bodies, although this manifested differently in each of them. For Danny, this began when he felt physically exposed on a hot summer holiday at the age of fifteen, exposed to others and to himself when his body showed itself to be unerringly female and feminine. Earlier in life Danny had liked 'boy activities' and did not like being asked if he was a boy or a girl, which marked the beginning of a gender segregation for him, or an entrance into a world in which you had to declare yourself as girl or boy. Danny grew up with his mother, no siblings and had never met his biological father. Early in his teens, he initially identified as gay and gender

fluid before coming out as trans: "... maybe there is more to me than just liking women". This indicates that it might have been difficult to accept being or remaining female and gay.

When I met him, he had not started any medical transitioning. He did not like being 'misgendered', and felt more comfortable in queer communities in which gender is fluid and not contentious. When he is around gay or bisexual men he is more at ease, he feels his masculinity stands out more than when he is in a group of straight men. It would make him anxious to correct a straight man if he was being 'misgendered' by them; in the queer community that would not be a problem.

Danny said: "I realised that I was born in completely the wrong body". When I thought about this sentence, I read it as also meaning that his mother's body was in fact the 'wrong body' to have been born into or out of, and that he had a negative identification with femaleness and femininity, which must to some extent be symbolised by his mother: both his actual mother and how she configured psychically in his conscious and unconscious mind. His mother liked to buy Danny feminine clothes that he did not like to wear. Father left the picture when or perhaps before Danny was born. From the outset of Danny's life father has been missing, which one could conjecture might have taken the form of *an imaginary male figure*, so crucial to his existence and yet so absent from it. This absence might well have filled his mind quite powerfully in the form of anger, sadness, surrender and a missing part of his identity and identifications. (Hypothesis 2 & 6)

As I am interpreting material from the interview transcripts, my interpretations are not emanating from the transference as would be more usual in a therapeutic setting. I recognise that this leaves me with a degree of freedom to speculate on the possibility of unconscious processes.

Danny did not have any actual live image of his father (as far as I'm aware), but may well have had phantasies about what it was that made his father leave his mother and his daughter. Could it have been the pregnancy? Might his father have wanted a son? Could there be an attempt to appropriate or bring to life this elusive father in Danny's wish for maleness? His perception of his mother's struggles might have imbued femaleness with negative connotations. Danny was curious to know how maleness in the form of physical characteristics would take shape in him once he started on testosterone, which was a pathway he was not yet on, so it took the form of day-dreaming and phantasy for now. This can be thought of as a phantasy that *hallucinates maleness* and *brings a man into being* perhaps as a way of negating the reality of not being able to bring his biological father into being in his life (Hypothesis 1). It is also a phantasy and wished for reality that shows the struggle of having to accept difference between the sexes and loss of the sex that one is not. (Hypothesis 6)

At times, Danny would find himself depressed when he could pass¹ as a trans man during the day but then on getting home and having a shower he "felt busted". The

¹ Passing is used in transgender identity as a description of looking like the gender one identifies as, literally being able to 'pass' as that gender identity.

choice of this word might betray Danny's ambivalent feelings about having a bust, and having to know about it, once he was not wearing a binder.² The psychic and physical experience of identifying as a trans man (out in the world and seen by others) is exposed by the body that reveals itself in no uncertain terms as female. The flight from femininity (Hypothesis 2) is thwarted and "busted" in this encounter with the reality of the natal body (Hypothesis 1). A number of the interviewees did not like my use of the word 'breast' and preferred 'chest' as a less gendered word. I wondered about the aural cue of a word that negates a new reality, and brings forth something unwanted physically and psychically. Danny's experience shows how the mind can split itself off from the corporeal body, but the severance cannot be complete as reality busts up the wished for phantasy, and this reined in conflict and depression (Hypothesis 1 & 2). It occurred to me long after the interview that as Danny was not taking hormones, I presumed that he would still be having periods as another recurring confrontation with femaleness for him to contend with.

Danny was in a relationship with a man who he described as "visibly not straight ... he's assigned male at birth but is non-binary³ " and who was free and open and unquestioning about Danny as a trans man and who "acts like I'm just a normal guy". This implied a gay relationship, that might wish to override aspects of bodily reality, and respects gender as that which is felt, presented and 'who I identify as'.

² A binder is worn by trans men in order to flatten their chest or breasts.

³ Non-binary implies that one is not aligned to either male or female gender identification or to one's natal sex.

(Hypothesis 1 & 6). Whereas Danny initially came out as a gay woman, then gender fluid before coming out as a trans man, he also now identifies as pansexual. He still likes women; bisexuality and homosexuality are retained (Hypothesis 5), and “It doesn’t matter to me what people have in their trousers”. He also told me that trans men can be sensitive in sexual relationships. He seemed to bypass or negate this sensitivity in himself or project it into others.

So yeah there’s a lot of stigma around a lot of things umm regarding transgender people and relations with transgender people. In my opinion I don’t really care (laughed a bit) because my partner doesn’t care so why should I care. But I don’t care anyways, I’ve definitely had relations with transgender people before and I’ve never found that a big deal, it’s just a person, you’re allowed to be interested in whoever you want. (‘Danny’, personal communication, interviewed on 12/12/2019)

I took up with Danny that perhaps he was saying that: “... it becomes a difficult area when someone is rejected for being the gender that they are not wanting to be”.

Danny went on to tell me about what it might be like for a trans woman encountering a man who was not openly gay. Danny was protective of the trans woman (male to female) who is pre-surgery, who has been in a sexual encounter with a gay man (naturally male) who might not be publicly out of the closet yet in his gay male identity. The gay man could ‘out’ her (expose the trans woman’s natal maleness) and he could be ‘outed’ himself as not really being gay, as he is with a trans woman. There was something in this material very much concerned with “what people had in their trousers” that was secretive and sexual and in danger of getting out (either their gender identity or sexuality). I wondered about the sexual secrecy surrounding his father’s disappearance that might have been unconsciously

transmitted to him by his mother as an enigmatic signifier (Laplanche 2007).

Perhaps he could never really ask about his father who conceived him which made the reality of the primary scene taboo and deadly secretive. This phenomenon is described in 'Secrets in the Family' (Pincus and Dare 1978). The (mysterious or unexplained) sexual uncoupling of his parents might have made the (heterosexual) procreative act dangerous, as it can leave the woman pregnant and abandoned; and can evoke masculinity and maleness as mysterious and absent (Hypothesis 2 & 6).

When I put it to Danny that "... if a heterosexual woman is dating a trans man, does that mean that she's *not only* heterosexual"? Danny responded by explaining fluid sexuality and pansexuality to me:

So there is a sexual orientation that we call pansexual which is basically, well it comes with the belief that *you can identify from male to female to none to both to various different combinations* umm and that's where pansexuality comes from, so pansexuality is where you just don't care about the gender or the sex of the person that you are interested in; it could be a trans person, it could be your non-binary person, agender, male, female, could be anything. So a lot of people that date transgender people are either broadly bisexual or pansexual I would say (my italics). ('Danny', personal communication, interviewed on 12/12/2019)

I was curious about the contrast and conflict about seemingly not caring about gender at the same time as caring about it very much (Hypothesis 7). There was so much fluidity that it flooded all differentiation between the sexes and genders and in a sense panned sexuality and difference altogether into a 'anything goes/ catch all' concept. This also brought to mind a more primitive infantile sexuality that

Freud referred to as a 'polymorphously perverse disposition'⁴, which develops prior to the genital functions and is bound up with the diversity of the erotogenic zones (Laplanche and Pontalis 1973: 307). Danny's pursuit of pansexuality also reversed Freud's advocating of "Where id was there ego shall be" (Freud 1933).

Danny was female and gay before becoming a trans man, so he has changed from female homosexuality to pansexuality. In his current relationship he is with a man who is non-binary. The object of desire was female and is now male, but could also be female (as he is pansexual), so in that sense it has remained the same as before (Hypothesis 4 & 5); but if Danny was in a relationship with a woman now, he'd be identifying and relating as a trans man rather than a gay woman. It seems that Danny might only be comfortable as sexual with a man only if he is not identifying as female or identified as female by the other (Hypothesis 2 & 4).

Here Danny speaks about the change in sexual object:

... a lot of trans men actually *do start as gay women* because a lot of trans men are a lot more attracted to women than they are to men, so at first they would probably definitely come out as a gay woman and after that they would probably think about the fact: they would think about why do I actually like dressing as, *why do I like dressing masculine and why do I like women?* And then they would start thinking like about their gender umm and usually after maybe coming out as trans they start exploring relationships with *not just women* umm *but different genders* as well. So a lot of trans men that I know actually end up dating other trans men, women

⁴ See footnote 9 of this chapter.

and men, so yeah it's a journey (my italics), (Hypothesis 4 & 5). ('Danny', personal communication, interviewed on 12/12/2019)

In Danny's understanding, gender identity follows on from the object of sexual attraction: I must be attracted to women because of my masculinity. This trajectory might sidestep the resistance to female masculinity in the form of being female and gay. It necessitates a gender change from female to male. This gender change in turn appears to widen or pan out the scope of object choice to not just women but trans men and in Danny's case a man who is not straight and identifies as non-binary. The switch over is from woman to woman in a gay relationship to trans man to gay man, also in a gay relationship in which the heterosexuality can be thought to be disavowed. The homosexuality in both relationships remains constant although the choice of object has changed (Hypothesis 1 & Hypothesis 4). The unsought after position is that of being a female sexual object or subject, and this came through in all of the interviews (Hypothesis 2 & 7). Perhaps the pansexual stance was for Danny a place that was removed from an unmanageable or restricting binary. What seemed to get played out in the interview was his panning out, and my panning in.

Casper

Casper, aged 20, explained that he grew up in a "gender neutral" household. Mother's message to her two daughters was that they could do whatever men did, effectively conveying to them that men and women were, to all intents and purposes, the same and equal. The message that Casper's mother conveyed to her

daughters might well have contributed to Casper finding the reality of a female body and being female a shock at school and during puberty:

... when I started periods and stuff so I started encountering more rigid gender rules which was kind of bizarre to me because people in the playground would play like men and women and I was like: 'ok that's a thing now' (laughed), so I just wove back and forth between those two groups and it didn't really matter to me and then I didn't really start becoming conscious of gender because *in my mind I grew up in such a gender neutral household* that people thought it doesn't really matter and people would say that men and women think differently but I wasn't really ... it wasn't really a thing in my house so yeah I didn't really start critically thinking about it until *puberty hit* (my italics). ('Casper', personal communication, interviewed on 09/01/2019).

The difference between the sexes is effectively ironed out in the house of mother's mind, in which gender is both neutralised and perhaps to a certain extent neutered. This is transmitted to her daughter who is then confused by this 'enigmatic signifier' and by the social reality of the difference between the sexes (Hypothesis 1 & 7).

The expression that is used by Casper is that "puberty hit", and that might convey that it felt like a violent blow to the previously held belief or phantasy that men and women were equal or the same, and of there being no difference between the sexes, not really. The material reality of a female body that bleeds during menstruation and can become pregnant shatters the previously held belief (Hypothesis 2 & 6).

Mother and sister were loud about their emotions and Casper identified more with his quiet and reserved father. As Casper struggled with his developing female body

he initially had an eating disorder ⁵aged twelve or thirteen in an attempt to arrest this unwanted bodily trajectory:

When I would dream and stuff like that I'd be in a man's body ... it was like I guess having a mental map of my body and my body just wasn't fitting that and I freaked out so I developed an eating disorder because I knew that if I didn't eat I wouldn't get menstrual cycles and stuff (Hypothesis 1, 2 & 7); ('Casper', personal communication, interviewed on 09/01/2019).

Casper's eating disorder can be read as his determined attempt to control or starve his 'femaleness' from developing in the body and an early signal of body dysphoria. He found a way to try and control the unwanted reality of having a female body with an orifice that could both menstruate, be penetrated and lead to pregnancy. As Casper had an aversion to his female genitals or the idea of penetration, his mouth became the orifice that he was closing off symbolically (Hypothesis 6). Williams has written about 'the no-entry system of defences' in relation to adolescent eating disorders whereby the defence has been installed as a protection from projections that can often be experienced as persecutory foreign bodies (Williams 1997: 121).

One way in which Anorexia has been understood and theorised has been by equating the maternal function with food, so that the refusal to eat also becomes the defence against unwanted maternal intrusions or projections. A quote by Lawrence seems very relevant to Casper particularly if the word 'food' is substituted with 'femininity':

⁵ Eating disorders can be seen as a prevalent feature of hysteria. Anorexia nervosa used to be called 'anorexia hysterica' (Mitchell 2000: 25).

Anorexia is understood as a disorder in which a failure to differentiate adequately from the mother leads to difficulties in mastering sexual anxieties of intrusion, which become concretely enacted in the refusal of food (Lawrence 2002: 838).

He did not want a body like his mother's or his sister's, and "would rather die than be pregnant" (Hypothesis 2). He came out as bisexual before gender "was a thing", this can be understood as a precursor to a wish not to limit his choice of sexual aim or object, or a manifestation of feeling unsettled in his own gender, am I male or female and is my sexual object male or female? (Hypothesis 4 & 5). At age 17 he started medical transitioning, "... having a uterus and the idea of being pregnant just freaked me out ... just straight from the get go and I was like there's no way in hell I'm ever going to do that". Casper was very anxious and phobic about the inside of a female body, and what it could do, or of growing older in a woman's body: "I just can't imagine myself to be growing old to be a woman, I just can't imagine myself being eighty and a woman, I just can't" (Hypothesis 1 & 3). There is something unbearable and unimaginable about the future female body as ageing or old, and it is hard to know here if it is the fact of ageing or the fact of femaleness that is intolerable and perhaps it is both, but Casper appears to be protesting against both femaleness and temporality. The surgery that Casper elected to have first was a hysterectomy: after which he experienced "immense relief, even though I can't see it" (Hypothesis 6 & 7).

Casper was in a relationship with a Cis man⁶ (Hypothesis 4). His current choice of an object is male, although he did not explicitly describe himself as a gay trans man but bisexual (Hypothesis 5). He had found it difficult and anxiety provoking to be sexual with a male partner before he came out as trans, whilst he was still identifying as female. The experience of female genitals appears to have been disturbing if not frightening and agoraphobic in relation to sex, reproduction, or the idea of aging in a female body. He wants to reproduce himself *as a male* and cut out the female reproductive organs. The severance of femaleness is concretely executed, through use of the body as a symbol (Hypothesis 6): I am no longer female as my reproductive organs have been removed. Material reality replaces unmanageable psychic reality (Hypothesis 7) that becomes enacted through surgery ensuring that there will never be a pregnancy; this provides Casper with “immense relief” as the womb is no longer threatening femaleness from inside or male penetration from outside (Hypothesis 1 & 2).

Casper wished that he’d had the possibility of explaining his early struggles with his body, he felt that no-one was listening or understanding what he was really feeling: “... it never occurred to me that like: *Oh maybe I’m a man* and maybe this is why I’m not OK with my body” (my italics), (Hypothesis 3). He found it frustrating to speak to a psychologist:

Everyone was trying to force me to be something that I wasn’t and I still couldn’t articulate what I was feeling and I was like: OK I get it, my eating habits aren’t good, but my body’s not the way that it should be and if it’s

⁶ A cisgender individual identifies with their phenotypical sex.

not, it's not because I think I'm fat, I just don't want these things to be happening ... I don't want my chest to grow ... I don't want this. ('Casper', personal communication, interviewed on 09/01/2019).

The psychological help that Casper was offered frustrated him at the time, as the clinician was trying to get him to accept his female body rather than empathise with or acknowledge his acute dysphoric difficulties as a conflict and struggle. Casper would have liked the clinician to accept his body dysphoria as a signal and confirmation that he was really male or a trans man (Hypothesis 6 & 7). This throws up the difficult position that a clinician can be put in, in relation to gender identity, particularly when and if the patient's conviction cannot be opened up for exploration; the kind of exploration that can facilitate (making links and including unconscious processes) thinking, and not an exploration that either blocks or pushes the wish to transition. Although Casper wanted his Anorexia to be viewed as an early sign of 'being the other gender' (Hypothesis 3), one could reverse this into thinking that his gender difficulties in the form of embedded dysphoria came to light through the Anorexia (Hypothesis 1 & Hypothesis 6).

Before Casper came to terms with or came out in his gender identity, he came out about his sexuality "as bisexual" (Hypothesis 5). He turned to someone older who was male and gay for support and help with how to manage being open about this. Initially he experimented with being non-binary, but from the age of fourteen and definitely by sixteen he knew that *he felt like a man*. He felt concern about betraying feminism by not staying with the identity of being a strong woman. At around age sixteen Casper met other "trans guys" for the first time, which was very reassuring for him, to be able to talk to them about similar feelings.

