

“An Unnamed Blank That Craved a Name”: A Genealogy of Intersex as Gender

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"An Unnamed Blank That Craved a Name": A Genealogy of Intersex as Gender

The fact that my gender has been problematized is the source of my intersexual identity.

—Cheryl Chase (1998a, 211)

What is the relation between intersex and dominant, residual, and emergent configurations of sex and gender? How might thinking critically about the norms, processes, and structures that regulate embodiment enable a critical rethinking of intersex, and vice versa? How do contestations over intersex converge and diverge with debates about the politics of difference and struggles for sexual and gender justice in a multicultural, transnational world?

This article engages these questions by tracing a genealogy of intersexuality's underrecognized but historically pivotal role in the development of gender as a concept in twentieth-century American biomedicine, feminism, and their globalizing circuits. Using a queer feminist science studies approach, I argue that intersex has been and remains central to the history of gender as a classificatory schema, object of knowledge, technology of subject formation, and paradigm of sociality in late modernity. This genealogy pushes beyond current scholarship on intersexuality to suggest that, while dominant understandings of sex and gender have overdetermined the meaning of intersex, historically speaking, the concept of intersex paradoxically preceded and inaugurated what we would today call the sex/gender distinction. Through a close reading of psychoendocrinologist John Money's biomedical research, I show that intersex was integral to the historical emergence of the category *gender* as

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distinct from *sex* in the mid-twentieth-century English-speaking world. I critique the heteronormative masculinism of Money's approach to intersex, but I also examine his lasting yet underinterrogated legacy in feminist scholarship from the second wave through the present. In this article's first section, I contextualize the terms of my argument. In the second section, I trace some relevant feminist rethinkings of sex and gender. In the third section, I explore Money's mid-twentieth-century research as a genealogical point of rupture wherein gender attained a meaning distinct from sex. I conclude by reflecting on what the intertwined histories of intersex, biomedicine, and feminism might mean for the field of women's and gender studies.

Gender in intersex studies, feminist theory, and biomedicine

In 1990, Suzanne J. Kessler published "The Medical Construction of Gender: Case Management of Intersexed Infants" in *Signs: Journal of Women in Culture and Society*. Ranked among the top twenty most cited *Signs* articles of the past two decades, Kessler's essay focalized a practice that was, up until the early 1990s, rarely discussed outside of specialized medical circles: the surgical normalization of infants born with sexual anatomies that society deems nonstandard. Analyzing interviews with physicians and the medical literature on intersex treatment, Kessler argued that "members of medical teams have standard practices for managing intersexuality that ultimately rely on cultural understandings of gender" (4). Pointing to clinicians' reliance on Money's optimal gender paradigm, which presumes that surgical normalization will foster conventional gender identities, Kessler underlined the ethical problems of the medicalization of intersexual difference. Noting that the vast majority of intersex "conditions" pose little or no health risk, she concluded that intersexuality "is 'corrected' not because it is threatening to the infant's life but because it is threatening to the infant's culture" (25), an argument she would reiterate in her 1998 monograph *Lessons of the Intersexed*.

Following Kessler's lead, during the past twenty years a small but growing number of scholars have made vital contributions to feminist and queer theory, science studies, bioethics, medical sociology, and debates about human rights and bodily integrity by showing that intersexuality challenges naturalized understandings of embodiment through analyses of the medical construction of sexual dimorphism.¹ As my language indicates, I am

¹ See Fausto-Sterling (1993, 2000), Hird (2000), Preves (2002, 2003), and Karkazis (2008).

interested in the implications of an unremarked discursive shift that began to manifest itself as this body of interdisciplinary research developed. In Kessler's wake, the analytic preoccupation of intersex studies was displaced almost immediately from gender to sex, as evidenced by the titles of works published following "The Medical Construction of Gender," such as *Sexing the Body* (Fausto-Sterling 2000), "Sexing the Intersexed" (Preves 2002), and *Fixing Sex* (Karkazis 2008). One could interpret this shift as a transition from the social back to the somatic, reading the emphasis on *sexing* as consonant with and influenced by the recognition of the limitations of the essentialism/constructionism divide and the consequent push to rethink the materiality of the body in 1990s feminist theory post-*Gender Trouble* (Butler 1990, 1993; Grosz 1994). But this alone does not explain why gender receded into the theoretical background of intersex studies as the field began to congeal. While Anne Fausto-Sterling, Sharon Preves, Katrina Karkazis, and others have undoubtedly sharpened critical perspectives on the medical and social treatment of people with intersex, and while their work hints at the importance of gender as a system of power, their accounts have largely focused on rethinking the sex side of the sex/gender distinction. For this reason, less attention has been paid to questions about the genealogical relation between intersex and gender, questions that were implicitly posed but not fully answered in Kessler's initial *Signs* essay, such as: What is the historical relationship between intersex and the sex/gender distinction? How has the sex/gender distinction shaped and been shaped by intersex?

The elision of these questions has been reinforced by an influential strain of intersex activism. Throughout the 1990s and 2000s the now-defunct Intersex Society of North America (ISNA) avowed that "intersexuality is primarily a problem of stigma and trauma, not gender."² With this claim, ISNA sought to reframe the terms of medical, scholarly, and popular discourses about intersex. As Iain Morland (2011) argues, this claim crucially "acknowledged that affected individuals—rather than their parents or doctors—are experts on their own genders" (156) and further suggested "that traditional treatment . . . often inadvertently creates trauma and thus fails by its own standards" (157). In this way, ISNA challenged the medical model of intersex management and that model's surgical equation of dimorphic genitalia with normative sex, promoting instead a patient-centered approach founded on intersex adults' critical reflections on their experiences of medicalization. Although this claim buttressed ISNA's opposition to nonconsensual genital surgery, it also

² See the ISNA webpage at <http://isna.org>.

