Trans(Formative) Relationships: What We Learn About Identities, Bodies, Work and Families from Women Partners of Trans Men

by

Carla A. Pfeffer

A dissertation submitted in partial fulfillment of the requirements for the degree of Doctor of Philosophy (Sociology) in the University of Michigan 2009

Doctoral Committee:
Professor Esther Newton, Co-Chair
Associate Professor Karin A. Martin, Co-Chair
Professor Pamela J. Smock
Assistant Professor Anna R. Kirkland
This dissertation is dedicated to (and a product of) Adversity, Change, Gratitude, Sorrow, and Acceptance... the cruelest, most wonderful, and inspiring teachers I will ever know.

Never underestimate the healing powers of bass and cupcakes.
Acknowledgements

The process of constructing this dissertation—from talking to idea generating, class attending, literature reviewing, IRB applying, grant writing, protocol developing, proposal writing, proposal defending, interview piloting, protocol revising, participant recruiting, participant screening, interview scheduling and rescheduling, participant consenting, participant interviewing, participant compensating, participant corresponding, interview recording (and all of its attendant mishaps), interview transcribing, transcript reading, memo writing, trial-and-error analytic software learning, workshop attending, conference presenting, data coding and recoding, data analyzing, paper writing, editing, and rewriting, “darlings killing,” chances taking, mainstream consumption translating, worrying, crying, laughing, taking it all too seriously, procrastinating, not taking it all seriously enough—involved LOTS of people to whom I am deeply indebted.

The fifty women I interviewed for this study related their experiences to me with eloquence, candor, trust, humor, stumbling starts and thoughtful, painful pauses. Their stories are reflected here in brief snapshots and I remain indebted to them for sharing rich narratives for me to weave and patch into articles, chapters, PowerPoint presentations, manuscript drafts, conference talks, elevator conversations and more. I hope that my translations of these narratives will serve most of them in some useful way somehow. I am particularly thankful to J.B. for her work connecting me with potential research participants scattered across the United States and Canada.

This work has been read more carefully, more often, and with more loving patience and constructive critique, by the members of the Gender and Sexuality in Sociology Study Group (GSSSG) at the University of Michigan: Laura E. Hirshfield, David J. Hutson, Emily A. Kazyak, Katherine P. Luke, Zakiya Luna, and Kristin S. Scherrer. Finishing this dissertation is bittersweet. It represents the culmination
of what has been the most energizing, sustaining, long-lived, and useful collaborative project I have undertaken during graduate school. It also represents moving onward and away from this beautifully insightful, brilliant, and kind group of people whose laughter and sweet faces I will be missing for a very, very long time to come.

I am grateful to the transcriptionist for this project, Deborah K. Apsley. Debbie reliably and accurately transformed hours and hours of audio recordings into thousands of pages of data. Her toil and patience kept me sane and allowed me to dedicate my time and focus to data analysis and writing.

I am also thankful for the methodological critiques and feedback offered by members of the Rackham Interdisciplinary Workshop for Qualitative Researchers in the Social Sciences: Nancy M. Baum, Haijing Dai, Brian J. Girard, Brian Hilligoss, Pilar S. Horner, Karmen T. Kizzie, Anat H. Levtoy, Yan Long, Airong Luo, Katherine P. Luke, Maria L. Souden, and Jeannie S. Thrall.

Esther Newton kept me on my toes and looking out for blind spots. She is clear and reflective on what it means to stand as a pioneer in disciplines and structures that are always playing catch-up to (and sometimes actively resisting) a rapidly-transforming social landscape. She is a paragon of will, courage, determination, and toughness amidst a sea of giant egos and harsh, slapping tides.

Karin A. Martin models integrity, humility, and straightforward mentorship, giving me hope that a balanced work-family life as an academic is actually possible. Her feedback has always been supportive, direct, and constructive. I admire so much about her carefully-chosen words and quiet presence; she never needs to shout to convey her pragmatic and astute wisdom.