One way of thinking about Casper's acute fear of penetration or pregnancy is to link it with Horney's prescient insight: that in identification with the male body, the girl's fear of injury to her vagina turns into a castration phantasy:

... when the woman takes refuge in the fictitious male role *her feminine genital anxiety is to some extent translated into male terms – the fear of vaginal injury becomes a phantasy of castration*. The girl gains by this conversion, for she exchanges the uncertainty of her expectation of punishment (an uncertainty conditioned by her anatomical formation) for a concrete idea (my italics); (Horney 1926: 336).

The exchange of an uncertain expectation of punishment for a concrete idea is pertinent; it describes persecutory anxiety and how this is managed concretely. It is not that the woman is already castrated through not having a penis like her father and brother, but that she will become castrated because of the intensity of her identification via 'the fictitious male role'. So, her understanding of her genitals, later on written about by Bernstein (1990) as female genital anxieties, takes on the form of something symbolically equated (Segal 1981: 57). There is no 'as if' (Malcolm 1990), it is more appropriation than identification as she becomes the male who will be castrated and this is the exchange for a concrete idea (Hypothesis 1, 2 & 7). The hysterectomy that Casper elected to have, albeit something that gave him much relief, can also be thought of as a castration of femininity, or even perhaps a hysterical solution for an unwanted womb.

Primal scene phantasies are relevant here as they form the child's unconscious archive, and operate both pre-genitally and genitally during development. During the pre-genital phase the phantasies can include oral devouring fantasies, bisexual

confusions and the fear of losing the representation of one's body limits or sense of identity. If the individual's psychic reality is overloaded by these phantasies, sexual or love relations can become equated with castration, annihilation or death.

McDougall referred to these primitive anxieties as emanating from early mother and infant exchanges, and as they are preverbal, they become stored in the memory *of the body* (my italics); (McDougall 1995: xvi). One can think of McDougall's 'early mother and infant exchanges' as Laplanche's enigmatic signifiers.

It is significant that Casper's identification as bisexual preceded his identifying as a trans man (Hypothesis 5):

I was at the time coming to terms with my sexuality and I felt that gave me licence to experiment more with my gender too because people ... maybe this is just my perception but I perceive it like that people have more of a leniency for queers, for females, to be a bit more masculine than straight females so it's more acceptable to do that, so I was experimenting with that. ('Casper', personal communication, interviewed on 09/01/2019).

This can be read as Casper feeling that he could exercise his maleness more comfortably and freely whilst identifying as bisexual or as gay and female, implying that femininity was more of a requirement or expectation in 'straight females', which in turn implies a constriction associated with being a heterosexual female: a feminine woman destined for a man in the form of compulsory heterosexuality that might include pregnancy. This also evokes identification with the male parent in the primal scene (Aaron 1995); it seems that Casper wishes to be *as male as possible as*

a female prior to the discovery of trans men and the wish to transition, (Hypothesis 2 & 6).

In relation to his bisexuality since identifying as a trans man, Casper said:

... one of the weird things I've been negotiating is *I'm still bi believe it or not*, that doesn't change (laughed), for me it didn't (hit his fist into his hand), so it's kind of like a weird area of negotiation ... especially negotiating the community with other queer men ... it's sort of like *this weird thing*. And as you probably can tell, I'm not the most macho person on the planet (my italics). ('Casper', personal communication, interviewed on 09/01/2019).

Still being bisexual (Hypothesis 5) appears to surprise Casper almost as if this should not have been the case. This suggests that somewhere in his mind once his gender was more defined, it would follow that his sexuality would be too. It corroborates my hypothesis that bisexuality *is maintained* before and after gender transition; and that the object of desire remains the same (Hypothesis 4), as Casper as a trans man has a boyfriend now. Negotiating the community with other queer men brings in the reality of him not having a penis, which is perhaps 'this weird thing' that men usually have and is an important part of male-to-male sexual attraction. As a female Casper had felt safer in being masculine, but as a bisexual trans man he is perhaps more self-conscious about 'not being macho' in his appearance. The reality of not being born male (the lack) cannot be unknown alongside the conviction that "I am a man" and always was (Hypothesis 3). One of my hypotheses is that transgender identity realises a wish through using the body as a symbol, (Hypothesis 6), but the symbolic body throws up the disjunction between phantasy and reality (Hypothesis 1). For Winnicott (1962) it was crucial (for the mother) not to break into a child's

imaginatively created world or transitional space by questioning it concretely, and here too in the world of young trans men, the intermediate space between phantasy and reality appears to be just as fragile.

The physical gesture of hitting his fist into his hand, was a mannerism that Casper exhibited from time to time at specific moments in his narrative during the interview. It was to my mind a kind of aggressive emphasis that could not be put into words, the smack of the fist into his hand, maybe an expression of combating something impossible. It evokes 'the win' of the ball in the baseball glove, against the loss of non-testicular and non-penile masculinity⁷ that is the compromise or disavowed reality. It was evoked in Casper's expression "when puberty hit", as though something violent was inflicted (Hypothesis 1 & 6).

An example of disavowed reality for Casper, expressed by the fist in the hand, was the conviction that menstruation would not happen:

I remember that there was a time when I was convinced that I wasn't going to get a menstrual cycle for whatever reason. I don't remember what my child rationale was for that but I was (banged fist into hand) really proud of that but then that was not the case. So, I guess a lot of it had to do for me with my internal anatomy ('Casper', personal communication, interviewed on 09/01/2019).

It may be the lack of rationale that is pertinent, the belief that you can will something to happen or not happen. It indicates an early and powerful split between mind and body, and a strong sense that the actual female body was

⁷ I have written about different forms of masculinity in Chapter 4.

disavowed. The bang of the fist occurs in the moment of pride in believing that reality can be bypassed, perhaps a physical version of a psychic disavowal. The fist comes in to both celebrate the idea of negating reality but also the disappointment that it could not be negated. It appears to denote an attempt to triumph against all odds, in which the rage against reality is enacted physically.

Another example of this is when Casper spoke about trying to embrace his female body:

... there was a period of time when, after I went through the treatment for Anorexia, that I just ... I'm going to just *embrace* this and be *fine* (said with emphasis)! So, I went through this phase where I'd show off my cleavage a lot which is maybe too much information for you but I think I was trying to force myself to like it and be like: OK other people (hits fist in hand) find this sexually desirable so *damn it* (hits fist in hand) you're going to do it too (laughed). ... Just because I'm that kind of person, that if I'm like ... if I have a challenge, I'm going to do it to the best of my ability. *Blast it* (hits fist in hand) I'm going to do it better than everybody else, because that's who I am ... because I'm slightly competitive ('Casper', personal communication, interviewed on 09/01/2019).

Casper's aggression and desperation come through in this excerpt, in the context of the drive to overcome obstacles, be like others and force unwanted femininity onto self and others. The hand in the fist here might represent the breast that is forced which is reminiscent of a mother feeding her baby somewhat forcefully. Mother's mantra that girls and boys were equal was, it seems, rather forcefully imposed.

The attempt to enforce femininity that Casper describes is reminiscent of Shaeffer's⁸ likening the hysteric to the ruby that displays what it is rejecting. Just as the ruby stone has the horror of red whilst it absorbs and retains all the other colours, it rejects and ejects red (2011: 155). If red stands for feminine sexuality, many of the interviewees wished to expel this part of their identity. Transgender identity can offer a symbolic solution, via the body, for this expulsion (Hypothesis 6). In spite of my description of the solution as symbolic, it has a reality that overrides symbolism, and a reality for individuals that should not be undermined. This reality can be understood as bodily, social or psychic, and not necessarily as one reality that encompasses all of these domains.

Casper had mixed experiences with the psychological consultations that he'd had to have prior to starting on hormones and having the hysterectomy. He found one of them particularly concrete, as she seemed very pleased that he'd cut his hair short. This is an example of concreteness that can reside in therapists, not only in patients. I have written about this in chapter five.

Rory

Rory aged 20, knew that he wanted to be male from a young age:

When I was in pre-school or after school club I would swallow because I thought that would give me an Adam's Apple for example; so there were lots of signifiers when I was young which made me think or I guess signalled

⁸ Schaeffer (2011) adopted this analogy through the mineralogist Michel Cachoux as she found it very applicable to the hysteric's horror of anything red or sexual that is then presented through her trauma. His comment: "A ruby is a precious stone that abhors red. It absorbs and holds on to all the other colours in the spectrum; it rejects red, and that is what it presents to our eyes".

that I wanted to be male and I knew that I wasn't (Hypothesis 1 & 6). ('Rory', personal communication, interviewed on 19/01/2019).

It began to feel like a problem from age thirteen or fourteen: "my instinct would always be towards the masculine end of things", "everyone was saying I was female but inherently I knew that I wasn't". He went to an all-girls' school and came out as bisexual at age fourteen (Hypothesis 5). He had a meltdown when he discovered on TV that: "there was a word for it" in the form of being trans (Hypothesis 7). Conflict arose between him and his mother who had set ideas about how she wanted her daughter to look, dress and be, particularly in the context of how she'd not been able to look herself, for example having long straight hair. This can be read as a strong projection from mother to daughter: 'you will be the kind of feminine that I could not be'. Perhaps this left Rory struggling to break away into his own identity far removed from mother's notions of femaleness (Hypothesis 2). The unconscious aggression towards his mother can be seen as an enactment via the killing off of femininity in himself that I have referred to as an unconscious form of matricide in Chapter 3.

Whilst at school, Rory could not access specialist help with his struggles and did not feel that he could disclose them to his parents, this left him very much on his own with gender conflict and discomfort. Eventually, he approached and was supported by a trans man on the Internet. On coming out as trans, father was remote, quiet but accepting and mother responded dramatically, with rejection and shutting Rory out. Possibly this was a primitive form of retaliation from her to her daughter who

was turning herself away from womanhood and hence from motherhood

(Hypothesis 2 & 6).

Rory, prior to coming out as trans, and whilst still identifying as female had a boyfriend at school, and in recent years since identifying as a trans man, has had a girlfriend, “who would probably describe herself as bisexual”. He would probably describe himself now “as a gay man as he finds men attractive” (Hypothesis 4). Currently, Rory is a trans man in a heterosexual relationship with his girlfriend, and sometimes feels on the receiving end of homophobia and transphobia, if he is perceived as a lesbian whilst with his girlfriend. Rory thus *identifies as gay whilst acting straight*; if he were not in his current relationship with his girlfriend, he thinks he’d identify as a gay trans man. Rory could see how fluid these identifications were, perhaps demonstrating a reluctance to be pinned down to one sexual orientation. The gay trans identity resumes the object of desire as male (the boyfriend at school) following transition (Hypothesis 4), but is now *oriented from male to male rather than from female to male*. There appears to be much discomfort in taking up the female position sexually, to be related to by another as the female one, *but as a trans man Rory is more free to have female or male partners* (Hypothesis 5). His orientation as male now, frees up his sexuality. It seems to him to be ok to be gay as a trans man, but not so ok to be gay as a woman; there is something about being a lesbian that is rejected, a kind of specifically ‘lesbophobia’ within wider homophobia. It is as if there is an inbuilt hierarchy of acceptability within homosexuality where (the more patriarchal) man to man

trumps woman to woman. This too can be read as a flight from femininity (Hypothesis 2).

Rory made it clear to me that it was female things he did not like, rather than females. He did not have a single female role model as a child. He was due to have top surgery not because he had a problem with his breasts, but because “my body, when I’m with others is difficult, [...] and if it was completely normal for men to have breasts, I don’t think it would have been an issue”. This brings in the external gaze and how Rory feels whilst with others who apparently cannot accommodate men with breasts, perhaps to some extent a projection of his own ambivalence towards his female body. The wish that it could be normal for men to have breasts indicates the difficulty of having to relinquish the gender that one is not (Hypothesis 1). Trans gender identity facilitates the possibility of not having to renounce the gender that one is not (Hypothesis 6) or foreclose on object choice or aim (Hypothesis 5), and allows the possibility of becoming the other gender albeit a self-tailored version of masculinity and maleness with much struggle and external intervention in the form of hormones and or surgery.

Unlike Danny and Casper, Rory did not dislike his female body:

I didn’t think about femaleness as something I didn’t want to be, it was just that I wasn’t, inherently I just wasn’t that. And all the things that other girls liked, I didn’t. It wasn’t that I didn’t want to be that, *I just wasn’t* and so that made it uncomfortable. *So I didn’t not like women*, I definitely didn’t like wearing or doing female things, but I didn’t mind them being there ... there wasn’t anything particular about my Mum that I didn’t find appealing or... I

just think that I'd much rather be a Dad than a Mum ... erm ... just would (my italics). ('Rory', personal communication, interviewed on 19/01/2019).

Both Casper and Rory feel identified with their quieter and less vocal fathers. The flight from femaleness and femininity (Hypothesis 2) is expressed through the conscious desire to be male in Rory rather than an antipathy to femaleness or a mother who wished to influence her daughter's femininity, which might be more unconscious; in Casper the terror of a female body especially one that can age and become pregnant is felt to be visceral, possibly with hysterical elements and concretely enacted by wishing for and having a hysterectomy, the very word from which hysteria derives⁹. The womb, that symbolises reproduction, once removed can be seen to form an equivalence with unwanted womanhood and motherhood (Hypothesis 7).

This might also cut out the possibility or defend against father/daughter incest as a procreative act that Freud referred to as the girl's wish for a 'penis baby'. Pregnancy appears to have been feared as a deadly intrusion, a fate worse than death or akin to a psychic death, and as definitively asserting the female reproductive body. The possibility of pregnancy kills off the phantasy and conviction that one is not female, it ushers in reality in a visceral form, just as Danny felt busted in the shower. For Casper, pregnancy would shatter the belief that 'I am a man' or 'I was a man' (Hypothesis 3) in a fatal manner akin to death. The feeling seems to be: I would

⁹ The word hysteria originates from the Greek word for uterus, *hystera*. Wandering womb was the belief that a displaced uterus was the cause of medical pathologies in women, originating in ancient Greece and persisting in European academic medicine for centuries. In the 19th century, hysteria was considered a diagnosable physical illness in females. In the 20th century it shifted to being considered a mental illness. Satow, R. (1979--80).

rather die than have to acknowledge the physiological capacity of my natal body, as it is so out of kilter with how I feel in my gender identity or true self (Hypothesis 1, 6 & 7).

McDougall (1991) has written about the need for the child or adult to “unconsciously assume the reproductive role of both parents, be both the fertile womb and the fertilizing penis” (McDougall 1991: 567). This theoretical stance relates to Birksted-Breen’s concept of ‘Penis-as-link’ namely the importance for there to be a linked up couple in mind that includes the paternal role as an essential part of the link (1996). This also relates to Aaron’s question about who in the primal scene does the infant identify with (Aaron 1995).

Of the three trans men that I am discussing in this section, it was Casper who most fitted with hypothesis 3, that current gender identity reshapes the past, perhaps indicating that for him femaleness and femininity was psychically untenable and could not be placed on a continuum, there was a drive to disavow or negate it (Hypothesis 1); this also corroborates comorbidity, and psychic equivalence as suggested by hypothesis 7, whereby emotional struggles can become gender struggles. This does not invalidate these gender struggles as having their own reality. Although Danny and Rory identified as male, I got the impression that there was a knowledge and awareness of a natal female body. Rory had respect for his former girl self and did not hate his female body; for Danny it was hard to be confronted with his natal and naked female body which inevitably created a schizoid state of mind, or massive split between body and mind, leading to depression as reality can crash in and shatter the phantasy. Danny, Casper and Rory

revealed different capacities with managing the reality of their natal sex, feeling 'busted' is on a different register to feeling phobic about reproductive organs as a precursor to a hysterectomy. This brings to light that their difficulties were *mainly concerned with their sex rather than their gender*, gender identity becomes blurred and on a spectrum of infinite possibilities whereas the sexed body at birth almost becomes the stigmata that cannot be pushed away in reality as readily as it can in phantasy (Hypothesis 1).