obscured and, due to ISNA's lasting impact, continues to obscure the powerful role of gender in the development of modern intersex medicine and the sciences of sexual health more broadly. Before it became a key term in feminist discourse, before it came to signify the social construction of femininity and masculinity, gender was formulated in mid-twentieth-century American sexology as a diagnostic solution to the so-called medical emergency of intersex bodies, or "bodies in doubt," to borrow historian Elizabeth Reis's apt characterization (Reis 2009). The story of intersex is therefore not only, as ISNA asserted, a story about "shame, secrecy, and unwanted genital surgeries," a story about "stigma and trauma," but also a story about the regulation of embodied difference through biopolitical discourses, practices, and technologies of normalization that materialize in, through, and as gender.³

Contemporary intersex activists and scholars have taken Money to task for his perpetuation of intersexism and heteronormativity (Fausto-Sterling 2000; Holmes 2008). Paradoxically, however, as the medical model of intersex management that his research institutionalized came under fire in the 1990s and 2000s, the role of gender in that model has been dissimulated. While the medical and social treatment of people with intersex is not reducible to gender dynamics alone, the significance of gender for intersex, and vice versa, has yet to be fully recognized.

As Jennifer Germon argues, gender does in fact have a history, and "a controversial one at that" (2009, 1). In *Gender: A Genealogy of an Idea*, Germon draws on Bernice Hausman (1995) to argue that it was not until the mid-twentieth century that English speakers began using gender as an ontological category, a category said to denote masculine and feminine states of subjective being. In particular, Germon suggests that Money's influence on the career of the gender concept has been even more decisive than Kessler initially indicated. According to Germon, it was through the research Money undertook as a graduate student at Harvard University in the 1950s on hermaphroditism (a term he used interchangeably with intersex) and his subsequent experience treating intersex patients at Johns Hopkins University that the gender concept came to be recognized as an explanatory measure of human behavior in the biomedical and social sciences.

Germon's analysis of Money is not only critical but also reparative. To the degree that Money has become the proverbial archnemesis of the intersex movement, and insofar as scholars in intersex studies have sought to support intersex activists' arguments against coercive genital surgery,

³ Ibid.

Money has been frequently criticized but less often read closely. Germon counters this tendency, suggesting that Money was scarcely the hard-line constructionist his detractors paint him as. In addition, Germon argues that Money's ideas, despite their problematic investments in medical paternalism and the binary model of sexual difference, nevertheless manifest a strong interest in understanding nature and culture within a more complex interactionist framework.

My analysis converges with Germon's in exploring the enduring significance of Money's research and the centrality of the intersexed to the history and politics of gender. In an effort to deepen and extend Germon's argument, I argue not only that intersexuality played a crucial role in the invention of gender as a category in mid-twentieth-century biomedical and, subsequently, feminist discourses and that Money used the concept of gender to cover over and displace the biological instability of the body he discovered through his research on intersex. I also contend that Money's conception of gender produced new technologies of psychosomatic normalization. In contrast with Germon, my aim is not "to critically reinvigorate Money's gender" concept (2009, 3) but rather to more fully excavate the broad swathe of its regulatory power.

Rethinking sex and gender

With the exception of Germon and Hausman, the impact of Money's research on the development of the modern conception of gender has not received sustained feminist attention. This is striking because intersex has been linked to gender in feminist discourse since at least the early 1970s. In her 1972 monograph *Sex, Gender and Society* (which has been out of print for many years), British sociologist Ann Oakley argued that gender "is a matter of culture: it refers to the social classification into 'masculine' and 'feminine'" (16). As John Hood-Williams (1996) suggests, Oakley's sex/gender distinction "enabled an oppositional stance to biologisms that attempted to tie women to subordinate positions on account of a largely immutable biology" (1). Defining sex as biological and gender as cultural, Oakley drew her conception of the sex/gender distinction directly from the work of psychoanalyst Robert Stoller (1968) and psychoendocrinologist Money and his colleagues John Hampson and Joan Hampson (1955) in the endocrine clinic of the Johns Hopkins Hospital.⁴ Summarizing their research, Oakley writes, "While Stoller talks

⁴ Joanne Meyerowitz (2002) and Germon (2009) observe that Stoller himself adopted "gender" from Money's early work.

about ‘gender identity,’ Money and the Hampsons refer to ‘psychosexual orientation’: the meaning of both terms is the sense an individual has of himself or herself as male or female, of belonging to one or other group. The development of this sense is essentially the same for both biologically normal and abnormal individuals, but the study of the biologically abnormal can tell us a great deal about the relative parts played by biology and social rearing: there are a multitude of ways in which it can illuminate the debate about the origin of sex differences” (1972, 159). Oakley’s uncritical acceptance of the normal/abnormal distinction as a biological given reiterates a foundational epistemological presumption underlying Stoller’s and Money and the Hampsons’s research and biomedical research more generally: that humans may be naturally divided into clear and discernible normal and pathological types (Canguilhem [1943] 1991). In recent years, scholars in feminist, queer, critical race, disability, transgender, and intersex studies have shown this presumption to be culturally and politically motivated (Garland-Thomson 1997; Colligan 2004; McRuer 2006).

The pathologizing aspects of Oakley’s account become particularly evident in the way she frames intersexuality. Analyzing several case studies from Stoller’s work, Oakley argues that “parents’ attitudes in rearing” (1972, 160) have a strong effect on children’s gender presentations. She then turns to Money and the Hampsons, suggesting that “case studies of individuals, though fascinating, cannot alone support sweeping generalizations about the lack of identity between sex and gender. A large group of hermaphroditic patients have been studied by Money and the Hampsons, and in 95% of all the cases (totaling 113, which is a large number for this sort of abnormality) *the sex of rearing corresponded to gender identity*. Most significantly, the correspondence held even for those individuals whose sex of rearing contradicted their biological sex as determined by chromosomes, hormones, gonads and the formations of the internal and external genitals” (164). Oakley used Money and the Hampsons’s data on intersexual patients to forward a theory of gender’s social construction. If gender is socially constructed, Oakley hypothesized, then gender roles and inequalities are changeable. Of course, more recent studies of intersexuality and gender roles, including those examining the highly publicized case of David Reimer, would call into question Money and the Hampsons’s initial findings regarding the plasticity of gender (Diamond and Sigmundson 1997; Colapinto 2000; Butler 2004). From today’s perspective, it is possible to see the leap in logic underlying both Money and the Hampsons’s thesis and Oakley’s feminist appropriation of it. The claim that gender is constructed is not reducible to the claim that rearing has a monocausal effect on gender presentation or identification. According

to Vernon A. Rosario (2007), biology and culture intertwine in complex ways in the formation of gender identity. Contemporary work in feminist science studies, which I will examine shortly, has also reached this conclusion.