Pamela J. Smock spent many hours working closely with me to revise this work for presentation to mainstream sociological audiences. Her belief in this work and its importance, within the subdiscipline of family sociology, speaks to her vision and commitment to advancing the field. She has been a mentor to me in the very best sense of the word and I hope to use the experiences I have had with her as a model over my own career.
Anna R. Kirkland consistently challenged me to push beyond my comfort zone and to think more deeply, to write more precisely, and to have faith and an investment in the importance of strong, theoretical contributions. As I work toward those goals, her voice is always in the back of my mind. She practices what she preaches and I am awed by her simultaneously powerful, direct, and accessible contributions to the emergent fields of fat studies and transgender studies. How fortunate I am to have found someone with these seemingly divergent, yet compellingly parallel, academic interests.

I am glad that I am so much less of an asshole now than I was shortly after my parents first sent me to college. I was the first person in my family to graduate from college and my parents, like so many of their generation, made tremendous sacrifices to make sure that would be the case. What they might not have anticipated was that the college socialization process would produce a child who did nothing to hide her contempt for the “backward” ways of the town in which she was raised or for the growing disparities between her former and burgeoning vocabulary and social politics. But my parents (Jan and Bob Pfeffer), sister (Kelly Pfeffer), and grandparents (Vickie and Roy Bergeron and Ann and Tom DeCamp) are all kind, patient, and wise people. Through the struggle, indignation, and tears that were born out of that particularly-familial combination of frustration, anger, and love, they taught me invaluable lessons about how to be more open—to listen, dialogue, and empathize rather than haughtily judge and proselytize.

Other friends, family, educators, and colleagues (not yet mentioned by name) were also patient supporters, listeners, editors, sources of comfort, dialoguers, back-patters, facilitators, and opportunity creators during this protracted and often trying process. Thanks to Renee Anspach, Mark Foster, Peggy Geeseman, Rachel Hamilton, Amy C. Hammock, Katherine Hershey, Meredith Hochman, Maria S. Johnson, Deborah Keller-Cohen, Anand J. Kalra, Reese C. Kelly, Kristin L. Kurzawa, Jayati Lal, Jeannie Loughry, Laurie A. Morgan, Daniela Pineda, Patricia Preston, Leslie M. Rott, Jen Sarafin, Kristen Schilt, Eve Shapiro, Ash Siegel, Amy L. Stone, Missy Clyde J. Toddlesworth III, Terri D. Torkko, Jane Ward, Laurel Westbrook, Elroi J. Windsor, and Cookie Woolner.
And Maja Belamaric... such an unexpected joy. In the mornings, you have already made the coffee. In the evenings, you have already turned down the bed. You thoughtfully anticipate, nervously fret, and selflessly care. You surprise me, serenade me, walk with me, speak to me in languages I love but do not yet understand, work with me, argue with me, and plan with me. I am excited and intrigued, twitterpated by your handsome pretty face, grateful for your support and for the leaps of hope and faith you are choosing to make with me. Hvala, slatkoća.

This research was enabled through generous financial support from the Andrew W. Mellon / American Council of Learned Societies (Dissertation Completion Fellowship), the American Sociological Association (Martin P. Levine Memorial Dissertation Award Honorable Mention and Student Conference Travel Grant), the Institute for Research on Women and Gender at the University of Michigan (Community of Scholars Fellowship and Graduate Student Research Grant), Rackham Graduate School at the University of Michigan (Predoctoral Fellowship, One-Term Dissertation Fellowship, and Conference Travel Grants), the Sociology and Women’s Studies departments at the University of Michigan, and the Center for the Education of Women at the University of Michigan (Student Research Grant).

The second chapter of this dissertation (The Pragmatics of “Passing”: Women Partners of Trans Men Queering Identity and Normativity) is currently under review at Gender & Society.


The fourth chapter of this dissertation (“Women’s Work?”: Women Partners of Trans Men Doing Housework & Emotion Work) is a revision of an article that received a Revise & Resubmit decision. This revision has been resubmitted for review at the Journal of Marriage and Family.
Table of Contents

Dedication ii
Acknowledgements iii
Glossary viii
Abstract xi

Chapter 1: Introduction and Background 1

Chapter 2: The Pragmatics of “Passing”: Women Partners of Trans Men Queering Identity and Normativity 32

Chapter 3: Bodies in Relation—Bodies in Transition: Lesbian Partners of Trans Men and Body Image 97

Chapter 4: “Women’s Work?”: Women Partners of Trans Men Doing Housework & Emotion Work 129

Chapter 5: Conclusion 187

Appendix A: Participant Demographic Information 205
Glossary

It should be understood that, as is common with most identity-based communities, the following glossary of terms and concepts is both incomplete and contested; there is no universally agreed upon set of definitions for lesbian, gay, bisexual, transgender, and queer (LGBTQ) identity and experience. This glossary is intended to provide a cursory overview of terms and concepts as I intend and understand them for the purposes of this research.