Danny, Casper and Rory all identified as bisexual before coming out as trans men (Hypothesis 5). This indicated that there was a drive *not to foreclose* on sexual object choice, prior to their gender identity choice becoming more certain. It also shows bisexuality to be first and foremost a subjecthood position¹⁰. It indicates that, even though sexuality and gender are separate and intertwined developmentally, sexuality precedes (trans) gender identity. Leaving one's sexuality options and aims open via bisexuality rekindles the earlier childhood experience of having to declare oneself as a girl or a boy, but this time round it is during adolescence when the body and mind have developed sexually since infantile sexuality. There is a different kind of autonomy than there was in early childhood and perhaps less pressure to conform socially, although it is by no means a conflict free sexual identity choice. It can be thought of as a return, or re-activation of what Fast (1984) referred to as an "undifferentiated and overinclusive matrix of gender

¹⁰ Juliet Mitchell (2018) proposes that we are all "bisexual subjects" throughout our lives, it is a condition of our sexuality within our drives. "The unconscious, psychoanalysis, bisexuality, are all "both/and" formations. We are all girl *and* boy; boy *and* girl. Unconscious processes are not in themselves gendered". I have written about bisexuality in chapter 3.

development that precedes the dawning awareness of gender differences” (Fast 1984: 13). In this phase of development a child (in phantasy) can be both male and female, boy and girl, mother and father: it is omnipotent, free and what Freud referred to as ‘polymorphously perverse’¹¹. Hence, the decision *to come out as bisexual*, can be seen as a re-activation or undoing of a repression of early or even innate bisexuality. Mitchell (2018) argues that bisexuality is there from the beginning and remains throughout life, and that we are all bisexual subjects who might turn one way or another in our sexuality. In the light of her view that is much less about object choice, *coming out* as bisexual might be better understood as *coming into* bisexuality that was always there.

The older group: Jude (24), Leon (27), Hal (28) & Ben (29)

Jude

Jude (aged 24) was clear that his experience was not a “born in the wrong body” experience, but rather a pervasive discomfort and depression during his growing up years that included serious self-harm. He grew up in fear of his physically abusive father. Mother was not mentioned much, and their relationship it seemed, was somewhat limited. He can now see how earlier on in life he veered away from vulnerability and could not speak to the school counsellor. At university Jude came out as a lesbian and for a while that gave some relief to unfathomable difficulties.

The move towards being trans consolidated after university. When I asked about his

¹¹ Freud used the term ‘polymorphously perverse disposition’ to refer to infantile sexuality that is subject to the interplay of the component instincts and is closely bound up with the diversity of the erotogenic zones and precedes the development of the genital functions (Laplanche, J. & Pontalis, J.B. 1988: 307).

experience of his gender identity, he said that he identified as “somewhere between a trans-man and kind of non-binary transmasculine and hormonally transitioning to a kind of binary presentation”. The wish to transition came about for Jude in his early twenties whilst in ongoing therapy, and he had top surgery at the age of twenty-three. He said: “I used to look at things through a very narrow sphere or ... I feel like I had blinders on. And through a kind of opening up of that I was able to realise that I was trans and I’ve been transitioning and much happier ever since”.

There was a sense in Jude’s narration of *no gender framework* in which to try and fit with prior to university:

On the one hand, I barely had a concept of gay women, I knew I was interested in women or girls at the time but I barely had a concept of lesbianism to like put a kind of framework upon that, let alone being like yeah transmasculinism or trans men. There was no kind of like ‘oh I watched a YouTube video about a trans man, oh maybe that’s what I am’, it just wasn’t, it didn’t exist for me that idea. (‘Jude’, personal communication, interviewed on 07/12/2019).

Looking back now Jude can see that his feelings of being “different, gross or disgusting” were a manifestation of dysphoria: “At the time I wasn’t aware that it was anything to do with masculinity or femininity, I just felt like there was something wrong with me”.

Jude attributes his self loathing and self violence to gender identity issues, even though identifying as trans has brought him relief or perhaps a landing place removed from extreme emotional struggles (Hypothesis 7). Femaleness though

much appreciated in the sphere of friendships and feminism ultimately was unwanted in the form of self-identity or social identity (Hypothesis 2). There had been struggles for Jude to see himself as sexual and desirable, complicated by the body becoming the site for violent attacks on both himself and his internal objects. When I asked Jude about whether the drive to transition might have been connected to “some form of self-hatred ... very much disliking or feeling very uncomfortable with yourself”, Jude replied that: “... self-hatred or discomfort was just gender dysphoria, which was a part of being trans for me at least”. This struck me as representing an explanation that moves away from feelings of destructive violence towards self and object. Trans identity unlocked something which was felt to be extremely exciting: “I thought I’d found the reason why I had this like amorphous unhappiness when I came out as gay, then I realised I was trans, I then really felt like I had found it, found the key”. The key is an interesting metaphor as it implies that something has been opened or unlocked, this could have a sexual anatomical meaning but for Jude was attributed to gender: femaleness and femininity are locked out (Hypothesis 2) as masculinity and maleness are let in. Gender both provides the key and is perceived *as key* to the “amorphous unhappiness”. Perhaps father’s frightening violence made it very unsafe for Jude to be female and sexual, with a notion of men as safe; the appropriation of maleness felt safer as he has now enrolled in that ‘gender group’ (Hypothesis 6).

During the time that Jude identified as a gay and feminist woman, men were the enemy (a primitive splitting between good and bad), possibly generalised out from the experience of father to all men. One can also see elements of identification with

the aggressor in Jude's drive to be a trans man, an embodied appropriation of maleness as a defence against any kind of vulnerability to or penetrability from men. I understood that Jude had a need to bypass female sexuality that includes having a female body, and that for him relating to another, socially or sexually, was more achievable as a trans man who has renounced his femaleness. The depression embedded in self-harming and self-loathing, which is also a form of hatred or attack on one's objects, particularly his mother, are also bypassed. It is curious that 'the gender framework' that Jude described as completely lacking earlier on in life, later becomes the all-encompassing and key framework of explanation for earlier unfathomable struggles (Hypothesis 6 & 7).

I wonder if trans identity for Jude also meant a transition into a more genderless and sexless identity, safely apart from the fraught world of sexual life as a female. This would suggest trans male identity as a retreat or flight from womanhood (Hypothesis 2) and invites the questions: Can the trans man only be 'a woman' *as* 'a man' or feminine *as* masculine? Does trans male identity protect from or provide cover for intolerable vulnerability, that for Danny and Jude were associated with female gender identity (Hypothesis 1 & 2)? I would add to the words: 'retreat' and 'flight', the *drive to decathect* from womanhood that also stands for motherhood. The motivation to undo one's femaleness must have some roots in conscious and unconscious associations to the reproductive and feeding female mother, as well as a mother/daughter erotic tie (Elise: 2002) and the wish to sever these identifications. This relates to my proposition that matricidal wishes can, at times and in some instances, be seen to be embedded in the drive to change gender from

female to male that I have discussed in chapter three. In the interviews that I conducted only one interviewee spoke positively about his mother in the context of her support with his gender identification, otherwise mothers were either ambivalently presented or missing¹².

When I asked Jude the question: “How do you relate to your body” and specifically “How does that historically female body feature in the present, your present identity”? Jude responded by saying that the most female part for them would be their genitals, but as they were not sexually active, their genitals were not being thought about which made me wonder if one only thinks of one’s genitals in the context of sexual contact? Jude went on to say:

I think your question is interesting because the history of having a female body feels significantly less important and less interesting than the history of being in society as a woman and having been brought up as a girl or as a woman. (‘Jude’, personal communication, interviewed on 07/12/2019).

I thought this was an interesting response as for Jude the social, societal and familial experience of femaleness took on much more meaning, as to some extent it did for Horney in the 1920’s and 1930’s, than the sexual or embodied experience, although it is hard to separate these as entirely distinct. This could be read as a defence for Jude against the complicated nature of sexual experience especially when the body has become the site of negative feelings. I also wondered if a discussion of the social moved us into the territory of an intellectual discussion about societal and social norms that included gender norms and away from the

¹² Britton has written about the missing mother in the transference that I refer to in chapter 2.

naked and visceral reality of the female sexual body (Hypothesis 7). Jude went on to say that:

... the socialization of gender is so much more important than any kind of biological sex. Also, for me there isn't a case of like, it wasn't that I had a female body and now I have a more male body, I just am, I have this body. ('Jude', personal communication, interviewed on 07/12/2019).

The statement "I just am" is both simple and complex as it is a subjectively asserted position that is fair enough but it also negates any exploration, and certainly any causal exploration thus stymying the use of psychoanalysis as a tool of investigation, albeit one that is not aiming to pathologise. It also positions present time as disconnected from past time (Hypothesis 3), which transpires through my interviews as not uncommon in the trans experience of temporality: 'I am therefore I was', rather than I was and that might have some impact on who I am now.

Leon

Leon (aged 27), like Jude did not have the early childhood experience of feeling that he was born in the wrong body. His childhood sounded strained with a depressed mother and parents struggling to keep themselves together as a couple, as well as several moves due to father's work. With one sister, Leon was left to fend for himself that at times led to promiscuity as a female teenager with parents that had "checked out" and later separated. Leon liked the male sexual attention at the time, but can now see it came from a core feeling of insecurity. Femeness and femininity were once embraced but now rejected (Hypothesis 2). Leon was drawn to gay male culture as fascinating and intriguing, a group he wanted to be part of, and now sees that *he was part of*, as he now identified as a gay trans man

(Hypothesis 3 & 4). For Leon, the beginnings of the notion of transitioning began in his early twenties whilst at university, when he was surrounded by gender queer people and gender queer theory that opened up the door to gender fluidity for him, both socially and academically. He had initially come out as a gay woman and then on feeling more freedom to experiment with his gender identity came out as non-binary before identifying as a trans man. This particular trajectory of gender identities was common to a number of my interviewees (my italics). Leon explains:

I was never like super tomboy or like that masculine like when I was younger so when I did come out people were like: “but you were never like that masc, you were always kind of feminine”. I was like: “Yeah, I still am kind of femme but I’m just a man”. So, for me my gender is very rooted in a base of femme-ness still, so I don’t see myself as a super masculine dude and I think that’s because partially for me I came to my gender like through gay culture ... so for me my gender was always like: “Oh, like this is what a man is to me” and that was never hypothesiser-masculine or anything like that. My gender is very much based on that almost parodying of masculinity, and that to me has been the basis for who I am basically. (‘Leon’, personal communication, interviewed on 06/07/2019).

Leon was comfortable with a form of masculinity that was not too masculine, a masculinity that incorporated femininity, but not as a female. One can see the attempt at a compromise solution or symbolic resolution in this self-crafted version of gender. He was relieved to have met people who opened the ‘gender door’ for him, as it gave him the “vocabulary to talk about why I was miserable”. He said that if that had not happened, he would have “lived my entire life just like hating myself but never knowing why”. The underlying depression can be seen as subsumed by the problem of gender identity (Hypothesis 7). The ‘parodying of masculinity’

implies a detachment from masculinity and sexuality, and perhaps Leon's adolescent sexual presentation implied a parodying or parading of femininity as a way to manage emotional struggles. There are aspects of Leon's behaviour that relate to Riviere's (1929) notion of womanliness as a masquerade and Butler's notion of gender as performative. In Leon's case manliness becomes performative or the masquerade for a self-tailored or bespoke gender, one that includes some femme and some 'masc' but not too much of either (Hypothesis 3 & 6).

The notion of wishing to embody parodic masculinity, suggests that masculinity is being invoked and provoked simultaneously: a mockery of the real thing (masculinity) that nonetheless becomes the real thing: "I'm a man", but not the kind of man that merits parody. If the kind of extreme masculinity in and of itself is parodic, then the parody of that masculinity becomes *a parody of a parody* that can start to feel quite dizzying, as if we are on a quicksand of gender that has infinite sets of variability or in a hall of mirrors in which the original image becomes ever distorted (Hypothesis 1 & 4). The 'parody of a parody' is reminiscent of what Britton (1995) referred to as: "phantasy used as a defence against phantasy", in the case of Klein's child patient Dick who created a refuge in a phantasy in order to protect himself from the symbolic representation of this phantasy being met with in the external world. I'm curious about the draw for Leon to a group that excludes women sexually, and parades male to male masculinity and sexuality. Perhaps this group formed a symbolic representation of Leon's own ejection of female sexuality. Within this particular niche of gay culture there is an idolization and idealization of

leathered and tattooed maleness, perhaps an external carapace of toughness that Leon was drawn to and wished to inhabit (Hypothesis 6).

Leon was much more at ease with gay male culture than with lesbian culture. He can see that there has been an effeminate take on his masculinity and eventually realised he was “like a gay trans dude, I was like: Oh, I’m gender queer and sexually queer, cool”. The object of attraction has remained or returned to being male, but following much change in Leon’s gender identity from a heterosexual woman to a gay trans man. Bisexuality is maintained throughout the gender identity changes (Hypothesis 5). This raises interesting questions about whether gender identity moves in parallel with innate bisexuality. The object of desire is still male for Leon, but he is now a gay trans man and that seems to be a stance that feels right for him (Hypothesis 4 & 5). The more depressed side of his unexplained misery has been repressed, or located in gender struggles, with the resolution for depression enacted in or through the body (Hypothesis 1, 6 & 7).

Here Leon speaks about his affinity with gay culture:

I remember walking down X street when I was like ten and seeing guys wearing leather and thinking: “what is this? This is amazing”. So yeah, from a pretty young age sort of my interest was piqued I would say. And then yeah, it sort of took coming into myself a little bit later to realise that I wasn’t just watching it from the outside, like that was me so I knew I was queer but I didn’t, I knew I wasn’t a lesbian. Umm, I’d been with women because you know, because I had that feeling of like queerness umm so I’d even like dated women for a while but I ... the sexual attraction wasn’t a hundred per cent there and I just didn’t like relate to lesbian culture in the same way I related to gay male culture, and so even when I was like a butch dyke or

whatever it ... it didn't feel right. ('Leon', personal communication, interviewed on 06/07/2019).

In the excerpt above Leon expresses his struggle with who or what to identify with, he feels queer and is trying to locate his sexuality and gender:

... it just didn't feel like I was in the right place and so that was kind of how I knew I was queer but in not ... a sexual way or is it a sexual way...I wasn't really sure for a long time. ('Leon', personal communication, interviewed on 06/07/2019).

He eventually finds a compromise solution in being trans and gay, the masculinity that he inhabits as a trans man is much more comfortable than the masculinity he associated with being a butch dyke, which I put to him and he agreed with:

... it just always felt like sort of putting something on, like playing into this role. Umm, whereas now I feel like I don't have to play into any role [...] when I was being like a butch woman I felt like I always had to put it on all the time ... like I had to be really tough [...] It was very performative, very much like "I have to be this way" whereas now I don't feel like that anymore and maybe part of that is because men just don't experience the same pressures to conform to any sort of like roles in the same way that women do. ('Leon', personal communication, interviewed on 06/07/2019).

After I brought up the distinction between being male and being masculine, Leon responded:

... I think like masculinity in the like concrete definition (laughed) whatever that is like, it just didn't fit ... it wasn't right. Whereas now like I'm just doing whatever I want basically and yeah sort of fitting it to myself instead of me trying to like fit into whatever I thought I was. ('Leon', personal communication, interviewed on 06/07/2019).

Leon appears to have found a form of masculinity that incorporates femininity, thus forming a compromise formation, or symbolic resolution (Hypothesis 6). It is also a form of emasculated masculinity: 'e-masculinity'. I wondered if the "concrete or biological definition" of maleness – that of actually being born with a penis, cannot quite fit (Hypothesis 1). He now relates to the world as a gay trans man, and that compromise pleases him. It is a far cry from his post puberty overtly sexual femininity. He can fit his own version of 'femme' masculinity to himself, and kill off the sexual female part of himself possibly reminiscent of a depressed or insecure part of himself and his mother as an unwanted identification with female or feminine vulnerability (Hypothesis 2). Like Jude, Leon aligns his prior unhappiness with retrospectively unformulated gender difficulties or the lack of a gender framework (Hypothesis 7). The flexibility, fluidity and transitional contours of gender identity extend into a re-writing (righting?) of the gender as lived in the past (Hypothesis 3). Present identity, "I just am", swipes away historic difficulties, the new roots are the only true roots, and causal links can feel unwelcomed and irrelevant (Hypothesis 3). It is the opposite of *après coup* in which the past becomes re-lived in the present, it is the present that re-enlivens (or re-scripts) the past, at least consciously. In this way temporality as sequential is flattened out and undifferentiated. This relates to Matte Blanco's principle of symmetry that I discuss in chapter 5.

Leon described many moves in his quest to find a gender identity that he felt fitted him. At puberty his female body developed fast and got a lot of male attention, even though he did not like his female body at that time. Sexual interest was

confused with being liked and validated. One can see an early location of emotional difficulties in the gendered body (Hypothesis 7). At school he dressed to draw attention to himself, and this was a promiscuous phase. Later as a gay woman, he went from “high femme to super butch really quickly and then the super-butth phase probably lasted about nine months before I realised like it wasn’t me at all”. Leon now explains his adolescent promiscuity thus: “... but really it was because I was like trans and so dissociated from my own body”. This statement corroborates Hypothesis 3: ‘I am therefore I was’. The temporality extends from the present back, and explains his female sexual experience through being trans. Leon acknowledges that he never liked his body and never felt at home in it for most of his life, that included weight issues:

... I was just trying to pinpoint a reason why I didn’t feel at home in my own skin umm. Whereas now I realise it’s because I was a man umm and so yeah weight doesn’t matter at all. But in terms of like dysphoria it’s kind of weird because now my chest is the part of my body that I’m most dysphoric about, which we’ve had a topsy turvy relationship, ‘cause I don’t really have bottom dysphoria, that doesn’t really matter to me. But my chest, as soon as I started sort of realising I was trans, I think my dysphoria really intensified which I think happens for a lot of trans people as well. (‘Leon’, personal communication, interviewed on 06/07/2019).