Working within a nature/culture paradigm that presumed the two terms to be strictly oppositional, Oakley put pressure on the culture side of the equation to stress that gender roles, notably those that perpetuate male domination and female subordination, were learned, not inborn. "Sex differences may be 'natural,'" Oakley postulated, "but gender differences have their source in culture, not nature" (1972, 189). By putting the "natural" in quotation marks, Oakley contended, as would many feminists who followed in her footsteps, that social structures perpetuate gender inequalities by naturalizing them as innate sex differences. While extremely valuable as a critique of the workings of patriarchal power, this argument was founded on at least two assumptions that later feminists would call into question: first, that sex is purely biological; and second, that sex and gender are naturally and normatively dimorphic. Thus, even as she challenged the claim that gender roles reflect innate differences between the sexes, Oakley simultaneously consolidated a binary understanding of gender as the basis of a feminist politics of women's liberation. Concluding that "the aura of naturalness and inevitability that surrounds gender-differentiation in modern society comes, then, not from biological necessity but simply from the beliefs people hold about it" (189), Oakley was unable to question the extent to which those beliefs are grounded in the presumption that binary ways of interpreting the world are natural and normal.

As some feminist theorists began arguing in the late 1980s and early 1990s, positing sex as the basis of gender fails to account for the socio-cultural constitution of biological sex itself.⁵ The feminist most cited for formulating this argument is Judith Butler, whose 1990 monograph *Gender Trouble* queried how the regulatory operations of what she called "the heterosexual matrix" (53) maintain various sexual hierarchies. Butler intervened in feminist debates over the sex/gender distinction by questioning the idea that biological sex is the foundation of cultural gender. Challenging the assumption that sex forms the natural substance onto which the social meaning of gender is written, Butler proposed that "gender ought not to be conceived merely as the cultural inscription of meaning on a pre-given sex (a juridical conception); gender must also designate the very apparatus of production whereby the sexes themselves are established" (7). In this view, gender is not simply a system of meanings im-

⁵ See Riley (1988), Fuss (1989), Wittig (1992), Elam (1994), and Wiegman (2002).

posed onto bodies but is rather an “apparatus of production,” a generative technology that naturalizes the illusion of a prediscursive sex. If “sex itself is a gendered category,” as Butler contends, then “sex” must be understood as a product rather than the cause or ground of gender (7).

In arguing that gender produces the discursive and cultural notion of sex, Butler was also suggesting that gender should not be conceived as a substantive identity but rather as a process, a kind of ongoing doing, what she calls “a constituted *social temporality*” (1990, 141). Gender, Butler powerfully proposed, is performative in the sense that it is tenuously constituted by the very acts that are said to merely express it. In Butler’s words, “the very notions of an essential sex and a true or abiding masculinity or femininity are also constituted as part of the strategy that conceals gender’s performative character and the performative possibilities for proliferating gender configurations outside the restricting frames of masculinist domination and compulsory heterosexuality” (141). Butler’s influential work contrasts with Oakley’s precisely because it contests the presumption of natural sexual dimorphism by using a poststructuralist framework to destabilize foundationalist accounts of nature (Butler 1993, 2004).

Since the publication of *Gender Trouble*, feminist scholars have problematized the theoretical underpinnings of the sex/gender distinction by attending to the ways in which sex and gender fail to neatly align with each other and with the nature/culture distinction within and across a variety of historical and contemporary contexts (Wiegman 2007). Butler is just one example of a feminist theorist who has productively troubled the presumed coherence and stability of the sex/gender distinction. More recent theorists, especially those working between feminist, queer, and transgender studies, including Judith Halberstam (2005), Gayle Salamon (2008), and Jean Bobby Noble (2006), have used, even as they have transformed, prior feminist analyses of sexual and gendered hierarchies into occasions for the radical denaturalization of both gender and sex. In this context, it seems important to note that the denaturalization effort would be impossible without the ongoing critique of the production of hierarchies based on sex and gender.

In recent years, there has also been what some have called a return to biology in feminist theory. Anne Fausto-Sterling (2000), Elizabeth A. Wilson (1998, 2004), Karen Barad (2007), Deboleena Roy (2008), and others (Oyama, Griffiths, and Grey 2003) have asked what happens when feminist theory goes beyond a critique of the sciences and takes biological material and scientific practice seriously. Most pertinent to my analysis here is Fausto-Sterling’s work. In *Sexing the Body* (2000), Fausto-Sterling investigates how various scientific disciplines—endocrinology, genetics,

neuroscience, and other fields—produce knowledge about gender, sex, and sexuality, and she argues against the dualisms of nature/culture, sex/gender, male/female, and heterosexuality/homosexuality. Fausto-Sterling suggests that accounts of embodiment cannot afford to discount biological processes, yet she simultaneously stresses that biological processes are not exterior to culture. Reading biological data through feminist theory to contest sexual dimorphism, Fausto-Sterling also implicitly foregrounds the regulatory character of gender as a system of power: “Our bodies are too complex to provide clear-cut answers about sexual difference. The more we look for a simple physical basis for ‘sex,’ the more it becomes clear that ‘sex’ is not a purely physical category. What bodily signals and functions we define as male or female come already entangled in our ideas about gender” (4). Suggesting that sex cannot be definitively disentangled from gender, Fausto-Sterling turns to the history of the medicalization of people with intersex to show that scientific research is influenced by culture, that both shape how bodies come to matter: “Intersexuals, seen as deviations from the norm who need to be ‘fixed’ in order to preserve a two-gender system, are also studied [by medical professionals] to prove how ‘natural’ the system is to begin with” (74). Fausto-Sterling’s analysis of this contradiction, and of the medical and sociopolitical history of intersexuality more generally, demonstrates that science does not merely reflect but actually contributes to the production of cultural norms through its own supposedly value-free practices.