**Binding:** Wrapping the chest or using a compression garment to flatten breast tissue.

**Bottom Surgery:** Hysterectomy, oopherectomy, metaiodioplasty, salpingectomy, scrotoplasty, and/or phalloplasty.

**Cisgender:** A term describing non-transgender persons (preferred over “biological man” and “biological woman”)

**Cisssexual:** A term describing non-transsexual persons (preferred over “biological male” and “biological female”)

**FTM:** “Female-to-Male” or “Female Toward Male.” Individuals assigned to the “female” sex category at birth, who come to gender identify as a man or on the masculine spectrum.

**Gender:** The vast array of social and cultural constructions (involving bodily comportment, manner of dress, social roles, etc.) that adhere to individuals once they have been assigned to a particular sex category (thus marking an individual as a “girl,” “boy,” “woman,” or “man”).

**Gender Expression:** Refers to one’s social presentation of gender in everyday life (through dress, bodily comportment, vocal expressions, etc.). Gender expression may also shift across social contexts depending on perceived safety and risks.
Gender Identity: A concept that refers to one’s subjective sense of being a boy, girl, man, woman, or some combination thereof.

Genderqueer: An umbrella term for those whose gender identity and/or expression does not normatively align with their assigned sex.

Hysterectomy: Surgical removal of the uterus.

Intersex: A category to which individuals are sometimes assigned if their sex chromosomes and/or sexual anatomy is ambiguous or plural.

Metaoidioplasty: Surgical release of the tissues keeping the clitoris (which is enlarged to the size of a micropenis after administration of testosterone) tethered to the body.

Micropenis: Enlargement of the clitoris after prolonged administration of testosterone.

MTF: “Male-to-Female” or “Male Toward Female.” Individuals assigned to the “male” sex category at birth, who come to gender identify as a woman or on the feminine spectrum.

Oopherectomy: Surgical removal of the ovaries.

Packing: Wearing a penile prosthesis or creating the appearance of a penis under clothing.

Passing: To be socially perceived in accordance with one’s own gender identity rather than one’s birth sex. Some find this term offensive and prefer the term, “recognizing,” since it does not insinuate that those who are “recognized” as the gender with which they identify are somehow accessing recognition that is undeserved or inauthentic.

Phalloplasty: Surgical creation of a penis.

Scrotoplasty: The surgical insertion of testicular implants.

Sex: A perceived and/or actual convergence of hormonal, chromosomal, and anatomical factors that lead to a person’s assignment, usually at birth, to sex categories such as “male,” “female,” or “intersex.”
Sex Category: Male, Female, Intersex.

Sexual Identity: One’s personal sense of sexual attraction and/or sexual community identification (e.g., lesbian, gay, bisexual, queer). Transgender individuals may hold any of these sexual identities. Sexual identity is based on both one’s own gender identity and the gender identity of the person to whom one is attracted.

SOFFA: Abbreviation for significant others, friends, family, and allies (of a transgender or transsexual person).

Stealth: To receive recognition for one’s gender identity across all social situations. In other words, to be perceived, socially, as male all of the time and to not identify as female, a woman, or as a trans man.

T: Slang for testosterone

Top Surgery: Bilateral radical mastectomy with chest wall recontouring or reduction mammoplasty.

Trans: An abbreviated term that refers to “transgender” and/or “transsexual.”

Transgender: An umbrella term for those whose gender identity and/or expression does not normatively align with their assigned sex.

Transition: To bring one’s gender expression into closer alignment with one’s gender identity. Transition may involve changes in one’s style of dress, hair, body comportment, pronoun/name use, legal sex/gender status, social roles, hormones, and/or physical anatomy.

Trans Men: Short for transgender or transsexual men. Individuals assigned to the “female” sex category at birth, who come to gender identify as a man or on the masculine spectrum.