Leon demonstrates how his attitude to his body can chop and change, quite literally. At the time of the interview Leon was excited to have booked in for top surgery. His dysphoria is felt through his current gender identity and towards having a (female) chest: material reality is failing to correspond with psychological reality and this causes him grief (Hypothesis 1, 6 & 7). After being ‘out’ as non-binary for a while he then came out as a man, and that propelled him towards

taking testosterone which he did not rush into. At the time of the interview, he'd been taking testosterone for about eight months and he was happy with the effects. He has let go of his prior wish for a very specific male look.

I put it to him that his past relationship to his body, that includes his relationship to his breasts, is somewhere in his history in spite of his moves through different identities and that complicates his relationship to aspects of his body. Leon concurred with this idea and expanded on this by saying:

... all bodies are constantly containing within them the trauma of your life ...
umm and you know you don't just forget about things (laughed a bit) and er
... and yeah especially for like fat people or trans people basically people
who are told that their bodies are wrong [...] So for me when I see my chest
or whatever *I still see like this little boy that was struggling to find like*
acceptance and love (laughter) wherever he could and not knowing why like
no matter what, he felt like shit and didn't feel like himself (my italics).
(‘Leon’, personal communication, interviewed on 06/07/2019).

When I asked more about him referring to his past self as always having been a boy Leon explained that although he did not really subscribe to that narrative which is a common trans narrative, and was not true for him in the sense of being “trapped inside a woman’s body”, he saw himself more as trying to find himself and evolving at the same time as being the same person then as now: “... yeah I was a dude, so yeah, I do refer to myself as a man” (Hypothesis 3). The struggle to link his current self with his past self comes through this material that is rife with conflict. There is a wish to have always been ‘the gender that I am now’, and it explains or subsumes past depression (Hypothesis 7). Nonetheless Leon is open to the idea of the body containing trauma that can resurface. I am interested in how that past becomes

‘resurfaced’ like a new road that covers up unwanted potholes. The narrative of being trapped inside a woman’s body is of course also evocative of mother’s body (Danny’s statement about being born in the wrong body) or an ambivalent relationship to one’s own female and sexual body. Leon struggled to fit into his natal skin and travelled far and wide along the gender spectrum (Hypothesis 7). It remains unclear whether the location or equivalence of emotional struggles in gender struggles provides a long-term resolution for Leon or for other interviewees.

Hal

Hal (aged 28) described feeling depressed most of his life; this included periods of severe depression, years of suicidal ideation and a suicide attempt. He initially came out as bisexual (Hypothesis 5) and then as a lesbian at age fourteen or fifteen and began to question his gender identity from the age of seventeen. He then began living “in role” as a trans man at twenty-six. As “he had Autism¹³”, he ascribed both not fitting in at school and sexuality difficulties to that diagnosis. Prior to coming out as trans:

I was on and off identifying as non-binary and gender queer and definitely not, I had no kind of connection to any kind of womanhood, to like feeling of womanhood ... I went to an all-girls school ... and I never ... fitted in ... I never identified as straight from having an understanding of sexual orientation, I never conceived of myself as straight at all and umm I was aware I wasn’t.
(‘Hal’, personal communication, interviewed on 14/12/2019).

¹³ There has been a growing awareness of association between Gender Dysphoria and Autism (ASD). A higher prevalence of autistic traits has been observed in clinically referred gender diverse young people than in the general adolescent population. (Van de Misen, de Vries, Steensma & Hartsman 2017).

Hal felt that mostly he did not fit into his 'assigned' gender identity. When he began to speak to a trans woman friend, both in their early twenties, about what made the friend feel like a woman, Hal at the time laughed and thought: "I'm a man" (Hypothesis 3 & 6). Hal worried that the long period of identifying as non-binary might exclude him from being allowed to transition, which betrays a rather binary approach to gender identity.

As a teenager Hal felt drawn to menswear as well as the gay and bisexual male experience. He identified as lesbian for a while but struggled with the association to womanhood:

... I could never call myself a lesbian, I always called myself a gay woman because I couldn't, it felt so ... it didn't feel right somehow. And I still can't quantify the experience of it not feeling right to have strong associations with womanhood, I couldn't ... there's no other way I could ... I understood that there's so many ways of gender expression even within womanhood, like it didn't matter that I felt like I didn't belong in dresses, that didn't exclude me from womanhood. But I felt something really ineffable excluding me from womanhood, I couldn't really understand why and it caused a lot of stress, I guess. ('Hal', personal communication, interviewed on 14/12/2019).

Hal's choice of the word "ineffable" captures his struggle: the feeling of not belonging to womanhood felt too great or extreme to be expressed or described in words, it defied description or expression. If a feeling cannot be put into words and held in mind psychically, it can be felt somatically in the body. Hal could not explain or express what it was that made him feel alienated from womanhood, he just knew that was what he felt: "...when I saw myself in the mirror wearing dresses it

felt incongruous ... it felt so incongruous and wrong. I knew like all the components were there but just not like, it was just like disorienting I guess, yeah” (Hypothesis 2).

He’d been in an on/off relationship with a Cis man whilst at university and a period of ‘going back in the closet again’, which I think he meant as a retreat from being openly gay as a female to being straight and heterosexual as a female. In recent years Hal has been in a long-term relationship with a Cis woman who is bisexual (similar to Rory’s current relationship). Hal’s sexual orientation moved from gay woman (female object of attraction) to heterosexual woman (male object of attraction) to trans man in a relationship with a woman (female object of attraction). The original object of desire is female and Hal returns to a female object of desire as a trans man (Hypothesis 4). His ‘gender orientation’ has shifted, as he now relates from the vantage point of a trans man to a female. This relates to hypothesis 4: ‘the object of desire remains the same’, albeit with much change along the way in Hal’s gender identity from a gay woman to a trans man in a heterosexual relationship. In and amongst these moves, bisexuality is maintained (Hypothesis 5).

The sexual orientation is important as it seems that Hal does not wish to be perceived as gay but as straight in his current relationship with a woman; there is a move away or even a rejection of the woman-to-woman relationship, it is crucial for Hal to be seen to be relating as a man and as male. For Hal ‘I am a man”, means that this is now my position in the world (Hypothesis 3), and the hope and longing is that it will be taken as a given, not just in the perception of his mind’s eye but also

in the eyes of others. It is contentious to notice the underlying homosexuality of this heterosexuality, as that might push me into being perceived as someone who doesn't see Hal as a heterosexual male. There is an invitation to join in with the new reality and no longer acknowledge the old reality (Hypothesis 1). This is a difficult aspect of my research as I respect the gender identity of all the trans men that I interviewed. Nonetheless I give myself a psychoanalytic licence and lens through which to explore underlying processes that might not be conscious, or that might be conscious and refuted.

Hal expresses his own struggle with defining his identity:

... I did realise that I have dysphoria, but usually with regards to my stomach and the size of my stomach umm, yeah maybe it was a dysphoric thing, but it just didn't work. And like I said I knew that (sighed) it was possible to be a woman and not wear dresses and I don't, I do try to like think through you know what it is to be a man and what it is to be a woman and what it is to be non-binary and what it is to be ... what all those things actually mean and I can never pin point it and it drives (slight laughter) me up the wall. *All I can pinpoint is that I'm a man and not a woman.* But I struggle to kind of define what I meant by that ... (my italics). ('Hal', personal communication, interviewed on 14/12/2019).

I went on to ask Hal how he might see the difference between maleness and masculinity. He responded by saying:

... I will always find myself when I'm in a room trying to empathise and get the attention and like think like the person who most resembles my ideal of masculinity and maleness, not with intending to, it just happens. It's always so hard, *I'm bisexual for one thing* (Hypothesis 5) and the men I tend to be drawn to aren't particularly hyper-masculine, and aren't normatively masculine. But ... (pause) it's really hard. I've always found it really hard ...

umm ... (my italics). ('Hal', personal communication, interviewed on 14/12/2019).

I asked Hal about his particular stance on "I'm a man" rather than realising that he was tending more towards masculinity than femininity, as I was interested in that distinction between maleness and masculinity.

Hal replied:

... it's hard because I can second guess and third guess myself constantly on this. Umm ... I think ... and I'm ... it's so difficult 'cause I feel constantly torn between sort of feminism having good gender politics and not wanting to uphold any kind of binary or like (sigh) essentialism or anything like that. But ... I suppose, I think a lot of it tends to be how men relate to each other ... I think and how women relate to each other ... (pause), (sighed) Sorry I'm really, I'm just struggling to like ... articulate it. ('Hal', personal communication, interviewed on 14/12/2019).

Hal's response moved to the difference between the sexes in how they each relate socially within a group (similarly to Jude's response), away from the difference between masculinity and maleness per se. He was drawn to the way in which men relate to one another, the banter, the bickering and the bonding that he felt was also possible between women or between men and women, but *more loaded* in social relationships between women. For Hal there was something more open and trustworthy in men and between men, that perhaps defined maleness for him and which he wanted to be part of. This included a kind of jokey banter, something more verbally agile, and also free from underlying agendas that he'd experienced with girls at school. Perhaps, this was not least as: "I was very much the only lesbian identified person in my year and in the school, I think". Hal now thinks that the, at

times, intrusive way in which girls related to him at school was in part sexually driven, as emanating from having had a crush on him for example, in an all-girls school. Hal moves in the narrative from gender to sexuality, the *only* lesbian in the school, other girls' *sexual agendas*. For Hal, the flight from femininity (Hypothesis 2) is embedded in the belief that it is all so much easier for men and that appears to be coveted by him. Like Jude, Hal described an absence of boys and maleness whilst growing up; it does not seem to have been a natural part of life socially. For Hal this included a father who was not there much in physical reality but possibly much more there in psychic reality (Hypothesis 1, 6 & 7).

... there's a friction in masculinity and in masculine ways of interacting which women can often have as well. I'm drawn more towards women who bicker and who banter and who rib each other and who joke around with each other and that's ... but in my head that's quite a masculine thing ... I guess. Err and that's what I tend to be drawn to in men and in women, that in my relationships with men I kind of value, and that's why I get drawn to those relationships with men. ('Hal', personal communication, interviewed on 14/12/2019).

The perception and phantasy that Hal describes is one in which male relating is lighter and less burdened than female relating. Might there have been an anxiety about being left with mother, possibly a relationship burdened by conflict in relation to femininity. There is clearly also a drive for Hal to relate and orientate himself to others from a male stance. He can be the man in relation to his current female partner. He feels elated when he is identified as male in the world. Maleness for him is safer, more secure, more anchored to a sought-after identity. This implies a good/bad split between men and women which must bear some relationship to

his conscious and unconscious internalisation of his parents. He speaks of women to women and men to men, this leaves out men to women or women to men: his actual parents and the primal scene. At the time of the interview his parents had separated acrimoniously and his father had moved in with him. His overt preference for maleness, as the easier state of mind and body, implies a flight from femininity (Hypothesis 2).

The word 'incongruous' was used by Hal a lot in describing how he'd felt toward his female body. In relation to puberty, he exclaimed: "I think I've repressed the hell out of puberty, I have no memory of my puberty". In the past his mother had plastic surgery on her breasts as she had "no significant breast growth", and did not want her two daughters to "go through what I went through with my breasts", meaning that "she didn't want us to not have boobs".

For Hal's mother it was clearly very important for the body to declare itself as feminine through having the right sized breasts, revealing concrete aspects in her relationship to her body and her underlying agenda for her daughters. It is interesting to think about how this was absorbed by Hal, for whom a feminine body was so unwanted (Hypothesis 6). Might there also have been an unconscious identification with or longing for a more androgynous mother, or a mother who could accept her body as it was. The body dysphoria seems to have passed onto or into, or to have been retranslated by Hal, albeit in a reversed guise from the (mother's) quest for femininity to Hal's flight from it (Hypothesis 2).

Hal initially anticipated puberty as something that would make his mother happy (implying an unhappy mother) and gain her love and affection, possibly through fully entering into the female realm or by creating a feminine bond of the kind she wanted with her daughter. But the experience was disappointing as nothing felt right, and feelings of incongruity set in. One of the painful aspects was not getting sexual attention that other girls were getting; somehow Hal as a young female with “a normatively attractive body” was not attracting male attention and this was mystifying and distressing. At university this experience continued leaving Hal feeling confused and that there was something badly wrong:

I’d categorise myself as always having had a failure to understand my own body and how I relate to it until I came out. Until I started having HRT (10 months before the interview) I’ve always had like a very nebulous relationship to it. But I don’t think I’ve ever really truly hated my body ... it just doesn’t seem to ever, like a lot of it before I started HRT didn’t really cohere ... I always thought I had a fatter stomach than I did ... I kept seeing things that other people would then say they couldn’t see. (‘Hal’, personal communication, interviewed on 14/12/2019).

There is an acute discomfort or depression that Hal is describing that is felt in the (female) body, as the body becomes the site of depressed feelings, like it might have been for Hal’s mother. Hal went onto to talk about a deep and phobic fear of pregnancy, similar to Casper who I discussed earlier. Hal’s fear was so intense that there’d been a wish for sterilization at age fifteen and later on if there was any sexual activity: “I would start having psychosomatic pregnancy symptoms all the time”. There was an extreme fear of something contaminating the inside of Hal’s body, whether this was sperm or HIV, or the thought of a foetus growing inside:

... it felt like there was this really big division between...what my body could do and what I wanted it to do or what I wanted it to be capable of. I feel it's like another spectacular case of me not connecting the dots that were clearly there. ('Hal', personal communication, interviewed on 14/12/2019).

I understand Hal's "not connecting the dots" as not somehow knowing sooner that "he was a man", as an explanation for his earlier phobic or hysterical response to womanly experiences like pregnancy. This is another example of the present meaning extending to the past (Hypothesis 3) as a defence in that it ensures the eradication of a continuous exploratory causal connection from then to now. The vision is through the lenses of now and through a (gender) framework (Hypothesis 7) in which the rationale is that Hal *should have known much earlier that he was a man*. The extreme anxiety about pregnancy or contamination reflects hysteria in relation to femaleness and the female sexual body. It fits with Freud's 'anxiety hysteria'¹⁴, the central symptom of which is phobia.

Hal's narrative unearths femininity as something *unattainable in the self*, and perhaps only attainable in another. Through female relationships Hal *can attend to femininity in the object*, safely removed from himself whilst identifying as a gay woman or a trans man. Perelberg discusses the well known accounts of Freud's patients (Anna O, Lucy R, Elizabeth Von R & Dora) as *all bearing disappointment towards their fathers*. She links this disappointment with the longing for another

¹⁴ In the analysis of Little Hans Freud (1909) proposed phobic neurosis as a specific entity and pointed out its similarity to conversion hysteria. In both instances repression functions to prise apart affects from ideas. In Anxiety Hysteria the mind works at psychically binding the anxiety that has become free (as the libido is detached from the pathogenic material through repression), and it does this qua the creation of phobias rather than through conversion.

woman *who personifies unattainable femininity*. (my italics). She asks whether this pursuit is out of a fear of being left only with mother as an internal imago (Perelberg 2018: 4).

The disappointment of the daughter with her father is pertinent to my interviewees, who nearly all (six out of seven) described their fathers as somewhat absent and distant; and who all struggled with their femininity, not just as unattainable but also as uncontainable. This raises questions about their fears of identifying with their mothers (as elaborated in Chapter 3) whether actual or internalised, and repeatedly corroborates the hypothesis of masculinity as a fight with or flight from femininity (Hypothesis 2). It also raises questions about their fathers' capacity to *endorse femininity in their daughters* as a stepping stone to female sexual development, a safe seduction so to speak, which has the potential to revise incestuous desires and fears. Was Casper's hysterectomy and Hal's early wish for sterilization an attempt to foreclose on the danger of a realised phantasy of incest? This can be seen as an example of phantasy replacing reality (Hypothesis 1), but the actuality of the surgery ensures that reality replaces or forestalls the phantasy and creates a symbolic solution through the use of the body (Hypothesis 6) and equivalence between emotional and gender struggles (Hypothesis 7).