Fausto-Sterling and other feminist science studies scholars have offered important reconsiderations of entrenched epistemic paradigms in both the sciences and feminist theory. Moreover, their work challenges the mind/body and nature/culture dualisms in ways that differ significantly from Butler’s. Rather than privileging discursivity, they adopt a developmental systems theory approach that frames biology and culture as tied together in a multidimensional feedback loop. This innovative interdisciplinary approach reemphasizes the vital role women’s and gender studies can play in transforming the disciplinary and epistemic divides that structure the contemporary university.

The literature reviewed above illustrates some of the diverse ways feminists have rethought sex and gender. In the next section of this essay, I suggest that feminist conceptualizations of the relation between sex and gender provide a critical basis for understanding how mid-twentieth-century medical specialists formulated what would become the dominant paradigm of intersex treatment and for critically rethinking the body politics of sex and gender normativities.

Gender in Money's research

Lurking behind this feminist story is the figure of John Money. As the inventor of the term *gender role*, Money's work brings into focus the role of intersex as an origin of *gender* and of the sex/gender distinction. Indeed, as I will suggest, thirty-five years before *Gender Trouble*, Money posited gender as prior to sex.

Although the *Oxford English Dictionary* attributes the formulation of gender as a concept that emphasizes the social and the cultural to Oakley, the term gender actually began to crystallize as a category with a meaning distinct from biological sex in English at least twenty years earlier.⁶ As Hausman (1995) and Germon (2009) observe, gender first emerged as an explicit object of inquiry in the behavioral and hard sciences in the mid-1950s, specifically in Money's psychobiological research. Hausman argues that Money's research produced "a discourse about the body and human identity in sex that became powerful both as a justification for medical practices and as a generalized discourse available to the culture at large for identifying, describing, and regulating social behaviors" (107). That discourse hinged on a particular conceptualization of gender that played a key role in justifying surgical normalization within intersex medicine and, more broadly, became a technology for regulating human behavior and embodiment writ large.

While studying the relation between endocrine functions and psychological states of hermaphroditism at Harvard in the 1950s, Money coined the term *gender role* as a diagnostic category and treatment protocol for patients whose anatomical configurations were regarded as unintelligible within the dominant frame of dimorphic sex. For people with intersex characteristics, whose bodies Money read as improperly sexed, *gender role* became a way for Money to predict and, as we will see, to literally fashion the sex they were "supposed" to have all along. Money's typical scientific approach used the abnormal to find and define the normal. His work on intersex helped to popularize the view that gender is central to the sexual health of persons in general.

Money first made reference to his theory of gender in a 1955 article published in the *Bulletin of the Johns Hopkins Hospital* titled "Hermaphroditism, Gender and Precocity in Hyperadrenocorticism: Psychologic Findings." In that paper, Money would later write in a 1995 essay, "the word *gender* made its first appearance in English as a human attribute, but it was not simply a synonym for *sex*. With specific reference to the

⁶ *Oxford English Dictionary*, 2nd ed. (1989), s.v. "gender": see 3.b (first-use citation 1963).

genital birth defect of hermaphroditism, it signified the overall degree of masculinity and/or femininity that is privately experienced and publicly manifested in infancy, childhood, and adulthood, and that usually though not invariably correlates with the anatomy of the organs of procreation” (1995b, 18–19).

This passage is taken from a retrospective essay Money wrote on his life’s work titled “Lexical History and Constructionist Ideology of Gender.” It is the opening chapter of his collection of essays *Gendermaps* (1995a), where Money defends the science of psychosexual research against charges from feminists and social constructionists. In his 1995 language, Money calls hermaphroditism a “genital birth defect,” and this pathologizing rhetoric figures hermaphroditism as a problem of genital formation. However, in his earlier work Money clearly recognized the existence of a variety of intersex conditions that are irreducible to considerations of genital formation (Money 1980). This reductionism reveals that what Morgan Holmes calls “genital determinism” (2008, 69) came to play a significant role in Money’s later thinking.

In their influential textbook *Man and Woman, Boy and Girl* (1972), Money and Anke E. Ehrhardt offer a more general theory of hermaphroditism, claiming that the terms hermaphroditism and intersex can be used interchangeably to “mean . . . that a baby is born with the sexual anatomy improperly differentiated. The baby is, in other words, sexually unfinished” (5). Two presuppositions ground this claim: first, that sexual anatomy has a proper mode of differentiation that, second, constitutes a complete or finished form of sexual dimorphism. In addition, in labeling intersex infants “sexually unfinished,” Money and Ehrhardt reveal the persistence of a commonplace medico-scientific attitude toward abnormality analyzed by Michel Foucault in *Abnormal* (2004). In his genealogy of abnormality in Western culture, Foucault observes that by the eighteenth century hermaphroditism was no longer understood as a breach of nature but rather as a defective structure. This view allowed European medical practitioners to articulate their role in regard to hermaphroditism as not simply diagnostic but as corrective or normalizing. In accordance with this view, Money and Ehrhardt’s understanding of intersex was not only pathologizing but also structured by a spatial and temporal logic of human development whose telos is wholeness. As several critics have pointed out, this perspective is problematic in terms of its heteronormative and sexually dimorphic ideological biases.⁷ It is also

⁷ See Chase (1998b), Kessler (1998), Fausto-Sterling (2000), and Holmes (2008).

fundamental to the logic of normalization Foucault discusses as emerging in the late eighteenth century in *Abnormal*.