Transsexual: A particular type of transgender identity or embodiment. Usually describes an individual who makes surgical and/or hormonal changes to their body in order to bring it into closer correspondence with their gender identity.
Abstract

Trans(Formative) Relationships: What We Learn About Identities, Bodies, Work and Families from Women Partners of Trans Men

by

Carla A. Pfeffer

Co-Chairs: Karin A. Martin and Esther Newton

Sociology has made tremendous strides over the past forty years in documenting the lives, experiences, and communities of those who are lesbian and gay. Progress toward inclusion of those who are transgender and transsexual, however, has been much slower. Furthermore, existing sociological research on these populations tends to focus exclusively on transgender individuals, extracting people from their actual social relationships and communities. I argue, however, that it is sociologically imperative to resituate transgender lives in their social contexts and to engage in more focused sociological exploration of the experiences of the significant others, friends, family and allies of transgender individuals.
Following a three-article format, based on in-depth qualitative interviews with fifty women partners of trans men across (primarily) the United States and Canada, my dissertation examines the following three substantive questions: 1) What does it mean to “queer” normativity through identity work practices? 2) What are the personal and interpersonal effects of a trans partner’s body dysphoria on a woman partner’s body image and on her experiences of sexual and non-sexual relationship intimacy? 3) What do narratives from women partners of trans men, on the performance, structure and division of household labor and emotion work within their relationships, reveal about “doing gender” and “women’s work” within contemporary families?

In these articles, I extend existing sociological studies of emotion work, identity work, gender, sexuality, LGBTQ communities, the body, and the family to discern how the various forms of work and partnering in which women partners of trans men engage is both similar to, and distinct from, that performed by women in heterosexual and lesbian relationships. Furthermore, I explore explanatory frameworks with which women partners of trans men engage to explain the work they do in their relationships,
highlighting their particular connection to Third-Wave feminist ideals of free will, choice, queer politics, and individuality. These rich narratives present possibilities for expanding sociological understandings of identities, bodies, work, and families on our shifting, twenty-first-century social landscape.
Chapter 1
Introduction and Background

Until recently, existing scholarship on transgender identity and experience focused, almost exclusively, on male-to-female (MTF) transsexuals. Much of this work derived from case studies of gender clinic patients who underwent sexual reassignment surgeries. The scholarship that emerged from these case studies was focused, primarily, on clinical assessments, medical treatment and psychotherapy options for those considered mentally ill on the basis of their “gender identity disorder” (e.g., Benjamin, 1966; Lothstein, 1983; Strassberg, Roback, & Cunningham, 1979). Over the past thirty years, however, FTM (which may indicate either female-to-male or female-toward-male, as explicated by Hale, 1998) transgender-identified persons and FTM transsexuals have entered social discourse and begun to garner scholarly attention. This burgeoning scholarship, however, most often approaches trans men in problematic ways that separate the individual from his social-relational context.
Research conducted on the forms that romantic relationships between trans men and their partners may take is still quite limited. In a study of 22 trans men and their women partners, Fleming, MacGowan, & Costos (1985) found that these relationships tended to be “stable and enduring” (p. 47). In a study, by Lewins (2002), a sample of 55 MTFs and only 14 FTMs are compared to explain perceived differences between the two groups in terms of relationship stability. In addition to odd comparison groups and small sample sizes, the authors reveal biases and assumptions such as: “It was assumed that FTMs, unlike MTFs, were largely, if not exclusively, sexually attracted to females” (Lewins, 2002, p. 79). Chivers & Bailey (2000) also assert the extreme rarity of gay trans men. These assertions, however, stand in contrast to findings by Cromwell (1999), Devor (1997), and Schleifer (2006), who report on gay trans men’s experiences.

Researchers have also discussed the sexual identity of trans men in highly problematic and confusing ways. Lewins (2002) makes the following stigmatizing assertion:

It is a reasonable inference that FTMs’ relationships with women are more likely to be stable because both parties were socialized as girls and then as women. As women value, more than do men, the expressive properties of relationships and, correspondingly, place less stress on the importance of physical qualities,
this wider pattern helps to explain the, arguably, counter-productive nature of FTMs’ relationships. Despite the anatomical disadvantage of not having a naturally functioning penis for sexual intercourse, FTMs’ relationships with women are the most stable category (p. 84).