For Hal, taking hormones and identifying as a trans man shifted his sense of contentment significantly. This was in spite of the risk and anxiety that he thought about in relation to not being sexually desirable as a trans man. At the time that he was considering transitioning 'gender comfort' or gender identity trumped sexual life:

I was very acutely aware that I might be giving up sex. So, what happened to my genitals was very much not a consideration because all I was concerned about was my ability to pass in sort of casual interactions. [...] When I got read as male I would feel unmitigated joy. I would feel so much happiness which I know a lot of ... I'd describe as *gender euphoria* and I know a lot of trans men and trans people describe as gender euphoria, I would say a lot of my key experiences were euphoric rather than dysphoric, just being called 'Sir' in shops made my day, just made me feel so much happier and secure in myself (my italics). ('Hal', personal communication, interviewed on 14/12/2019).

Hal acknowledges the performance aspect of gender and importance of how he felt perceived by others; how he did not want to be seen as a woman and how unhappy that made him (curiously not being found to be sexually attractive as a woman, or seen as a woman previously had also made him unhappy). One might conjecture that the unhappiness was the central difficulty, that became subsumed by gender (Hypothesis 7). Like Casper, Jude and Rory, Hal felt that he "... wasn't actually allowed to have any sense of intelligence around gender, like by society because trans men were nowhere". This implies that there was a feeling of *something being withheld and it should not have been*, not unlike the phallus for Lacan or enigmatic signifier for Laplanche. There is almost a cry of despair that all the facts of life were not laid out clearly and 'we' were left having to find out for ourselves, which one could argue is not an unusual aspect of developing and growing up and finding one's way sexually and on the spectrum of femininity and masculinity. However, I wonder if the despair is also about feeling left to struggle with serious and suicidal depression, anxiety and dysphoria, with a feeling of not knowing where to turn to

and who to talk to about this. The gender euphoria appears to offer a magical substitution for life threatening dysphoric struggles.

For Danny, Rory and Hal there was the experience of a mother for whom *femininity in her daughter* was of primary importance, and it left me thinking about how this was transmitted and what it induced. I can speculate broadly about the mother's desire for femininity in her daughter but what is more relevant to my discussion is how my interviewees translated this projection or communication which is in part restricted by *the subject's own translational capacity*. This is discussed by Scarfone (2019) who writes with reference to Freud and Laplanche that in Freud's letter to Fleiss (1896) it is not possible to separate translation from repression, and repression is seen as a partial failure of the translational process that occurs specifically in relation to the Sexual, as for the child this is necessarily enigmatic. How this enigma is played out specifically in relation to gender is central to my findings and discussion.

Ben

Ben (aged 29) felt that his parents did not put pressures on him when young to conform to a gender identity. He was introduced to 'masculine' activities with his Dad, working on cars or going to the tip. His Mum taught him to "live life with your mind ... and get through life on a platform of equal rights that as we know are built on a concept of non-gender ... 'human' was the foundation for my Mum". Ben saw 'manhood' as entering his social experiences more unconsciously and gender became more relevant when he was exposed to external social situations at pre-

school when he would play “kiss chase” with the girls, which was not a problem for his Mum who had “taught him to love unconditionally”.

In Ben’s words:

I’ve had a fluency in gender all my life even now umm but I just feel more like being than I ever am one specific gender. Gender always becomes an issue *when I’m talking among social spectrums and adapting into a relationship*. As for my actual personal self it is always a fun and fluent topic for me, it remains that way for the most part ... part of being transgender is that we are also trying to stretch social boundaries ... I’m really aware that *I am the change as much as I am asking for it* (my italics). (‘Ben’, personal communication, interviewed on 02/11/2019).

External reality appears to be the problem for Ben, which could be seen as a struggle to adapt to reality which is always limiting to a certain extent (Hypothesis 1). This could have been more confusing for Ben if his mother led him to believe that the problem *was in society*, and not in developing adaptive capacities. During primary school, Ben was inventive with his drive to “try and bend the social fashion boundaries”, for example by wearing his Alice band like Rambo which he saw as a symbolic trait (Hypothesis 6). In high-school he was “treated as relatively male” because “there is something so naturally male about me”. In changing rooms at school this meant that Ben was both part of the group but also separate and detached from it, perhaps an early indication of his gender identity straddling both female and male terrains. The changing room could be thought of as a metaphor for Ben’s mercurial relationship to masculinity and femininity. He described: “creating an abstract way of getting through puberty”. His mother helped him manage by getting him jeans with boxers attached to them, thereby masculinising

the undeniable femaleness of puberty and menstruation. I wondered about this, as on the one hand of course his mother is trying to help her daughter (at that time) manage, but on the other hand was this an example of an enigmatic signifier in the form of: it's ok to be masculine at the same time as being feminine, I will help masculinise the femininity by getting you the 'boxer jeans'. I speculated that perhaps she was attaching Ben to her like the Boxers? The boxers attached to the jeans symbolise a form of adhesive masculinity, there is no genital differentiation: you can pretend to be male and I will assist you in this. Mother, in her attempt to help might have been colluding in or encouraging of a repudiation of femininity that might reveal her own stance on the masculine/feminine divide.

Ben saw his mother's symbolic gesture as very helpful: 'Mum validates something in the opposite direction to what nature's doing to you, it pretty much soothed the issue for me' (Hypothesis 6). He explained that her gesture helped him compartmentalise parts of himself, detach from his physical body: "... my Mum inserting that gesture is an example of how that was created". To my mind his mother is well intentioned but might potentially be endorsing the experience of cutting off from the reality of the difference between the sexes. This could be seen as an example of an enigmatic signifier, or the imposing of something for Ben to translate in relation to the Sexual.

He went on to explain that because "my father had a sensitive ego and I think my Mum took account of that *and strapped it onto my personality*, she wasn't assuming that it was going to be a male thing. She sort of *saw that piece of me that was like my father and was aware of how to soothe it* and sort of applied exactly

the same techniques, as luck would have it, because I was preferably male” (my italics). It is hard not to read his mother’s behaviour, as described by Ben, as sexualised: his mother straps masculinity onto him (as the replacement phallus) like a strap on dildo that she can soothe, which for Ben is taken as a soothing (and perhaps confusing) gesture. This left me feeling that sexual confusion in mother’s mind was unconsciously transmitted or transmuted to Ben, who receives or translates the gesture willingly (Laplanche 2007). Ben perceives his mother as being very co-operative with his wish to be masculine, which introduces the element of *her desire in his mind*. In this context he might have tried to be the phallus for his mother (Lacan 1958), not least as this time coincided with his parents’ separation.

Prior to Ben’s birth as a girl, his mother and father had sons from previous marriages. Then his mother and father had two girls, Ben was the first of these two.¹⁵ He arrived into a family with older boys, and perhaps parents that were more used to sons than daughters. When Ben was eleven his parents separated at the time he would have been entering puberty. It was when his mother made the masculinising gesture towards him, to help him adapt to having periods, a symbol of femininity, sexual life, pregnancy and motherhood. Speculatively, I wondered if he might be turning into a (replacement) phallus for her, after losing her (second)

¹⁵ Stoller (1975: 44-45) in his discussion about transsexual boys, points to them having been the youngest child in the family for many years, five or more; and how mother can use this child to stem her loneliness and as part of her own body, namely female. Ben was the first female for his mother after four sons. I wondered if she might have inadvertently used this daughter as a phallus, leaving Ben with confused identifications about his body, sex and sexuality. She was keen to encourage maleness in him.

actual husband. Ben resumed contact with his father after a gap of some years following his parents' separation.

Ben identified as bisexual in his teens (Hypothesis 5) before identifying "as male" at age eighteen and following that, as a trans man. When he cut his hair short at age eighteen, he said that he looked almost identical to his Dad, or one could speculate that he transforms into his father for his mother. In his mid-twenties he had chest surgery. Cutting his hair short and having chest surgery were two of the most special moments in his life: a physical actualisation or activation of a pre-existing phantasy (Hypothesis 1). This can also be thought of as a self-motivated negation or conversion of the natal declaration 'it's a girl' into 'no it is not, it's a boy'. Clearly Ben felt relief and comfort after these changes, that aligned his sense of identity.

Ben's approach to his trans identity was open and questioning but also had a sense of something being pre-destined and self-formed:

Ben: I've got reason to feel that it's genetic, I've got reasons to feel that it's caused and I've got reasons to feel that it's chosen. What I feel now coming to the end of it, what I feel is fascinating I ... what I feel is whatever I did is I anchored this decision around the age of about five years old. *I am now exactly how I imagined myself to be when I was that age* (Hypothesis 1 & 6), who I wanted to grow into, what I considered to be iconic, *I now embody all of that*. So, I think that if I have in some way made a subconscious decision err out of survival or a bid to protect another sense of self, if I have adapted into a male identity, I think that's quite amazing (said with emphasis) for the human anatomy that it is a chosen thing ... whether it is chosen or imposed or whichever way it works (my italics), (Hypothesis 3).

Me: I think you're saying there was a very strong drive from early on?

Ben: Definitely, definitely from a very, very young age, a very young age. When I was younger it wasn't so much that there was a drive towards being male as much as there was a freedom and a fluency that rather actually...umm that becoming male may have been in some way directed or influenced by external sources or I know that there has been a certain choice because life puts you in those places unfortunately.

There was no such thing as being in a relationship as a hybrid individual when it comes to gender and sexuality at that time. You had to make changes in order to adapt and achieve what it is that you felt at the time...I've had to strip myself completely back to basics and understand that I don't really want anything that is considered conventional according to society in order to find out what I really want or who I am as an individual (Hypothesis 1 & Hypothesis 6). ('Ben', personal communication, interviewed on 02/11/2019).

Ben describes his gender trajectory as having been already cast around the age of five, which it may well have been. His verbalisation of this is at the age of twenty-nine thinking back about himself as a five-year-old girl and it fits with hypothesis 3, about current gender identity reshaping the past: 'I am therefore I was'. Perhaps it is very hard for him to look back at himself without wearing his current 'gender lenses', that visualise himself as male from a young age with clarity of insight that feels certain and full of conviction (I refer to this in Chapter 6). Ben's style of talking about himself is quite dense and convoluted and at times hard to decipher. It may convey his emotional turmoil very well. There is also simplicity in the notion that he has successfully and completely embodied his five-year-old vision of himself, but he may be expressing the unconscious aspects of the motivational force in him that have shaped his gender identity. His approach reverses the mantra that anatomy is destiny into destiny is anatomy.

When Ben mentions that ‘becoming male may have been directed or influenced by external forces’ I felt that he was possibly talking unknowingly about his mother and the enigmatic signifiers that she transmitted to her daughter, which include her own conscious and unconscious experience of her gender identity and sexual development as a female in her own family of origin and in the world, her own Oedipal development. This daughter was her first daughter and fifth child; she may well not have had the experience of competing with a daughter for her husband’s attention. She encouraged Ben to be free and fluent and to “love unconditionally”, and that if that was tricky then the problem lay in society. Her own difficulties with accepting ‘the facts of life’ (Money Kyrle 1971), that include societal and social restrictions may have been pushed onto or into Ben, who as a small girl believed she could be (or indeed was) male, or maybe had to be male to satisfy her mother’s needs. This is reminiscent of McDougal’s concept of ‘the cork child’ whose destiny is to fill mother’s emptiness and neediness (discussed in chapter 3). Ben’s drive to be male may also have been a defensive way to ensure a separate identity that would perhaps be removed from mother’s narcissism or unconscious communications to her daughter; this could also be seen as a wish not to be left with a damaged mother internally (Hypothesis 2 & Hypothesis 6).

When Ben moved on to talking about adult sexual relationships, he agreed when I suggested that it required a lot of *adapting*. He latched on to the notion of adapting both on the part of the transgender person but also:

... for your partner to see you in the embodiment that you feel is your being, they have to really connect with you on an emotional level and in their own gender because as we know we don’t have the ability really to empathise

with anything we in ourselves do not have ('Ben', personal communication, interviewed on 02/11/2019).

This felt poignant to me as a description of the lifelong struggle to be perceived as the gender that one feels one is, that does not conform to one's birth sex. Perhaps for Ben there had always been a great deal of adaptation to manage: the four brothers from previous marriages, mother's own relationship to her sexual and gender identity and how this was transmitted and translated, father's difficulties with accepting Ben's psychological struggles, his parent's separation when he was eleven which entailed father's absence for some years possibly leaving him with an unhappy mother.

Ben did not feel that he had turned against women or feminism in his trans male identity, and thought this was a big miscomprehension on the part of feminist women who thought this. He spoke in an impassioned way about being a feminist and not abandoning the female voice:

... because it was that platform that gave me as a trans man a voice to work with in the first place and I would have it profoundly known that my manhood is substantial beyond so many other men that were born in their bodies because I was raised by women. *Women* (emphasised) got me out of this mud, men left me in it if we want to speak categorically. So, when it comes to this idea of exchanging one gender for the other, having to then take part in this social categorical loyalty – I can't do it. As for this feminist or lesbian argument towards trans men: this is wrong ... 'you're abandoning us or you're lying to yourself': no! no! I'm not leaving you, I'm not leaving you ... I hate this idea that there are women out there that feel that I have a sense of abandonment towards them because I want to be a man or

something, it's horrible. ('Ben', personal communication, interviewed on 02/11/2019).

The way in which I understand the underlying meaning of this, which is of course speculative, is that perhaps Ben experienced acute separation anxiety early on in his life, as well as a fear of merger with his mother. There is a split he is describing in which women are good and men are bad, if the mud is interpreted as the shit or the messier struggle in life. I think that Ben might also be expressing his muddy struggles with categories of femininity and masculinity within his own gender identity evolution. The phrase 'doth protest too much' comes to mind. The idea of a woman feeling left by him is unbearable, this might include a difficulty with separating from his mother which might include an erotic tie to her, but it raises the question of who is leaving who and what? Possibly Ben's departure from femaleness becomes reversed as a defensive manoeuvre. Ben might also be conveying that for him these categories have the texture of a muddy fluid, are exchangeable and on a spectrum. He objects to hard and fast definitions that are too set and restrictive (Hypothesis 1). On a more affirmative note, Ben is expressing his loyalty and allegiance to women whom he has felt supported by. Within this loyalty is his acceptance of his natal femaleness.

As the interview with Ben proceeded and following my question to him about his relationship to his body, he told me that he had Sensory Processing Sensitivity (Disorder) which he described as a process in which his senses magnify and multiply very easily which makes things physically and emotionally very intense: "I am sort of outer body and inner body all the time" and this he thought was detached from

his trans identity. This could also be conceptualised as a struggle with a boundary between inside (phantasy) and outside (reality), (Hypothesis 1 & 7). It also relates to Preciados's ideas that I discuss in chapter four.

Ben explained that he was not dysphoric towards his body:

I do identify with the body that I have. But I just know and feel that I could slip into another one just as comfortably and it would be even more comfortable, I don't know any other body than this [...] I know that transgender for me began emotionally in some way or it must have because you know I don't feel that my body is an issue as a trans individual unless we're talking about relationships, physical issues therein and as we know again that's convention and it's physical. ('Ben', personal communication, interviewed on 02/11/2019).

When I ascertained that he did not feel dysphoric as such but that it was more "the body in relationships" that proved difficult and that he did not have an inherently negative attitude to his body. Ben responded:

Yeah, I don't feel I'm in a position to have that especially considering I'm now twenty-nine coming up thirty, kind of having crafted myself; so of course at this stage I'm not going to hate my body because I've played a huge part in creating it which is more than so many humans can say so I'm grateful for it. ('Ben', personal communication, interviewed on 02/11/2019).

This approach differed from that of Hal who felt a sense of incongruity within a female body (Hypothesis 2) and also differed from Jude and Leon who retrospectively attributed their unhappiness and emotional struggles to their gender (Hypothesis 3 & 7). For Danny, Casper and Hal it was the inescapable reality of puberty that threw them into conflict with their female bodies. Ben makes a

distinction between the body in its gender identity (self-crafted) and the (adaptive) body in relationship, the sexual body that necessarily involves another body. Struggles with psychological difficulties have become conflated with gender struggles (Hypothesis 7). In spite of his gender achievements, and pride in his embodied 'self-crafted-self', the basic demands of or adaptation to reality appeared to be an ongoing challenge for him (Hypothesis 1).

In my methodology chapter I referred to the nature of an eristic argument, that seems to privilege defeating the opponent as opposed to reaching the 'truth'. I have found that there is an eristic aspect to some discussions about gender, in the context of a pull to justify identity without acknowledgement of biology, birth, sex, developmental issues or emotional struggles. My hypothesis on psychic equivalence expresses this phenomenon. The 'eristic' argument appears to include a stance that cannot be opened up for discussion or debate, and thereby is concrete. In the interviews, I found that it was hard to open up thinking about underlying causes for depression, anxiety or self-harm. The interviews were, of course, in a setting in which personal material was being expressed in the context of a dialogue with a researcher, and this may have had an impact on what could or could not be spoken about. Nevertheless, the impression I gained in most of the interviews was that emotional difficulties appeared to be subsumed or explained by gender difficulties, and at times (birth) sex and gender (identity) became conflated or (con)fused.