These presuppositions were evident in Money's work from the start. Money first became acquainted with hermaphroditism in the Harvard psychological clinic, where he wrote his PhD dissertation on "Hermaphroditism: An Inquiry into the Nature of a Human Paradox" (1952). For his dissertation, Money conducted ten case studies with interviews and collected 248 cases from a medical literature review to show that "psychosexual orientation bears a very strong relationship to teaching and the lessons of experience and should be conceived as a psychological phenomenon" (7). By "psychosexual orientation," Money meant "libidinal inclination, sexual outlook, and sexual behavior" (5). In "Lexical History and Constructionist Ideology of Gender," Money quotes his dissertation at length to reveal how his studies of hermaphroditism generated for him the following problem: "For the name of a single conceptual entity, there are too many words in the expression 'libidinal orientation, sexual outlook, and sexual behavior as masculine or feminine in both its general and its specifically erotic aspects.' The challenge to give a unitary name to the concept embodied in these many words became pressing after my case load of hermaphrodites studied in person had, after 1951, expanded from ten to sixty in Lawson Wilkins's Pediatric Endocrine Clinic at the Johns Hopkins Hospital, at which time a concise report of the findings became essential" (1995b, 20). Studying individuals with anatomical configurations he regarded as anomalous, Money initially and inadvertently proliferated diagnostic categories; his research generated, he says, "too many words." This excess of signification highlights the degree to which intersexuality troubled the symbolic resources of Money's biomedical episteme. To overcome the discursive proliferation that his studies of intersexuality inaugurated, Money went in search of "a unitary name." In short, Money sought to establish an exhaustive, monolithic taxonomy to explain and contain the discursive excess generated by hermaphroditism. Money's project was to produce a coherent medical science of the abnormal along the lines discerned by Foucault.

Money's dissertation suggested that psychosexual orientation is shaped by social and psychological factors, and in forwarding this thesis Money was staging an argument with previous psychologists and sex researchers who held that psychosexual orientation was biological and innate. In the 1950s, a time when biological determinism, while contested, was still dominant in the hard sciences (Meyerowitz 2002), Money's insistence that masculinity and femininity could not be reduced to biology alone remains quite remarkable. Summarizing his post-1951 findings, Money

explains in “Lexical History and Constructionist Ideology of Gender” that:

the first step was to abandon the unitary definition of sex as male or female, and to formulate a list of five prenatally determined variables of sex that hermaphroditic data had shown could be independent of one another, namely, chromosomal sex, gonadal sex, internal and external morphologic sex, and hormonal sex (prenatal and pubertal), to which was added a sixth postnatal determinant, the sex of assignment and rearing. . . . The seventh place at the end of this list was *an unnamed blank that craved a name*. After several burnings of the midnight oil I arrived at the term, gender role, conceptualized jointly as private in imagery and ideation, and public in manifestation and expression. (Money 1995b, 21; emphasis added)

The “hermaphroditic data” led Money to the hypothesis that biological sex is itself radically unstable, composed of heterogeneous elements that do not add up to a unitary conceptual entity. Reckoning with this instability produced for Money a problem of language and reference, a problem of naming (earmarked by his peculiar tautology “an unnamed blank”). The “unnamed blank that craved a name” that Money refers to in this passage can be read as a displacement of the biological instability exposed by intersexuality. In other words, in recognizing a list of prenatally and postnatally “determined variables of sex that hermaphroditic data had shown could be independent of one another,” Money’s research dismantled the unitary conception of sex and, in so doing, produced an “unnamed blank” at the site of the body. This “unnamed blank” threatened the very semblance of sex. To contain that threat, Money filled the blank with gender. Put differently, Money used gender role to name and thereby semantically fill (or cover over) the void left by sex’s lack of conceptual and referential unity. As Germon puts it, “at a pragmatic level, gender provided a solution to the uncertainty of any absolute somatic sex. Gender served to stabilize what advances in medical technology had rendered more and more unstable during the first half of the twentieth century” (2009, 25).

While *gender role* offered stability where technology’s destabilization of sex was concerned, it also gave Money a linguistic means to contain the discursive proliferation (“too many words”) occasioned by his research on intersex. By giving the “unitary name” *gender role* to the “unnamed blank,” Money introduced a seemingly coherent sign where he previously

had found only unstable, discontinuous elements. Moreover, Money anthropomorphizes the “unnamed blank”—he attributes to it the “craving” for “a name”—making it seem as if the unnamed blank were itself a subject of desire, longing for epistemic certainty and representational unity, yearning, in short, for someone to give it a name. Giving the “unnamed blank” the name *gender role*, Money proceeds as if that naming could guarantee a relation of referential coherence between word and inchoate object. This anthropomorphism dissimulates Money’s own medico-scientific craving for epistemic positivity. By figuring *gender role* as the name craved by the unnamed blank, Money thus overrides and conceals intersexuality’s undoing of the structure and stability of sexual dimorphism and makes the internal and external manifestation of masculinity or femininity the pinnacle of his classificatory schema.

In defining *gender role* in terms of interior and exterior expression as masculine or feminine, Money was extrapolating from what feminist political theorists would later argue is a gendered political construction through and through: the public/private distinction that emerged in the Western world in eighteenth-century social contract theory (Pateman 1988). Treating this uninterrogated public/private distinction as an abiding feature of gendered subjectivity, Money recognized that gender role’s unity was not a given. One could privately identify as feminine yet publicly manifest a masculine identity, or vice versa. This apparent contradiction suggested to Money that gender role was acculturated and imprinted at multiple levels of a person’s psychosexual orientation and that these levels were not automatically coherent with one another. Money believed that psychoendocrinology could resolve this potential incoherence. Medical technology, he posited, could produce what nature could not guarantee: the unity of interior and exterior expressions of gender.

This helps to explain why Money approached “gender role,” as he says in the above passage, as a “variable of sex.” That is, though Money disaggregated gender role from sex, he also posited a structural connection between them. As the term *variable* indicates, gender role signified for Money not only “masculine or feminine inclination, outlook, and behavior” but also the prospective sex that is supposed to coincide with a particular gender role. In this way, Money posited gender role as a predictive agent to determine the hermaphrodite’s sex. In short, long before Butler, Money proposed that gender precedes sex.