In a study by Chivers & Bailey (2000), examining the sexual identity of trans men, the authors twice report that “homosexual FTMs” (the authors’ way of referring to heterosexual trans men) desire “feminine partners.” In the second mention, they amend this to, “very feminine partners” (pp. 261, 269). Rees (1996) reports on a Canadian Medical Journal article that proclaimed:

...the partners of female-to-males are normal heterosexual women, not lesbians, and see their lovers as men, in spite of the lack of a penis. The partners were feminine, many had had earlier relationships with genetic males and often experienced orgasm with their female-to-male partners for the first time. The report stated that these relationships were stable and long lasting and that the transsexuals made good parents of any children their partners had (p. 59).

Fleming, Costos & MacGowan (1984) determined that the “ego development” of trans men and their women partners was virtually indistinguishable from that of men and their women partners, which the authors submitted as proof of their conformity. Kockott & Fahrner (1988) report on the exclusive heterosexuality of trans men in their study, and
their tendency to be in stable relationships that are sexually satisfying.

In terms of thinking about sexual identity, Kailey (an FTM transsexual), makes the following statement:

‘Gay,’ ‘lesbian,’ ‘straight,’ and ‘bisexual’ are labels, not orientations. And the interesting thing is that these labels are applied based not on the gender a person is attracted to, but on the gender of the person feeling the attraction. As a female, I was considered ‘straight.’ As a male, I’m considered ‘gay.’ My sexual orientation, which is to men, hasn’t changed. My label has changed because my own gender has changed. My label has nothing to do with who I’m attracted to. It has everything to do with who I am (2005: 86).

Given the fact that most partners of trans men are women, and that a large percentage of these women have lesbian histories (Devor, 1997), I would argue that sexual identity does, indeed, have a great deal to do with the object of attraction. The very limited number of published narratives available from lesbian-identified partners of trans men suggest the same given the frequent articulation of worrying about losing one’s lesbian identity or community once a partner transitions to male (Devor, 1997; Feinberg, 1993; Green, 2004; Kailey, 2005). Minnie Bruce Pratt (1995), partner of Leslie Feinberg, writes:

You say, ‘I’ve wondered how you’d explain what it’s like to be lovers with someone seen as woman and man.’ I think of the dance we went to a friend’s house, the whisper about you repeated to
me, ‘Well, it must be a woman, it’s with you. But she’s wearing men’s pants and shoes.’ I don’t point out to the whisperer that I am the only woman at the party wearing a skirt. Of the other women, all with short hair and jeans and slacks, some are femmes, some butches with their legs spread apart and their hands in their pockets, some are kiki or androgynous. But no one pushes masculine and feminine to the edge of woman as we do (p. 75).

Not only may the women partners of trans men be marginalized within lesbian communities, they may also be unwelcome in transgender/transsexual spaces as well. Green (2004) writes about an experience at the International Foundation for Gender Education (IFGE) conference in Houston in 1992:

...the three or four female partners of FTM's who had also registered for the conference were asked to leave a workshop offered for partners of transsexuals and crossdressers because the wives of the MTF people felt that female partners of FTM's must be lesbians and therefore would not be able to sympathize properly with the difficulties faced by heterosexual women whose partners were changing their gender expression to female... (p. 74).

Indeed, there is reason to believe that finding community may be quite challenging to the partners (in this case women partners) of trans men.

**Autonomous Transition? Importance of Considering Partners**

The gender transition process among transgender and transsexual people is one that has attracted research interest. Rarely, however, does this research take partners
into account. Examining autobiographical accounts of transmen, however, reveals the need for research that does not take partners’ experiences and perspectives for granted. Green (2004) describes the transition process and the impact it may have on interpersonal relationships, attempting to make the seeming self-centeredness or narcissism of this period more understandable to others:

Once we have begun hormone treatment, the power of these biochemical substances plunge us into adolescence, creating or recreating all the transitional mood swings, confusion, timidity, and bravado that society expects in teenagers but has no way of interpreting or accommodating in adult behavior. There is also the inevitable fascination with our physical body as it changes right before our eyes into something to which we finally feel connected and of which we want to be proud. We may also share a sense of freedom in wearing clothing of choice, the ability to experience psychologically satisfying sexual interaction for the first time, being recognized at last as a member of the gender category in which we feel most comfortable, and the sense of doing something for ourselves rather than always trying to please others. It is this euphoria, self-interest, or self-satisfaction that leads others to criticize us for being horribly self-centered. Many of us have spent much of our pre-transition lives trying to please others in order to fit in, or to compensate for our own internalized sense of incompleteness or inappropriateness, so accusations of self-centeredness seem doubly wounding, surrounded as we are in the U.S. with meta-messages about the positive ramifications of self-indulgence (p. 207).