Although transgender identity brought relief to my interviewees, and that has to be acknowledged, I was left with concerns that some serious underlying difficulties had been covered over. Whether these difficulties re-emerge remains to be seen. In

cases of de-transitioning, it is clear that gender identity did not provide the sought solution. The eristic argument has the defensive components that are often embedded in experiences of gender identity, within which there is massive individual variation.

The interview narratives revealed comorbidity amongst the interviewees, which opened up the question of whether gender overtook or subsumed other significant emotional difficulties. It is not easy to delineate gender difficulties from other emotional difficulties or to know how gender difficulties unfold before, within or during other significant and serious psychological struggles. Young people with psychological difficulties may well find a valency for their difficulties *through* gender identity issues, which can then become the overriding anxiety pathway or goal state. Research has shown that gender diverse young people often experience more psychological difficulties (de Vries et al., 2016). Recent research has shown that more birth-assigned females are experiencing psychopathology (de Graaf et al., 2017; Kaltiala-Heino et al., 2015; Mann et al., 2019).

An emerging identity is part of what growing up entails, particularly during puberty. If gender identity struggles take centre stage (as they did for my interviewees) along the maturational pathway, these can become over-determined and over shadow other difficulties from being acknowledged and attended to, such as depression, suicidality, anxiety, dysphoria, anorexia, self-harm and Autism.

In his article about gender dysphoria in children, Schwartz (2012) points out how the medical sciences push against ambiguity and refrain from emphasizing the lack

of data from controlled studies. He describes the challenge for clinicians of making the “child/parent symptom matrix” fit a liberal psychiatric treatment model (2012: 461). Schwartz is surprised by the lack of ambivalence in trans children, and the lack of experiential dimensions in both subject and observer. He is struck by the “assumed mutability of gender” in children, and by the differences in approaches with which a clinician can lean into the child’s narrative: either literally, or symbolically and metaphorically, via an interpretive process. When clinicians hold essential gender in mind, Schwartz thinks that their approach is likely to be less psychologically minded not least as children speak more symbolically than adults. He warns against the assumption of gender as a primary physical condition, especially in children. He is empathic towards parents and clinicians caught up in the turmoil of the child’s demands that can lead to the belief that gender is biologically real, rather than a subjectivity (2012: 473-476). The children leading the adults brought to my mind an image of the Pied Piper in reverse.

This chapter considers lived experience and my interpretation of underlying processes. It also introduces and tests out my hypotheses, that can be characterised as relating to: Phantasy, Femininity, Temporality, Sexuality, Bisexuality, Symbolism and Equivalence. My interviewees mostly struggled with the reality of their bodies either before, during or post puberty. When this reality was unmanageable, either through their own or others’ perceptions of it, they turned to *Phantasy* as a useful alternative to reality in order to allay acute discomfort or depression. At times the reality was unwelcome and exposing. *Femininity* was unwanted by all of the interviewees, to different degrees and at different periods of

their lives. I have connected the rejection of femininity and femaleness to conscious and unconscious ambivalence in the mother/daughter dyad, that came through in the interview material. I noticed a return to the original and pre-transition object of desire, so that *Sexuality* was maintained as a recurring phenomenon; as well as maintenance of *Bisexuality* before and after transitioning or identifying as trans men. This showed the intricate movement between natal sex, object choice and gender identity. *Temporality* for most interviewees had a fluid quality, as the present state became the past state. The struggle with the conflict between the body and mind led to the use of the body as a *Symbol* in order to realise a wish. Gender difficulties mostly became the explanatory framework for other complex emotional difficulties. For this I borrowed the term *Psychic equivalence*.

I have provided contextual information on the interviewees, as discussed in my findings, in the table on the next page:

Name	Dan	Casper	Rory	Jude	Leon	Hal	Ben
Age	19	20	22	24	27	28	29
Nationality	British/EU	USA	British	British	USA/UK	British	British
Ethnicity	Mixed race	White	White	White	White	White	White
University education	x	x	x	x	x	x	
Natal sex	Female	Female	Female	Female	Female	Female	Female
Bisexual pre-trans	x	x			x	x	x
Bisexual post-trans	x	x	x		x	x	x
Pre-trans homosexuality female to female	x			x	x	x	
Pre-trans heterosexuality female to male			x		x	x	
Post- trans heterosexuality trans male to natal female			x	x	x	x	
Post trans homosexuality male to male	x				x		
Testosterone		x	x	x	x	x	x
Mastectomy				x			x
Mastectomy (planned)		x	x		x		
Hysterectomy		x					
Depression & Anxiety	x	x	x	x	x	x	x
Eating Disorder		x					
Dysphoria	x	x		x	x	x	
History of self-harm				x			
Autism diagnosis						x	
Suicide attempt			x			x	x
Psychological input (helpful)				x		x	
Psychological input (unhelpful)		x	x		x		x

Conclusion

Aspects of Freud's writing lend themselves well to an understanding of transgender identity today. Writing about the unconscious wish in dreams preceded his writing about sexuality in the 'Three Essays', and it has been suggested (Haynal 2009) that one led on to the other. The unconscious dreams and wishes of the once young females, now trans men, that I interviewed, might have led them on to a more conscious wish to transition to the other sex. In the Three Essays Freud suggested infants were born with sexual drives and polymorphous sexual impulses. The current multiplicity of gender identities and identifications come across as 'polymorphous gender impulses', indicative of a shift from sex to gender impulsivity. Freud's, so called, phallogentric thinking, the perception of 'a lack' for females in their sexual and Oedipal development, fits with much of the material of the trans men that I interviewed.

Biology was important to Freud, who started his career as a physician, and who throughout his life's work emphasised his belief in the biological substrates of behaviour; his wish was to "furnish a psychology that shall be a natural science" (1950a). Biology and psychology come into conflict for the trans man, personally and socially. Gender as socially constructed moves away from gender essentialism, as something innate, universal and immutable. As gender is divorced from biology in some current modes of thinking, it becomes distanced from reality and the 'facts of life' (Money-Kyrle 1971). By recruiting psychoanalysis, I have been able to adopt a different stance to essentialist or constructionist approaches.

The themes in my hypotheses largely centre on movement between two states of being: phantasy and reality, femininity and masculinity, the present and the past, sexuality and bisexuality before and after transition, concreteness and the capacity to symbolise and psychic equivalence between inside and outside.

I hypothesise that the *flight from femininity* is embedded in the motivation to transition, more strongly at times than the wish, belief in or desire to be masculine or male. The core difficulty for most of my interviewees was *their ambivalent identification with femininity and femaleness*. This necessitated a move away (or extreme severance that I have referred to as matricidal) from womanhood that extended into the wish *not* to identify as female and gay. This could also be seen as internalised homophobia, as same-sex attraction as a lesbian appears to be denigrated and unwanted as an identity. A woman who is openly attracted to other women sexually, is denounced, and segued into a trans identity. By internalised homophobia I mean that societal or cultural disapproval might be absorbed, but also intrapsychically there is disapproval from within and a rejection of self as a homosexual woman. This implies an internalised hierarchy of sexuality. There might also be unconscious resistance towards the homoerotic aspect of early mother/daughter contact.

The preferred identity was that of being a trans man, in which bisexuality or homosexuality was more acceptable. A gay trans man trumps a gay woman. I have shown how *sexuality transitions along with gender*. The original female homosexuality *transmutes into* heterosexuality (a trans man with a female partner), or homosexuality (a trans man with a male partner). These scenarios maintain the

object of desire pre-transition, (a woman with a male partner); but the orientation has changed from heterosexuality to homosexuality. The shifts and turns in the desiring subject and object strengthen my proposition that *the wish to take flight from womanhood* (or lesbianism) *outstrips the wish to land in manhood*. It appears to be more desirable to be a trans man with a vagina than a phallic woman with breasts. The journey is more *away from and out of than into and towards*. For most of my interviewees the masculinity sought was not overtly or stereotypically male; this implied that a form of feminised masculinity as a trans man is preferable to female masculinity. The physicality of gender creates many difficulties, when the body does not corroborate the gender in mind. I demonstrate this through the interview material.

I found that *the orienting of oneself as male towards others, and the orienting of others towards the self as male* was extremely important for trans men. This freed up the prior sexuality that was more of a struggle in the pre-transition orienting from a female position or towards a female position from others. The success of this orienting is expressed by 'passing' as the gender one identifies as. This choice of word implies that not passing is failing, that one can fail at or in one's gender.

A theme that I stress in my writing is *the capacity to accept the reality of the difference between the sexes* early and during the life cycle. Bion¹ (1967; 1984) stressed the significance and differences in *the infant's capacity to manage frustration*. Accepting reality necessarily requires a tolerance of frustration, and having to come to terms with both one's own limitations and the limitations in the

¹ Bion stressed the difference between the infant's capacity to evade or modify frustration in relation to evacuative modes of relating or an apparatus for thinking (1967, 1984: 112).

external world, whether this is an infant waiting for the next feed, or coming to terms with being a girl and not a boy. Transgender identity brings into being the opportunity of not having to renounce the sex that one is not, or foreclose on object choice. It can be thought of as a hybrid of sex, sexuality and gender that is sought as a defence against primitive anxiety that threatens identity. This can be seen as an 'identity as a defence against identity', not unlike Britton's (1995) notion of phantasy as a defence against phantasy.

Acceptance of reality is also a central factor (or aim) in psychoanalytic work: this includes the vicissitudes of patients' struggles to achieve this and their defences against it. One of my hypotheses is the wish to revise developmental time into '*I am therefore I was*' or '*I was what I am now*'. This reversal eliminates the potential to understand causal chains in the developmental pathway of life. It also invokes 'après coup masculinity' for the trans man; by this I mean that it reverses 'then in now' to 'now in then'.

Money-Kyrle (1968: 691-698; 1971: 103-106) referred to 'the facts of life' that centre on recognition of differences that we all struggle to accept. These are: the goodness of the breast, the difference between the sexes, recognition of parental intercourse as a creative act, the difference between the generations and the reality of the passage of time. The hatred of these facts comes from the envy they can provoke and the threat to omnipotence. As a way to avert and deny these 'facts' a mythology is invented², that functions to avoid facing our mortality and

² Steiner, J. 2018b, introduced the 'Garden of Eden Illusion' as a defensive retreat from the reality of time.

dependence on others. I have emphasised and expanded on the categories that Money-Kyrle cited in my thinking about gender identity. I suggest that gender (identity) has become one way to manage these 'facts of life' as it is sometimes deployed to override psychic struggles with these unmanageable realities.

The continuous thread between infantile and adult sexuality (as advocated by Freud) is often questioned in transgender identity, as a link to the past self can be unwanted. The drive to denounce chronological time or reverse it includes a wish to undo or arrest biological and physiological development along gender lines since birth, as in some cases natality or the assigned sex at birth is refuted. The *rebirth* aspect of gender transition attacks or negates the reality of *the parents as a sexual and procreative couple* (the primal scene), as gender identity becomes *self-generated*; the sex at birth as conceived by one's parents is reconceived in the form of parthenogenesis. As Athena was born out of the head of Zeus, Metis was denied her position as a mother who gave birth to her daughter. Athena burst forth from the male psyche, rather than the female womb. Transgender identity emanates from the psyche, it is conceived in the mind of individuals who struggle with their identity. I have suggested that for trans men, a matricidal wish can be embedded in the desire to transition. I posit this wish as an alternative to the more traditional patricidal wish in the Oedipus Complex. I see an unconscious matricidal wish enacted in the drive towards maleness and away from femaleness and motherhood. The need to separate from a mother who wishes to colonize her daughter's femininity (as was the case with some of my interviewees) might be so

strong, that in the very act of having one's breasts cut off there is a symbolic killing off of mother who epitomises femaleness for her daughter.

My curiosity has centred on how and why 'gender', especially that of young natal females has become so culturally central in recent decades. In my introduction, I asked why it takes the form of a rebellion and *what the gender protest is rebelling against?* An obvious answer to what it stands for, might be the liberty to be who one chooses to be and feels oneself to be, which raises the thorny ethical question of who has the authority to make decisions about medication (puberty blockers) that can affect teenagers' and pre-teens' future options, sometimes irreversibly. The difference between the sexes has become a political aspect of gender identity within the cultural landscape of the twenty first century, with transgender identity or trans rights often taking centre stage as one of today's totemic "culture war" (Jones, 2021) issues. The population born in the last twenty years do not necessarily know of a 'pre-transgender' time, in which gender identity was even more threatened. Access to social media forums lends uncertain aspects of identity an online universe that can go unchallenged. This instant sense of belonging, or sharing gender struggles, can in some instances risk the escalation of gender uncertainty into conviction that change is necessary, and in this respect can be thought of as having contagious elements for some individuals.

As mentioned in my introduction it was an interest in hysteria that led me to an interest in transgender identity. My interest was driven by an intense need to understand what lay in or beneath the wish, motivation and drive to be the other sex or gender. I became particularly interested in the move from femaleness to

maleness in trans men and this led on to the way in which I have chosen to focus my research question. I have discussed sex, sexuality, gender and identity across different psychoanalytic and academic schools of thought or disciplines, and included my own evaluation through the interviews as a psychoanalytic clinician and researcher.

In Juliet Mitchell's analysis of hysteria (Mitchell 2000) she describes *saka* as an illness of the Taita people, who live in the Coast province of Kenya. They acknowledge illnesses of the heart and of the head; the illness of *saka* is of the heart. It is described by the Taita people as an illness of "wanting and wanting". Taita women are largely dependent on men and have few privileges, and it is mainly these married women who become ill with *saka*. This takes the form of restlessness, anxiety or a self-hypnotic state; the sufferer can go into convulsions, lose consciousness and be in a trance like state. *Saka* can be triggered by a strong wish for something. One of the treatments for this illness is the *saka* dance in which "gender ambiguity and fluidity is all-pervasive" (Mitchell 2000: 2), as the women adopt men's things or parts of their clothing that they use or wear. This cathartic dance is an attempt to negotiate gender differences by allowing women to have some of the things that men have. The illness has hysterical qualities.

I have included the women who suffered from *saka*, because there is something heart-breaking about their disappointment, of finding themselves with less and less that leaves them "wanting and wanting". I make the leap from their trance to trans men, natively female, who also seem to be "wanting and wanting" what they do not have, or 'unwanting and unwanting' what they do have. This wanting and

unwanting can be understood to be so many things: to have been born male, to feel more at home in their female bodies that come to the fore during puberty, to manage the realities of difference between the sexes and generations, to accept their family dynamics whether mother/father, mother/daughter, father/daughter sister/sister or sister/brother, to fend off deep rooted psychological and bodily struggles such as depression, anxiety, self-harm, trauma and dysphoria, and mostly to inhabit an identity that feels authentic in body and mind. Freud asked the question “What does a woman want?” (1925). Women and wanting has also been taken up by Benjamin (1988), who posits the idea that ‘women want to want’, and Elise (2000) who explored why ‘women may not want to want’.

The *saka* dance with its rituals appeared to bring about some relief or catharsis for the unhappy women of Taita; what I address in my work is whether and how transgender identity can bring relief to unhappy female individuals, now identifying as trans men. Transitioning to the other sex or gender is a complicated dance for trans men. It requires much (conscious and unconscious) movement: psychic, bodily, in the other’s gaze, within the parental and sibling family constellation, sexuality, official external bodies that recognise gender and a peer group that supports the ethos of trans gender identity. A wished for change in gender identity requires a momentous shift in both self and others. Sometimes this shift reverses in cases of de-transitioning, when the move from female to male or male to female gender identity has not provided the relief or solution that was sought.

Freud’s dictum that the ego is first and foremost a bodily ego, that our early sensory experience is *necessarily bodily*, supports my writing about concreteness.

Ferrari, as cited by Lombardi (2002), expands this notion via the 'Concrete Original Object', which correlates with transgender experience. The question seems to be not so much whether the conflict is in the mind or in the body, but *how to resolve the tension between them*: "events lying between the bodily and the psychic fact" (Lombardi 2002: 363).

I explore early development as a way in to understanding when and *how gender begins to form* in the infant who is vulnerable to maternal and paternal influences before and after birth. In describing the pre-symbolic, I was also describing the pre-gendered world. In some respect the influences of parental expectations and projections are ever-present in shaping the infant and toddler's gendering, or gendered projections. Fausto -Sterling (2012) puts it well:

The environmental trappings of gender, from the voices, faces, modes of holding and touching, dress, hair, and grooming, to the colours in the room, the toys offered and the baby clothing used, are ever present. From birth or before an infant absorbs them, commits them to memory, develops expectations about them, and receives bodily messages about their own sex and gender (2012: 14).