In contemporary feminist theory, the postulation of gender as prior to sex has been a touchstone for antifoundationalist accounts of embodiment. For Butler, for instance, the reversal of the conceptual polarity of the sex/gender distinction represents the first subversive gesture in a two-pronged

deconstructive movement of reversal and displacement. It is crucial to recognize, however, that Money's superordination of gender over sex was not a subversive gesture but rather a regulatory one. By determining a hermaphroditic infant's prospective gender role, Money was then retroactively able to determine the infant's sex as male or female, and this is why his treatment recommendations centered on surgical, hormonal, and psychosocial normalization. In using "gender role" to fill the "unnamed blank" intersexuality represented, Money attempted to make individuals born with intersex characteristics fit into normative schematizations of the roles conventionally embodied by people with dimorphic sex. At the very moment when his research pointed toward potentially radical instabilities between gender and sex—and within gender and sex themselves—Money erased those possibilities by reducing gender to the performance of the roles he thought dimorphic sex *should* entail. As Hausman points out, what Money "argued, in effect, was that those subjects unable to represent a sex 'authentically' could simulate one through adequate performances of gender that would fix one's identity irrevocably in a sex category. In other words, if you aren't born into a sex, you can always become one through being a gender" (1995, 107). Although I agree with Hausman that Money used gender to restabilize sex, my analysis diverges from hers on the question of gender's so-called authenticity.

For Hausman, "the idea of gender" is a discursive construction of psychiatry. Hausman further suggests that gendered interiority is a product of technology and discourse and is therefore artificial (1995, 200). In his critical review of *Changing Sex*, Rosario rightly challenges Hausman on this point. Rosario argues that Hausman ultimately "relies on a rigid internalist, technological-determinist historiography" (1996, 245). Rosario further contends that "it is hard to give full credit to Money for inventing gender identity when late-nineteenth-century doctors, such as the Italian forensics expert Arrigo Tamassia, clearly defined the conflict between psychological gender identity and physical sex appearance in certain cases of 'sexual inversion': 'the individual, although recognizing himself of a given sex, psychologically feels all the attributes of the opposite sex' [Tamassia 1878, 99]. (Tamassia, of course, like the Italians and French of today, lacked a linguistic means of making the current, English 'sex'/'gender' distinction)" (Rosario 1996, 244). In Rosario's view, the category gender need not explicitly exist as such in a particular culture's language for the sex/gender distinction to be operative in that culture. While I would concede the plausibility of this point and willingly acknowledge that *gender* can be traced back to multiple points of origin, attention to the particular conceptualization of gender advanced by Money and

adopted by Oakley nonetheless highlights a crucial linkage between mid-twentieth-century biomedical and feminist discourses that Rosario leaves unremarked.

As Morland notes in his introduction to the 2009 special issue of *GLQ*, “Intersex and After,” the role of gender in the development of intersex treatment, and in Money’s research in particular, remains contentious. In the paragraph from his 1955 article “Hermaphroditism, Gender, and Precocity in Hyperadrenocorticism” in which the term first appeared, Money theorized *gender role* as pertaining specifically to the way in which behavior cannot be causally linked to biological sex: “Cases of contradiction between gonadal sex and sex of rearing are tabulated . . . together with data on endogenous hormonal sex and gender role. The term gender role is used to signify all those things that person says or does to disclose himself or herself as having the status of boy or man, girl or woman, respectively. It includes, but is not restricted to sexuality in the sense of eroticism” (1955, 254). Money then offered the following summary conclusion, which I quote at length:

Chromosomal, gonadal, hormonal, and assigned sex, each of them interlinked, have all come under review as indices which may be used to predict an hermaphroditic person’s gender—his or her outlook, demeanor, and orientation. Of the four, assigned sex stands up as the best indicator. Apparently, a person’s gender role as boy or girl, man or woman, is built up cumulatively through the life experiences he [*sic*] encounters and through the life experiences he transacts. Gender role may be likened to a native language. Once ingrained, a person’s native language may fall into disuse and be supplanted by another, but it is never entirely eradicated. So also a gender role may be changed or, resembling native bilingualism may be ambiguous, but it may also become so deeply ingrained that not even flagrant contradictions of body functioning and morphology may displace it. (Money 1955, 258)

Historically linked with the concepts of ethnicity and the mother tongue, a native language is the first language one learns. It is learned, but almost as soon as it is learned, it becomes habitual, reflexive, deeply rooted, “ingrained,” to use Money’s term, almost as if it were natural. Ingrained means “firmly fixed,” but the term also refers to a type of yarn, dyed before weaving, used to make reversible carpets. Analogizing gender with a native language and emphasizing gender’s ingrainedness, Money figures gender as both text and textile. Texts are of course literally stitched

of fibers. But every textile is also a social text (Spivak 1999). Money's analogy positions gender as dynamic object. Formed over time, related to but not fully determined by both biology and culture, changeable under certain conditions but not always intentionally so, gender's shape, stability, and permanence have no guarantees. Yet Money implies that Western biomedicine can comprehend this object through scientific study and thereby attempt to mold it.

In analogizing gender with text and textile, Money was not only contemplating gender's moldability but also simultaneously prefiguring and effacing one of the lessons of poststructuralist feminisms: that gender is structured like a language, a system of differences without positive terms (Saussure [1916] 1998; Johnson 1987). If gender is like a language, then gender is not only a relational system but also a system where the meaning of any given term is both arbitrarily and negatively determined. But Money forecloses this insight by positing the existence of proper, positive binary terms as the ground of the system: "*his* or *her* outlook, demeanor, and orientation." Money's normative dimorphic prerogative and his investment in the propriety of binary logics come together to privilege heteronormative masculine and feminine roles and bodies as regulatory ideals, over and above alternative possibilities of comportment, identification, and embodiment.