While what Green writes is true, it does not negate the fact that many significant others, friends, family members
and allies (SOFFAs) of trans men report that their partners' self absorption and major life choices often seriously impact the quality, and even the possible continuation, of their relationships. Kailey (2005) describes how trans men must be cognizant of factors and relationships outside of themselves and their body, even during this transition period:

My advice to transpeople is to listen, listen, and listen some more. Your friends and family, and especially your spouse or partner, need to be heard, they need to have their feelings and fears recognized and acknowledged by you, and they need some downtime, some time away from the transition... Many transmen, regardless of age, go through a period of adolescent thought and behavior brought on by body changes and the unfamiliar and overpowering sensations of testosterone. It levels out eventually, and the frightening thrill of change, the rabid sexual desires, and the adolescent silliness dissolve into real life. You still have to make a living and pay bills. You still have to interact with people in the world. You still have responsibilities, the expectations of others, and the day-to-day requirements of whatever life you have established for yourself (pp. 109, 121).

These reminders seem particularly important when considering the myriad ways in which gender and sexual identities are produced and “read” through a relational matrix that often includes partners. Consider the following quote from Pratt (1995):

In the crowded car when I put my head on your shoulder, with your arm around me, people stared at us. Curious to be so conventional in dress and
to draw so much attention. Something to intimate and queer about how we do maleness and femaleness together in public. Perhaps it’s easier for you to slip through if you’re not with me. One glance and you’re a gay man to them, or a slightly ambiguous boy. But when you’re with me, I see their eyes flicker: ‘If he’s gay, why is he with her? Why is she with him? If they are two women, why do they look so much like a woman and a man? What are they up to’ (p. 85)?

In this passage, maleness and femaleness is something that is “done,” something that is produced and read through the dyad of two relational bodies. The social intelligibility of each person, each body, emerges out of this relationality.

In making what are often asserted to be very personal and autonomous choices about sex and gender, however, partners of trans men may come to feel shut out of a series of decisions in which they have a deeply vested interest. Some partners of trans men discuss feeling that their partner has made the choice to become someone totally different from who they were, someone they do not recognize (Devor, 1997). Cooper Lee Bombardier (in Diamond, 2004), a trans man, begins his essay with a list of things lesbians might say to urge their trans men partners not to transition, including pleas about how the partner loves the trans man’s body as it is and how she is afraid of what her partner’s transition will mean in terms of her own sexual
identity. Bombardier responds with: “You don’t have to understand—you just have to believe me.” (p. 28). This dismissive response surely does little to reassure a partner with very legitimate concerns of her own. Sailor Raven, writing in the same anthology as Bombardier (Diamond, 2004), responds quite differently to her partner’s impending transition:

You said last night that you’re sorry, that you have this perfectly good body that you can’t seem to really live in. I said, baby it’s not your fault. This is some trick played on you, bringing you out into the world in someone else’s form and expecting you to find your own or live a trap for yourself all your life. A body owned and confined (p. 50-51).

Reactions to a partner’s decision to transition do seem to run the gamut from encouragement to abandonment (e.g., Martino, 1977 and Green, 2004, respectively).

Given that transition decisions are ones that will substantially alter not only the form and structure of one’s body, but the form and structure of one’s identity and identity in relation to others, one would think that partners would be figured more centrally in discussions of trans men’s transitions. This is especially the case considering that trans men’s narratives often discuss the emotional labor, physical work, money and time that partners often invest in terms of learning about transition
options, managing family relationships, providing emotional support, paying for transitions, providing post-surgical aftercare and advocating for transgender and/or transsexual rights (e.g., Boenke, 2003; Khosla, 2006; Martino, 1977; Pratt, 1995).