In my theory chapters I discuss fluid and concrete elements of gender identity including historical attempts to conceptualise and define it, namely by Money and Stoller in the 1960's. I concur with Fausto-Sterling when she says that "... gender identity is *not a thing*, but a name given to a weaving together into a subjective self of aspects of the masculine and feminine" (my italics), (2012: 406). Freud did not refer to gender, but preferred to theorise about femininity and masculinity. It is also hard to name *as a thing* that which might destabilise gender identity. I see this

more as a concatenation of several factors that fit with Rumsfeld's description (2002) of 'known knowns, known unknowns and unknown unknowns', as well as the one he left out 'unknown knowns'. Known knowns include: immediate family environment, the particular developmental stage of life, the general capacity to blend in socially with body, mind and sense of oneself in the world, and the influence of the Internet's multiple forums on gender identity. Known unknowns include: acute sense of incongruity between body and mind, depression, anxiety, suicidality amongst other psychological factors. Unknown unknowns and unknown knowns include the interplay of projective and introjective feelings and phantasies. When the surrounding systems (family, school, peers, psychological forms of help) fail to recognise, support or stabilize these aspects, gender identity can be thrown into disarray that can drive a need to re-organise in a substantially new direction.

The Psychoanalytic Research Interviews allowed me to combine my roles as both researcher and psychotherapist. The relatively small sample group of seven in depth interviews yielded rich material for me to process; fewer and deeper was a good choice. As psychoanalytic investigation is usually conducted through interpretation, I see my hypotheses as interpretations inferred from the interview material. Interpretation is not conclusive, but it aims to penetrate the unconscious strata that influence conscious aspects of psychic life: to convert the unknown unknowns into known unknowns or known knowns.

The interview narratives revealed comorbidity in all interviewees; the existence of more than one destabilising issue such as depression, suicidality, anorexia, self-harm, dysphoria, autistic spectrum and sensory sensitivity disorder alongside or

within gender identity conflicts. The gender framework or climbing frame offered a solution to or subsumed other difficulties not least as it has become a cultural sedative that can anaesthetise major psychological distress; for some this brought immense relief, but left me not knowing if this relief was long-term or not. Wren (2019), in her discussion about 'A crisis of meaning in the care of gender diverse children' states that:

It can be hard to disentangle the difficulties that are specifically gender-related from those that are associated with other developmental challenges, especially amongst those young people who present post-pubertally (Wren 2019).

The struggles of a young girl who is unhappy and deeply uncomfortable with her natal gender are bound to break through with particular intensity during puberty, if they have not done so earlier. The experiences of puberty amongst my interviewees varied; for some it was par for the course and for others it was intolerable, in one case leading to a hysterectomy. It is during puberty (and often earlier) that the wish to identify as trans can set in motion the pathway towards transition, when there is a need to arrest any further female development in the body or in the mind. This includes the politically contentious questions about the appropriate age for medical intervention.

The stages at which the drive to transition emerged amongst my interviewees varied, as did the impact of menstruation on them. It was Ben who had a very early drive towards maleness in his descriptions of his behaviour at playgroup with other girls although this could also be understood as 'tomboy' behaviour, early

omnipotence, an undifferentiated³ state, or the wish to be both sexes freely played out. Other interviewees (Danny, Rory and Jude) who attended all girls' schools appeared to accept menstruation pragmatically. Leon's decision to transition occurred in his twenties. For Casper and Hal, it was more traumatic. Casper's intense wish to have a hysterectomy indicated phobic fears about the inside of a female body, and Hal was intensely anxious about the risk of pregnancy. The reality of a womb, and what could happen in it, to it and from it was terrifying to the extent of becoming a 'nameless dread'⁴. The inability to come to terms with femaleness as a reality or fact of life can convert into a drive to abolish or kill off that reality. The flight from femaleness and femininity can then take a concrete form, as it cannot be borne psychically.

This revisits the *saka* phenomenon of 'wanting and wanting' which often does not correspond with life as it is played out in reality. The *saka* illness plays out a hysterical attempt to manage the difference between the sexes, or more accurately the differences between how the sexes are treated and positioned socially. For the Taita women, this was a pronounced difference. Although I do not think of transgender identity as hysteria per se, elements of hysteria can be seen in some of the aspects of the wish and drive to transition to the other sex. The Taita women are reminiscent of The Furies in the Oresteia, that are described by Irigaray as "... women in revolt, rising up like revolutionary hysterics against the patriarchal power in the process of being established". (Irigaray as cited in Whitford 1991:37)

³ Fast (1984) proposed an undifferentiated state in early development, prior to gender awareness.

⁴ Bion (1962) used the term 'nameless dread' to describe intense fear that defies description or representation.

I discuss non-phallic masculinity, the trans phallus and après coup masculinity in an attempt to capture what the trans man is seeking and wanting. I think that *the orienting from a masculine position* is important, whether bodily, psychically, socially or sexually. This masculine position does not necessitate a biological penis, it necessitates conviction and belief in a subjective maleness that is idiosyncratic, often supported by hormones and surgery. The quest is for a masculine social function, not necessarily a masculine sexual function. Preciado emphasises the power of pharmaceuticals, the ‘technoscientific industry’ on bodily needs; he brings in the notion of looking at the body from the outside in. He implies that the solution to bodily needs can be so fast, that it is hard to know whether the need drives the solution or vice versa (Prozac for depression, Viagra for impotence, Testosterone for masculinity). This also applies to the technologies that support gender transition, and their accessibility. There are industries that thrive from the business of gender transition. Preciado refers to the industry as pharmacopornographic. He sees it as the *invention of a subject*.

The categories of sex and sexuality are necessarily challenged in writing about gender. These overlapping and yet distinct categories of gender, sex and sexuality have become dominant in relation to societal ethics, as their meanings fracture and proliferate in equal measure. The ever-expanding variability of gender identity: 71 options on FaceBook (Telegraph 2014) pushes the boundaries and parameters of masculinity and femininity to entirely new territory, or the invention of a new subjectivity. This new gender-territory is “unpoliced” (Hansbury 2017) “fundamentally non-lexical” (Marcus et al 2015), and “lays down a challenge to

certain foundational logics” (Wren 2019:9). It challenges clinicians to use a wide lens and adapt to this new territory. It is hard to think about gender outside of “the pull of the present” (Schopf 2005), which can overshadow what came before.

The gender protest can be seen through the lens of both individual and collective narcissism, but as narcissism is relational (despite the delusion that one is not) difficulties emerge in society as ‘how I wish to be perceived’ necessarily recruits others. This tension between us and them can and has thrown gender identity into social warzones. Trans activists struggle to defend their rights as individual citizens. There are warring factions between trans men, trans women and lesbians. It is a universe with its own language laws, in which one can unknowingly break the rules of communication. This implies sensitivity and defensiveness and need to protect those *who are in* this community from *those outside it*. Also implied is a radical challenge to a prescription of sex/gender that is culturally expected. Perhaps what lies beneath the gender protest are the words: ‘no-one but me can tell me who or how I am’. This is subjectively valid, but inevitably fraught with social and ethical obstacles. There are divisions amongst clinicians in how gender identity ought to be approached, particularly when it manifests at a young age. The spectrum of acceptability appears to range from all embracing to extreme suspicion, not least because of the role of adults (parents, teachers) in what the young child says or is supposed to mean.

When I was trying to find interviewees, I sent a mailout all UK counselling departments, via a colleague, outlining aspects of my research. I had just one response, from a trans individual, who asked if I was in the community (of LGBTQ+).

It was suggested that I was trespassing, as he expressed that I should not be doing this research from outside 'the community', and he asked if I'd sought permission from within the community. Indeed, I have felt like a trespasser at times, entering into a world of transgender individuals, but not being a fellow citizen. This friction resonates with terms like 'the in group' and the 'out group'; belonging and not belonging that form part of how we forge identity. The 'to and fro' of projections is part of the struggle to manage difference, exclusion and legitimate membership.

It is destabilising for some clinicians, who might not question their own sex or gender, to have the categories of sex, sexual orientation and gender unmoored, and yet this is pivotal to my research. Psychoanalysis has been and at times still is accused of 'measuring from the norm', and needs to be reminded that: "there can be no measurable norm without variance around it" Fausto-Sterling (2012: 406) in reference to Corbett (1996, 2009).

The explosion of gender identifications enacts a radical wish for emancipation from constriction. I believe that as psychoanalytic clinicians working with gender variability, a parallel emancipation is necessary. This involves a need to look deeply into our own gender identity or sexuality and loosen the hardened assumptions that might be carried both consciously and unconsciously.

'The age of consent' as it applies to the sexual act, now applies to the gender act too. I mean this in the context of the recent judicial review⁵ about the age at which

⁵ A judicial review took place on 1.12.20, about the practice of Tavistock GIDS to prescribe puberty-suppressing drugs to persons under the age of 18 who experience gender dysphoria. The outcome was that a child under 16, may only consent to the use of medication intended to suppress puberty where he or she is competent to understand the nature of the treatment; and that it is highly

a young person is deemed to be able to consent to puberty blockers as a pathway towards gender transition. Maya Kaye (2021, 2022), who identifies as transsexual, was born male and transitioned to female, and speaks openly and movingly about how there was no stopping her at the time of transitioning several years ago. Following much therapy, she now believes that if she'd had "real" therapy at the time, she might not have had so much surgery and now feels that something is missing from her body that should be there. Maya's capacity to mourn her masculinity and maleness many years after her transition is both heartening and disheartening. She is reflective and brave about opening her thoughts to the public.

The binary of two sexes is the source of much protest: why only two? The act of transitioning has also been thought of as subscribing to a gender binary: the wish to be a man or a woman, but not the one assigned at birth. Wren (2019) raises and acknowledges many questions that arise in relation to early physical intervention:

We do question whether early physical intervention is emancipatory for everyone who requests it, as for some young people it may side-step a later adjustment to the body as-it-is and disrupt pathways to same-sex sexuality. We are also conscious of the way early medical intervention may re-inscribe binary gender conformity by encouraging steps towards rendering trans experience and trans bodies invisible (Wren 2019).

The non-binary gender identity, a wish not to commit or locate oneself in either gender, appears to express a wish to evade reality, in the form of 'I will not commit to either'. One cannot avoid noticing an aspect of infantile omnipotence in the notion that 'I can be whatever I want to be'. But even in non-binary gender identity

unlikely that a child under 13 would be competent to give consent. This judgement was appealed by the Tavistock and upheld in 2021.

the rebellion is against the binary, the unwanted premise that there are two biological sexes with specific chromosomes. The protest against man and woman incorporates a protest against a pro-creative sexual couple (the primary scene). Although there is variation from the hetero-normative in gay parenting, the sperm still has to come from a man and the ova from a woman, whether the fertilization is inside or outside the body. It is important to acknowledge the cultural transition from sex to gender in recent decades as the concept of gender widens out the more biological certainty of sex. The breadth of gender threatens to supersede the certainty of sex as a category.

The conflict for the trans man and pre-transition female is *the gap between the desired state and reality*, and it is often a painful journey to negotiate. As Westen (1997) said, when discrepancies arise, it can lead to an altering of the reality perception so as to achieve the wished for goal state. The gender that is felt in mind, is (usually) the reality state for a trans man, in spite of the body posing a different reality. In my discussion chapter I address how this challenging of bodily reality is managed or achieved. My hypothesis 'Phantasy replaces the reality of the difference between the sexes, when it is unmanageable' captures this struggle. The goal can sometimes manifest in 'passing' as the gender one identifies as. Passing necessarily recruits the other's perception, how I want you to see me, involves a transgression of reality. Others are invited in to this universe, one that has its own language requirements. It flips the generational norm of a parent teaching their child to speak. The public, that stand in for the parents, need to learn how to speak the language of gender.

Transgender identity poses an ongoing theoretical and clinical challenge for psychoanalysis, but not an impasse. A breakdown of defences is not just a requirement for the patient, both clinician and patient are exposed to anxieties that need to be felt and confronted. The double bind is double sided: a trans patient is likely to want to protect (rather than confront) their defences or anxieties in relation to their gender identity choices and so might a clinician wish to defend their freedom to use psychoanalytic methods. In order for psychoanalysis to have a better and broader understanding of gender identity, it is important for there not to be a *fixed desired state* in the approach of the clinician towards the patient.

The group of trans men that I interviewed were all content with their gender identity, and the body modifications had brought them relief. For them, mourning was not necessitated by misgivings about their transition, but perhaps more about struggles during puberty and subsequently in establishing a gendered identity that aligned with their wishes. It is too soon to know how my interviewees might feel in the years to follow, as for most of them their transitions have taken place in recent years.

Sometimes the capacity to reflect or mourn the gender that has been relinquished, can only take place after the transition has occurred, when it is experienced as not having provided the wished for solution to psychic conflict and social integration; and if it has provided this, there is still a history in the other gender to be mourned. The drive or mindset to transition can be unstoppable, as the space for reflection is not yet accessible (Maya Kaye 2021, Quinodoz 1998, Lemma 2012, Oppenheimer 1991, D'Angelo 2020, Chiland 2000). Careful monitoring of countertransference is

likely to help the clinician experience, manage and untangle projections both from and towards the patient, as well as “primitive gender terror” (Saketopoulou 2015). A necessary component of the work for a clinician is to feel pulled right into the patient’s gender conflict, a place unmoored from safe land. When Danielle Quinodoz approached work with a transsexual patient, she adopted a stance akin to being pregnant without knowing the gender of the baby: “I would be father and mother to a ‘child’ whose sex I did not know” (1998: 97). Perhaps this is the ultimate unknown unknown.

In this PhD I have addressed how to both combine and separate the terms ‘gender’ and ‘identity’, as they are central in my research. Gender forms a major part of one’s identity in the world, much more so when there are intense feelings of incongruence between body and mind or phantasy and reality as I have shown through my findings from the interviews.

Although the experience of finding a gender identity that enables the body to cohere with what is felt in mind can bring immense relief, it can also leave underlying struggles unresolved or displaced as gender identity becomes the goal state⁶. It can also become the victim or site of abuse, as (female to male) de-transitioners⁷ speak about femaleness as that which was blamed, attacked and irreversibly altered in the body. This can also happen in reverse, in instances of male to female transition.

⁶ Western wrote about goal states through life that can encounter conflict between desire and reality, this can lead to an alteration of the reality perception in order to achieve the wished for goal state (1997: 531-536).

⁷ www.4thwavenow.com

I'd like to come back to the notion of 'the invention of a subject'. In 2019 a book entitled: 'Inventing Transgender Children and Young People' was published (Brunskell-Evans & Moore 2019). It is a collection of papers by experienced clinicians and academics who largely believe that transgender has become a 'psychic epidemic'. This belief does not negate the experience of gender dysphoria, but it does question transgender identified children and young people as the solution. Subjectivity has become more important than objectivity in the identity of young people. Although psychoanalysis is always interested in the subject and subjective experience, it also offers objectivity, and the unconscious which can clash with a stance that claims to be purely subjective and conscious.

Gender identity is *self generated*, and bypasses the 'laws' of nature, biology, physiology, chromosomes and endocrinology. It disorders and reorders the status quo of prior relationships, it moulds and shapes a new landscape, one that dissents fundamentally from that which was there before. In this context gender identity alters temporality, and re-translates reality by inventing a subject or state of subjectivity. The gender protest can be seen as a protest against nature, science and the facts of life that form reality. At the same time, it is a manifestation of an individual struggle with the complexity of (sexual) identity that necessarily involves a relational aim and object which Freud recognised in 1905.

The substantial growth in referrals to Gender Identity Services, particularly by young girls, has become a 'psychic epidemic'⁸. For an epidemic to take hold, there

⁸ Marciano, L. (2017) This term is used by Jung in the article: 'Outbreak: On Transgender Teens and Psychic Epidemics', *Psychological Perspectives*, 60: 345.

needs to be a valency in the culture at the time, that supports it. Social media inevitably plays a large part in the social contagion of gender dysphoria in the twentieth and twenty-first centuries, as do doctors, patients and parents. In her writing about modern epidemics, Showalter (1997) asserts that: “Hysterical epidemics require at least three ingredients: physician-enthusiasts and theorists; unhappy, vulnerable patients; and supportive cultural environments”.

The gender revolution⁹ and within it the transgender movement has achieved in years, what has taken decades for other movements (women’s, gay and lesbian rights) to accomplish. The sociologist Michael Biggs suggests that this has been possible not least because of funding from pharmaceutical companies, medical providers and a few wealthy individuals (Biggs 2018¹⁰). This sheds light on the complex industry of gender, the weight of the movement, and the many factors that shape it. Hausman (1995) noticed that technologies influenced the taxonomy of transsexualism, and that feminists have written about gender as facticity, a self-evident category of analysis that is independent from sex. These considerations do not undermine the poignancy or validity of the multi-faceted or ‘polymorphously diverse’¹¹ nature of gender identity, an area rife with prejudice and controversy, but provide important context.