Money's reference to "native bilingualism" as "ambiguous" is also noteworthy. The figure marks native bilingualism as indefinite, unclear, and confusing, when in fact native bilingualism just means that a person grows up speaking two languages. Bilingualism opens up opportunities for translation, raises questions about linguistic and cultural difference, and reveals the promise of border crossing. It destabilizes those nations and cultural traditions that privilege the idioms of monolingualism and ethnocentrism (Derrida 1998). Money codes categories and bodily configurations that trouble expected boundaries and forms, disrupt cultural norms and preconceptions, and challenge ideas of sovereignty and wholeness as a threat to intelligibility. As with the "unnamed blank" analyzed above, Money's diagnostic effort becomes regulatory, an effort to contain that which generates ambiguities and proliferates languages and meanings.

The regulatory aspect of Money's work is especially apparent in the gendered language that shapes the passage I have been reading. Between the first and third sentence, there is a grammatical shift from *his* or *her* to *he*. The first sentence reads, "Chromosomal, gonadal, hormonal, and assigned sex, each of them interlinked, have all come under review as indices which may be used to predict an hermaphroditic person's gender—*his* or *her* outlook, demeanor, and orientation." The third sentence reads: "Apparently, a person's gender role as boy or girl, man or woman,

is built up cumulatively through the life experiences *he* encounters and through the life experiences *he* transacts.” Here, Money switches to the masculine singular pronoun, using it as the general form of personhood. This usage reveals the masculinism, or, more precisely, the masculine universalism that guides Money’s project, a masculine universalism evident not only at the level of grammar but also in the conceptual transition from hermaphroditism to binary gender. Money resolves the tension between his binary grammar and the destabilization and multiplication of sexes and sexed subject positions inaugurated by his research on intersexuality by privileging the masculine singular pronoun as the signifier of universal personhood.

This masculinism was central to Money’s deployment of gender role as a category of prediction: “Chromosomal, gonadal, hormonal, and assigned sex, each of them interlinked, have all come under review as indices which may be used to *predict* an hermaphroditic person’s gender—his or her outlook, demeanor, and orientation.” By disaggregating gender role from biological sex, Money was able to interpellate an intersex person’s psychosexual orientation in terms of the dominant ideological tropes of masculinity and femininity regardless of the individual’s morphological “sex.” This disaggregation also provided Money with a paradigm of treatment. By the mid-twentieth century, the discipline of surgery had advanced to the point where doctors could perform surgical sex reassignments (Meyerowitz 2002). Yet sex reassignment could only be framed as medically necessary if it could be shown that an intersex infant’s psychosocial orientation could be predicted. Money’s theory of gender role filled precisely that gap. He theorized sex as surgically malleable and gender as socially plastic to maintain the binary order of things.

In devising a course of treatment for intersexuality, Money, along with fellow researchers at the Johns Hopkins Psychohormonal Research Unit, formulated what has come to be known as the optimal gender paradigm. They held that “the sex of assignment and rearing is consistently and conspicuously a more reliable prognosticator of a hermaphrodite’s gender role and orientation than is the chromosomal sex, the gonadal sex, the hormonal sex, the accessory internal reproductive morphology, or the ambiguous morphology of the external genitalia” (Money, Hampson, and Hampson 1957, 333). As Rosario explains, the Hopkins team “argued that infants born with ambiguous genitalia could be surgically ‘corrected’ and then successfully raised as either males or females so long as certain conditions were met” (2007, 267). These conditions included gender assignment before the age of eighteen to twenty-four months; that parents strictly enforced the gender of rearing; and that the children were “not confused by knowl-

edge about their intersexed past” (267). According to Alice Dreger and April Herndon, the optimal gender paradigm “held that *all* sexually ambiguous children should—indeed must—be made into unambiguous-looking boys or girls to ensure unambiguous gender identities” (2009, 202). In other words, if gender is like language, and gender instability (changing genders) is like native bilingualism, Money’s ultimate goal was to eradicate ambiguity in the name of promoting monolingualism. This seems to resolve the problems of both discursive excess (“too many words”) and linguistic inadequacy (“an unnamed blank that craved a name”).

In recommending that intersex infants be treated with a combination of normalizing genital surgeries, hormonal treatments, and psychosocial rearing into the “optimal gender,” Money and his colleagues essentially designed a program of sex *and* gender normalization. This program of normalization can also be understood as a refinement of the masculinism (disguised as grammatical) inherent in Money’s privileging of the masculine pronoun. As Katrina Karkazis points out, Money and other intersex medical specialists’ intentions were, to some degree at least, beneficent: “Raising a child with a gender-atypical anatomy (read as gender ambiguity) is almost universally seen as untenable in North America: anguished parents and physicians have considered it essential to assign the infant definitively as male or female and to minimize any discordance between somatic traits and gender assignment” (2008, 7). Money and the Hopkins team thought that their treatment protocols would help intersex children to live “normal” lives. Intersex activists and scholars have criticized these protocols, however, for inflicting physical and psychological trauma and upholding an unjust system of bodily and psychical regulation (Holmes 2008).

The ethicopolitical critique of the medical management of intersex can be strengthened, I would suggest, by supplementing it with the genealogical critique of gender. Whereas the ethicopolitical critique underscores medicine’s failure to uphold the Hippocratic oath (“first do no harm”), the genealogical critique foregrounds linkages between the medical management of intersex and the biopolitical regulation of embodied difference more broadly. At the level of activist strategizing, making these connections visible could expose the limitations of an exclusive focus on patient-centered health care (which tends to frame the patient primarily as a neoliberal consumer; Grabham 2007) and might enable the adoption of a more expansive vision of sexual and gender justice for a multicultural, transnational world.

One activist group that has taken some steps in this direction is Organisation Intersex International (OII), which has board members in twenty-one countries across the globe. OII recognizes that the medicalization of

intersex is distinct from but related to the medicalization of transgender and disability, the stigmatization of queerness, and other forms of corporeal normalization. Responding to medical professionals' and some activists' recent embrace of the term *DSD* (disorders of sex development) in place of *intersex*, members of OII have created posters and broadsides that contest the DSD nomenclature. One declares, "Sorry, We're Not Disordered," while another contains a "Warning" sign and skull and crossbones placed next to text that reads: "DSD: Death to Sex Differences. DSD = Eugenics, DSD = Heterosexism, DSD = Transphobia, DSD = Homophobia."⁸ OII's intersectional critique of the DSD nomenclature frames the medicalization of intersex as fundamentally linked with multiple, overlapping systems of power-knowledge. Adopting a human rights approach to intersex, OII counters medicalization by promoting the values of anatomical diversity, bodily integrity, and informed consent.