Nonetheless, in a study by Rachlin (1999), on trans men’s decisions about electing surgery, the only question that mentioned partners was an item that asked trans men if they had decided against surgery because their partners were against it (zero percent of respondents indicated that this was a factor). The narratives of trans men also revealed that some clinicians and doctors may be unprepared to communicate, effectively, with the partners of trans men. In response to research findings that trans men’s relationship satisfaction was reduced (though not significantly) after phalloplasty, Barrett (1998) advocated that partners be informed about realistic post-surgical expectations. According to Lev (2004), such seemingly-obvious considerations are, unfortunately, rare. Lev writes that partners and families have often been considered difficult or burdensome to clinicians and doctors working with trans men, due to the fact that they often express many concerns and ask questions.
In the acknowledgment section of his book, Green (2004) makes the following declaration: “I want also to acknowledge the partners of transpeople, particularly these present or former partners of transmen... for their ability to love beyond conventional boundaries” (p. xi). This is an instance of recognition that is, nevertheless, tucked away in an acknowledgments section, in the background. Califia (1997) titles one of the chapter in his book, Sex changes: Transgender politics, “The invisible gender outlaws: Partners of transgendered people.” Califia describes the numerous ways in which the partners of trans men often receive little credit for the work that they do to support their partners and advance transgender/transsexual politics. Several narratives of trans men did, however, highlight the important role partners played in their transition and their lives. Raven Kaldera (in Nestle, Howell, & Wilchins, 2002) writes:

My lover of seven years, now my wife... was the first person in my life not only to support my gender transgressions 100% but to encourage me. She sweet-talked me into growing out my beard, encouraged my masculinity, let me wear the dick during sex, and held me through bouts of body dysphoria. She is a male-to-female transsexual, and she started dating me while I was still in the denial stage. But she had me pegged long before I knew my own mind. Somehow she knew I was the man for her, even when I was wearing skirts. I’ve already thanked her, of course, and I continue to do so every day. Her I owe for
knowing that no matter what I did with my flesh, someone would always desire me (p. 159).

Indeed, women partners’ role in validating the desirability and sexuality of their trans partner is one that is simultaneously critical yet relatively unexplored in academic research.

Women Partners and Trans Sexuality

Marcus Rene Van discusses the intricate way in which trans men’s identity is both co-constructed and validated, relationally, with a partner:

In the bedroom I need a woman who sees the man I am and treats me that way. It’s difficult to be with a partner who is not understanding of transgender lovers. Even though I bring a strong sense of self-awareness to any sexual encounter, if a partner does not relate to me as male, it’s hard to connect. I need a woman who can respect what I am. My trans sexuality is the mental and physical pleasure existing in the same space. It’s a fragile world, constructed on beliefs and acceptance, and mirrored in a partner’s gaze. This is not to say that it is all a mind game: that undercuts the fact that the connection between partners is visceral and real. Our worlds are connected at some place that reaches beneath the surface. When she says, ‘You have a shaft,’ I believe her, and feel myself getting mini-hard on her fingers. Never mind that my dick is enclosed in the folded skin of labia (in Diamond, 2004, p. 54).

These discursive and embodied relations between partners are, indeed, the process and form of transsexuality. Pratt (1995) offers one of the few articulations of the ways in which sex, gender, and sexuality interface:
You are a woman who has been accused of betraying womanhood. In my groans of pleasure from your cock, perhaps some would say I have betrayed womanhood with you, that we are traitors to our sex. You refusing to allow the gestures of what is called masculinity to be preempted by men. Me refusing to relinquish the ecstasies of surrender to women who can only call it subservience. Traitors to our sex, or spies and explorers across the boundaries of what is man, what is woman? My body yawns open greedily for what you are not afraid to give me (pp. 117-118).

While validating transsexual men’s masculinity through sexual interactions with a partner is often critical (Dozier, 2005), for those who are transgender, identity validation may hinge more on others’ acknowledgment of both masculinity and femininity. Pratt (1995) writes: “Sometimes I hold you, brushing my hand over the silky stubble of your hair and say, ‘You’re my girl, you’re my boy’” (p. 80). In a later exchange, Pratt (1995) recounts her response to the question, “Is he your husband?”—“Yes, she is” (p. 96).