As I approach the end of this study, it is important to conclude that psychoanalysis *can* understand gender identity, despite ‘gender identity’ not necessarily wishing to

⁹ ‘Gender Revolution’ was on the cover of National Geographic, January 2017 Issue.

¹⁰ Biggs, M. Associate Professor of Sociology, University of Oxford, conducts research into social movements and collective protests.

¹¹ The phrase ‘polymorphous diverse’ was used by Schwartz, A. (1998).

be understood by psychoanalysis. This tension is at the heart of conflicting therapeutic disciplines, that have differing philosophies. For psychoanalysis, understanding necessarily recruits unconscious processes. For individuals with gender identity struggles, the unconscious is not always welcomed in as having the potential for interpretation or insight. Clinicians might benefit from the way in which the lived experience of trans men has been subjected to psychoanalytic analysis. The structure of my study can enhance the links between theory, lived experience and psychoanalytic insight.

My interest is more in the unconscious movement within individual trans men. Self-generation, or what might be termed the generation of the self, is occurring within a specific culture and time in history. Transgender is both an influential and political global movement, but also a private, personal and individual movement. Many subscribe to the former as part of their trans identity, but many do not, and go about their lives discreetly and privately. I have found it interesting to write about what has been referred to as a psychic epidemic during a global pandemic.

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Appendix 1

Interview Questions

- 1) Can you tell me, in whichever way you'd like to, about your experience of your gender identity?
- 2) Have you had family support?
- 3) I'm interested in the way that you relate to your body, can you say something about that?
- 4) How do you see the difference between maleness and masculinity?
- 5) Have you accessed psychological help at any point, and what has your experience of this been?
- 6) Do you think psychotherapy is relevant to your situation?

Appendix 2

INVITATION TO TRANS MEN AGED 18-30 (approx)

I am a PhD researcher in London (UCL) on the subject of how psychoanalysis can understand gender identity, with a focus on trans men.

I'm looking for participants willing to speak, anonymously and confidentially, about their experience of their gender identity. I will reimburse reasonable travel expenses within the Greater London area.

The aim is to enrich and expand the understanding and pool of knowledge on gender identity through access to the lived experience.

If you are interested in finding out more, with no obligation, please contact me at:

[REDACTED]

Many thanks for reading this,

Serena

INFORMATION & INVITATION TO TRANS MEN AGE 18-30

I'm a PhD candidate at the UCL Psychoanalysis unit. My PhD addresses how psychoanalysis understands gender identity, with a focus on trans men. I am particularly interested in how trans men *experience* their gender identity as well as their experience of access to psychological help. I plan to conduct individual semi structured interviews with trans men aged 18-30. There will be a few guiding open ended questions, allowing things to emerge in a free-flowing way. These personal accounts of how trans men feel will enable me to relate actual experiences to more theoretical ideas. My research is focussed on 'How Trans' rather than 'Why Trans'?

Psychoanalysis has long been interested in questions of sex and gender, and amongst academics and clinicians the debate has never been more lively than it is now. My current exploration of trans identity within psychoanalysis requires thinking about and expanding on existing theory, and combining this with actual subjective experiences of individuals. The interview will provide a respectful space to share and articulate experience and may help inform professionals and contribute to a change of attitude in clinicians.

Interviews will be recorded and transcribed, total anonymity will be ensured. The interviews will either take place in my office or in a mutually convenient private location that is accessible. Travel expenses within the London region will be reimbursed. I have got ethical approval for this research.

I'm really happy to discuss this further, an initial conversation will not commit you to anything. Please feel free to make contact:



Many thanks,
Serena
PhD candidate UCL Psychoanalysis Unit

Appendix 3 – UCL Information Form

Appendix 4 – UCL Consent Form

Appendix 5 – UCL Letter of Ethical Approval



Participant Information Sheet for Trans men age 18-30
UCL Research Ethics Committee Approval ID Number: 14551/001

YOU WILL BE GIVEN A COPY OF THIS INFORMATION SHEET

Title of Study: How does psychoanalysis understand gender identity, with a focus on trans men?

Department: Division of Psychology and Language Sciences (PALS)

Name and contact details of the Principal Researcher: Serena Heller, [REDACTED]

1. Invitation paragraph

You are being invited to take part in a PhD research project. Before you decide it is important for you to understand why the research is being done and what the participation will involve. Please take time to read the following information carefully and discuss it with others if you wish. Ask me if there is anything that is not clear and if you would like more information. Take time to decide whether or not you wish to take part. Thank you for reading this.

2. What is the project's purpose?

The purpose of the project is to enrich and expand on the understanding of gender identity, with a focus on trans men. The aim is to contribute knowledge that could benefit both clinicians working in the field and individuals. The PhD will include theoretical chapters and a discussion of anonymous material from interviews. I plan to conduct 6-8 individual semi-structured interviews, 50-60 mins each, that I will audio record on an electronic device. In the interviews I will be asking individuals to talk about their experience of their gender identity and access to psychotherapy. I will then transcribe the interviews into a password protected word document on my desktop computer. Individuals will be given pseudonyms and so will not be identifiable during the transcription process or in any publications. After the transcription I will destroy the audio recording.

3. Why have I been chosen?

I am wishing to interview 6-8 healthy members of the public aged between 18-30, who identify as trans men, and who are willing to be interviewed by me about their experience of their gender identity and, if applicable, their experience of psychotherapy.

4. Do I have to take part?

It is up to you to decide whether or not to take part. If you do decide to take part you will be given this information sheet to keep and will be asked to sign a consent form. You can withdraw at any time before or during the interview and up to one week after the interview without giving a reason. If you ask to withdraw you will be asked what you wish to happen to the data you have provided.

5. What will happen to me if I take part?

You will be asked to participate in an individual semi-structured interview with me. This will be arranged at a mutually acceptable location and your travel expenses will be reimbursed. The interview will last for 50-60 mins and will be audio recorded on an electronic device. I will be asking you to talk about your experience of your gender identity, and your experience of psychotherapy if this is applicable.

6. Will I be recorded and how will the recorded media be used?

You will be audio recorded on an electronic device by me. Only I will have access to the audio recording. I will be transcribing the recording into a password protected word document on my desktop computer and

at this point will ensure that you are not identifiable, as I'll be using pseudonyms. The audio recording will initially be stored in a locked cupboard and eventually will be stored in the UCL safe storage facility. I will be using anonymous data from the interviews to discuss gender identity in my PhD.

7. What are the possible disadvantages and risks of taking part?

You may find that talking about yourself causes you distress as you are being asked to talk about personal aspects of yourself and life that are emotionally loaded.

8. What are the possible benefits of taking part?

Whilst there are no immediate benefits for participants, the experience of the interview will provide the opportunity to reflect on a complex subject and may also contribute to a change of attitude in clinicians interested in working in this field.

9. What if something goes wrong?

You may find that participation in the interview causes you distress. You are free to withdraw from the project at any point during the interview. If I think that the experience of the interview is too distressing for you, I may stop the interview. If I have serious concerns about your distress I will advise you to contact your GP to think further about the distress. If you wish to raise a complaint I can be contacted:

██████████, or my departmental supervisor, Dr Lionel Bailly: ██████████, please CC the administrator for the dept, Helen King: ██████████

If you feel your complaint has not been handled satisfactorily you can contact the chair of the UCL Research Ethics Committee: ethics@ucl.ac.uk

10. Will my taking part in this project be kept confidential?

All the information that I collect about you will be kept strictly confidential. Although I will initially require your name and contact details, this will only be used by me for setting up initial contact. I plan to record the interviews and once I have transcribed them anonymously into a password protected word document, I will destroy the audio recording. You will not be identifiable in any ensuing publications.

11. Limits to confidentiality

Confidentiality will be respected subject to legal constraints and professional guidelines.

12. Use of Deception

N/A

13. What will happen to the results of the research project?

The data from the interviews will be included in my PhD thesis and might be published in scientific journals. You will not be identifiable in any publication.

14. Data Protection Privacy Notice

Notice:

The data controller for this project will be University College London (UCL). The UCL Data Protection Office provides oversight of UCL activities involving the processing of personal data, and can be contacted at data-protection@ucl.ac.uk. [UCL's Data Protection Officer can also be contacted at data-protection@ucl.ac.uk.](#)

Further information on how UCL uses participant information can be found here:

www.ucl.ac.uk/legal-services/privacy/participants-health-and-care-research-privacy-notice

The legal basis that will be used to process special category personal data will be: for scientific research. Your personal data will be processed so long as it is required for the research project.

If I am able to anonymise or pseudonymise the personal data you provide, I will undertake to do this and will endeavour to minimise the processing of personal data wherever possible.

You have certain rights under data protection legislation in relation to the personal information that we hold about you. These rights apply only in particular circumstances and are subject to certain exemptions such as public interest (for example the prevention of crime). They include:

- The right to access your personal information;
- The right to rectification of your personal information;
- The right to erasure of your personal data;
- The right to restrict or object to the processing of your personal data;
- The right to object to the use of your data for direct marketing purposes;
- The right to data portability;
- Where the justification for processing is based on your consent, the right to withdraw such consent at any time; and
- The right to complain to the Information Commissioner's Office (ICO) about the use of your personal data.

If you are concerned about how your personal data is being processed, or if you would like to contact us about your rights, please contact UCL in the first instance at data-protection@ucl.ac.uk.

If you remain unsatisfied, you may wish to contact the ICO. Contact details, and further details of data subject rights, are available on the ICO website at: <https://ico.org.uk/for-organisations/data-protection-reform/overview-of-the-gdpr/individuals-rights/>

Personal data will not be transferred outside the EEA.

15. Who is organising and funding the research?

The research is self-funded.

16. Contact for further information

Serena Heller

PhD Supervisor: Dr Lionel Bailly

PhD Programme administrator: Helen King,

Thank you for reading this information sheet and for considering taking part in this research study.



CONSENT FORM FOR TRANS MEN AGE 18-30 IN RESEARCH STUDIES

Please complete this form after you have read the Information Sheet and/or listened to an explanation about the research.

Title of Study: How does psychoanalysis understand gender identity with a focus on trans men?

Department: Division of Psychology and Language Sciences (PALS)

Name and Contact Details of the Researcher: Serena Heller: [REDACTED]

Name and contact Details of PhD Supervisor: Lionel Bailly [REDACTED] (cc administrator for dept: [REDACTED])

Name and Contact Details of the UCL Data Protection Officer: Lee Shailer, data-protection@ucl.ac.uk

This study has been approved by the UCL Research Ethics Committee: Project ID number: 14551/001

Thank you for considering taking part in this research. The person organising the research must explain the project to you before you agree to take part. If you have any questions arising from the Information Sheet or explanation already given to you, please ask the researcher before you decide whether to join in. You will be given a copy of this Consent Form to keep and refer to at any time.

I confirm that I understand that by ticking/initialling each box below I am consenting to this element of the study. I understand that it will be assumed that unticked/initialled boxes means that I DO NOT consent to that part of the study. I understand that by not giving consent for any one element that I may be deemed ineligible for the study.

		Tick Box
1.	*I confirm that I have read and understood the Information Sheet for the above study. I have had an opportunity to consider the information and what will be expected of me. I have also had the opportunity to ask questions which have been answered to my satisfaction and would like to take part in an individual interview.	
2.	*I understand that I will be able to withdraw my data up to 1 week after interview.	
3.	*I consent to the processing of my personal information on my gender identity and experience of psychological help for the purposes explained to me. I understand that such information will be handled in accordance with all applicable data protection legislation.	
4.	Use of the information for this project only *I understand that all personal information will remain confidential and that the data gathered in this study will be stored anonymously and securely. It will not be possible to identify me in any publications. I understand that confidentiality will be respected subject to legal constraints and professional guidelines.	
5.	*I understand that my information may be subject to review by responsible individuals from the University (to include sponsors and funders) for monitoring and audit purposes. N/A	N/A

6.	*I understand that my participation is voluntary and that I am free to withdraw up to 1 week after the interviews without giving a reason. I understand that if I decide to withdraw, any personal data I have provided up to that point will be deleted unless I agree otherwise.	
7.	I understand the potential risks of participating and the support that will be available to me should I become distressed during the course of the research.	
8.	No promise or guarantee of benefits has been made to encourage me to participate.	
9.	I understand that the data will not be made available to any commercial organisations but is solely the responsibility of the researcher undertaking this study.	
10.	I understand that I will not benefit financially from this study or from any possible outcome it may result in, in the future.	
11.	Travel expenses will be reimbursed. There will be no payment for participation.	
12.	I agree that my [anonymised] [pseudonymised] research data may be used by others for future research. [No one will be able to identify you when this data is shared.] N/A	N/A
13.	I understand that the information I have submitted will be published as a report and I wish to receive a copy of it. N/A	N/A
14.	I consent to my interview being audio/video recorded and understand that the recordings will be destroyed immediately following transcription.	
15.	I hereby confirm that I understand the inclusion criteria as detailed in the Information Sheet and explained to me by the researcher.	
16.	I hereby confirm that: (a) I understand the exclusion criteria as detailed in the Information Sheet and explained to me by the researcher; and I do not fall under the exclusion criteria.	N/A
17.	I agree that my GP may be contacted if any unexpected results are found in relation to my health. N/A	N/A
18.	I have informed the researcher of any other research in which I am currently involved or have been involved in during the past 12 months.	
19.	I am aware of who I should contact if I wish to lodge a complaint.	

20.	I voluntarily agree to take part in this study.	
21.	<p>Use of information for this project:</p> <p>I would be happy for the data I provide (anonymised and passworded transcriptions) to be archived by the principal researcher in their home for the duration of the project.</p> <p>I understand that other authenticated researchers will have access to my [anonymised] [pseudonymised] data. N/A</p>	
22.	Overseas Transfer of Data	N/A

If you would like your contact details to be retained **so that you can be contacted in the future by UCL researchers who would like to invite you to participate in follow up studies to this project, or in future studies of a similar nature, please tick the appropriate box below.**

	Yes, I would be happy to be contacted in this way	
	No, I would not like to be contacted	

Name of participant

Date

Signature

Serena Heller
Researcher

Date

Signature

**UCL RESEARCH ETHICS COMMITTEE
OFFICE FOR THE VICE PROVOST RESEARCH**

18th December 2018

Dr Lionel Bailly
Psychoanalysis Unit
Division of Psychology and Language Sciences
UCL

Dear Dr Bailly

Notification of Ethics Approval with Provisos

Project ID/Title: 14551/001: How does psychoanalysis understand gender identity, with a focus on trans men?

Further to your satisfactory responses to the Committee's comments, I am pleased to confirm in my capacity as Chair of the UCL Research Ethics Committee (REC) that your application has been ethically approved by the UCL REC until **10th April 2020**.

Ethical approval is subject to the following conditions:

Notification of Amendments to the Research

You must seek Chair's approval for proposed amendments (to include extensions to the duration of the project) to the research for which this approval has been given. Each research project is reviewed separately and if there are significant changes to the research protocol you should seek confirmation of continued ethical approval by completing an 'Amendment Approval Request Form'

<http://ethics.grad.ucl.ac.uk/responsibilities.php>

Adverse Event Reporting – Serious and Non-Serious

It is your responsibility to report to the Committee any unanticipated problems or adverse events involving risks to participants or others. The Ethics Committee should be notified of all serious adverse events via the Ethics Committee Administrator (ethics@ucl.ac.uk) immediately the incident occurs. Where the adverse incident is unexpected and serious, the Joint Chairs will decide whether the study should be terminated pending the opinion of an independent expert. For non-serious adverse events the Joint Chairs of the Ethics Committee should again be notified via the Ethics Committee Administrator within ten days of the incident occurring and provide a full written report that should include any amendments to the participant information sheet and study protocol. The Joint Chairs will confirm that the incident is non-serious and report to the Committee at the next meeting. The final view of the Committee will be communicated to you.

Final Report

At the end of the data collection element of your research we ask that you submit a very brief report (1-2 paragraphs will suffice) which includes in particular issues relating to the ethical implications of the research i.e. issues obtaining consent, participants withdrawing from the research, confidentiality, protection of participants from physical and mental harm etc.

In addition, please:

- ensure that you follow all relevant guidance as laid out in UCL's Code of Conduct for Research: <http://www.ucl.ac.uk/srs/governance-and-committees/resgov/code-of-conduct-research>
- note that you are required to adhere to all research data/records management and storage procedures agreed as part of your application. This will be expected even after completion of the study.

With best wishes for the research.

Yours sincerely



Dr Lynn Ang
Joint Chair, UCL Research Ethics Committee

Cc: Serena Heller

Acknowledgements

I would like to thank the following people for their supervision and support:

Lionel Bailly, Mignon Nixon, Melissa Midgen & Peter Hort