If the ethicopolitical critique stresses the human rights of intersex individuals, the genealogical critique adds a historical dimension to this emphasis. It shows how deeply invested—and deeply troubled—the medical model has been in its quest to contain anatomical variation and the threat such variation poses to the epistemic and somatic certainty of dimorphism. Recalling with Foucault that there is no outside to power relations, and recognizing that gender is not merely a repressive technology but also a productive one, the challenge is to imagine strategies for expressing human potential in ways that can embrace uncertainty (Morland 2006) and enhance practices of freedom without consolidating the psychosomatic harms of gender regulation.

Conclusion

Through Money's work, gender became one of the cornerstones of the modern medical management of intersex. In *Gender Trouble*, Butler observes that "the mark of gender appears to 'qualify' bodies as human bodies; the moment in which an infant becomes humanized is when the question, 'Is it a boy or girl?' is answered. Those bodily figures who do not fit into either gender fall outside the human, indeed, constitute the domain of the dehumanized and the object against which the human itself is constituted" (1990, 111). Seen in this light, Money's project essentially concerned the humanization of people with intersex, and it unwittingly revealed how dehumanizing humanism can be for those born with anatomies that do not conform to a mythical norm (Morland 2007). Although

⁸ See http://www.intersexualite.org/DSD_warnings.html.

Money's work has been questioned in recent years, many clinicians continue to follow his guidelines, viewing intersex infants as corporeally unintelligible at the moment of birth, only to immediately transport them into intelligibility through surgical, medical, and psychosocial normalization. As my analysis has shown, these bodily interventions follow the strict, masculinist-as-universalizing, binary constraints of a cultural grammar. Most parents and doctors are so overly invested in the question "Is it a boy or girl?" that they cannot imagine a world of other possibilities.

To begin imagining those possibilities, it seems imperative to acknowledge that, despite significant differences in epistemological and socio-political orientation, aim, and method, contemporary feminist and biomedical discourses continue to share an investment in the presumption of gender's plasticity. While second-wave feminists theorized the social construction of gender to critique the determinist fallacy that "anatomy is destiny," feminist and queer scholars have more recently pushed at the limits of gender constructionism, asking whether the very frame of binary gender naturalizes heteronormativity, sexual dimorphism, and the relations of power that underlie those structures. In the process, the lines between feminist and queer projects have become productively blurry or plastic themselves. Meanwhile, since the 1950s, biomedical experts in intersex treatment have sought to rewrite the destiny of anatomy, using surgery, endocrinology, and psychosocial counseling to compel people with "atypical" bodies to conform to the regulatory codes of sexually dimorphic and heteronormative ideals. Paradoxically, then, Money and the physicians who came to widely embrace his paradigm during the twentieth century used the presumed plasticity of psychosocial gender and the surgical malleability of anatomical sex to reinforce the very ideologies that feminist and queer thinkers have attempted to contest by theorizing the plasticity of gender, sex, sexuality, and embodiment more generally.

When Oakley appropriated gender from Money to articulate a feminist project that would liberate women from biological determinism, she set into motion a historical process whose ramifications continue to reverberate in feminist discourse and practice today. Considering her political aims, it is perhaps understandable that Oakley reduced gender to its most binary formulation, but the costs of this reduction were considerable. Intersexuality's place in the invention of gender has been largely erased from feminism's historical archive. While feminists have thoroughly demonstrated that gender role, gender identity, and gender as a system of power are neither equivalent with one another nor reducible to a common denominator (Lorber 1994), their different meanings remain contingent, at least in part, on the history of the medicalization of intersexuality.

In conclusion, I would propose that the omission of intersexuality's role in the development of the gender concept from the historical narrative of contemporary feminism is problematic because it conceals a profoundly unsettling paradox. On the one hand, the concept of gender enabled feminists from the 1970s onward to bolster critiques of biologism and essentialism, refine oppositional analyses of patriarchal systems, and underline the social and political foundations of inequalities between women and men. On the other hand, the term and concept of gender was born out of a regulatory, normative, and masculinist project—the medical management of intersexuality—that masked itself through the humanist language of the betterment of all peoples. In short, when the concept of gender as social is perceived as liberatory, an important aspect of the concept's history is lost. Specialists in intersex medicine have used the gender concept primarily as a technology for the corporeal and psychosocial regulation of people with nonstandard anatomies in the name of recuperation and healing (Chase 1998a). Registering this paradox entails grappling with gender's polysemy, incoherence, and uneven effects. Simultaneously a vector of identification and disidentification, inclusion and exclusion, empowerment and coercion, subjectification and subjection, gender has many different gatekeepers and stakeholders, and the stakes of gender, various as they are, are rooted in the politics of difference.

This is precisely why a genealogical approach to the messy relations between bodies and the words and practices that name them is so important. As I have shown here, intersex troubles gender not only conceptually but also genealogically. A critical attention to the history of intersex disrupts and displaces gender's presumed coherence and meaning; reveals that gender cannot be reduced to a transhistorical given or a purely descriptive category; calls attention to the power relations that transect the lives of people whose bodies have been marked as gender's constitutive outside; and underscores the historical processes, antagonisms, and complicities that have shaped the development of gender as a concept, object of knowledge, paradigm of sociality, and technology of subject formation. Thus, far from being a marginal topic, subfield, or esoteric specialization of inquiry within women's and gender studies, intersex is actually central to the history of the analytic categories that have fundamentally shaped the diverse intellectual trajectories, paradigms, pedagogies, and politics of the field. Intersex literally gave birth to gender.

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