Little mention is made in the research literature, however, about either how these validating, relational interactions affect the partners’ identity. Just what effects transition hormones and surgeries may have on the partners of trans men, in terms of their relationships with their partners, is also rarely discussed (Kailey, 2005). Wilchins (1997) presents a fascinating story of two
sexuality narratives, juxtaposed—a trans man and his partner:

A transsexual male friend gives a class a discussion on his surgery. Afterward, a student inquires whether he can successfully have sex like a man, and he responds, ‘Yes, I can penetrate my lover and we can have simultaneous orgasm.’ Months later I read a sex piece by his lover in a national bisexual magazine. Unsure what to make of his one-inch penis, she devotes only a sentence or two to it, instead concentrating the bulk of the piece on his penetration of her with his fingers and how she can tell his absolute maleness from the deep, relentless way he fucks her for hours (p. 171).

This story is intriguing not only because it reveals the discursive limits of representing transsexuality but, also, because it challenges our understandings of boundaries between the “types” of sex in which various configurations of bodies and identities generally engage.

Another important narrative of sexuality comes from Sonya Bolus (in Nestle, Howell, & Wilchins, 2002):

Sometimes I have to trick you. We pretend you are fucking me, so you don’t have to think about what I am doing to you. I make my body available to you as a distraction. Sometimes I use words: ‘Let me suck your dick.’ Whether I go down on a dildo or a cunt, I am sucking your dick. I see it. I feel it. I know it. We both believe in this absolutely, and there is a shift from role play into another kind of reality (p. 113-114).

In this powerful description, Bolus highlights how the discursive power of words can translate the “reality” of not only individual bodies, but the way in which these
bodies exist in relation to one another. She also situates herself in a powerful role as subject, agent and guardian of “the real.”

**Identities in Transition: What Am I? What Will I Become?**

Robin Maltz (in Nestle, Howell, & Wilchins, 2002) turns the tables to question what women partners’ identity and sexuality will come to mean as their butch partners transition:

One of a femme’s areas of sexual expertise is her ability to transform a stone butch’s body through acts of imagination, so that a stone butch never risks being ‘womanized.’ A femme knows how to masculinize a stone butch’s body; a phallic length of silicon is not a dildo or a sex toy but a butch cock, and a chest is a chest, not breasts. If a transman no longer needs masculine validation from a femme but rather by passing as a male, by body alteration, by blending into heterosexuality, is a femme still a femme? Or is she a significant other (a term for the partner of an FTM) who witnesses the gender/sex transformation instead of participating in an ongoing process of imaginatively re-creating gender? The transitions of butches to FTMs have left some femmes in the lurch. Do they follow their lovers into passing anonymity (p. 163).

Maltz’s questions also raise interesting questions to consider in terms of the subject position of the women partners of trans men. If they are feminine, are they femmes? Are they gender-normative? Are they heterosexual women? Are they something different altogether? Without
more extensive narratives from women partners of trans men (other than Pratt, 1995), we cannot fully comprehend their understandings of self and their trans partners. We must also consider that these subject positions are not always mutually exclusive. I would argue that these nitty-gritty, complex and relational intersections of bodies, sex, gender, sexuality, power and identity are just the sort of productive areas sociologists might embrace.

**Families in Transition**

It is difficult to make claims about the types of families that trans men and their families create, as so little has been written about the subject. Some exceptions to this are Boenke’s (2003), *Trans Forming Families* and the 2004 documentary, “Transparent.” Unfortunately for trans men and their families, however, Boenke’s (2003) book is largely focused on trans women. One of the relatively few stories focusing on trans men and their families is written by Loree Cook-Daniels, a woman who partnered with a trans man, Marcelle, who gave birth to their son, Kai. Cook-Daniels describes Marcelle’s pregnancy as horrific for him, physically, psychologically and emotionally. In a tragic postscript to her story, she reveals that her partner committed suicide. Unfortunately for the partners of trans men, the “Transparent” documentary never features a single
partner of a trans man, while it does discuss the
challenges and rewards of trans men giving birth and
raising their own children.

Some trans men reported losing a partner as a result
of their decision to transition (Green, 2004) or being
denied custody of their children (Green, 2004; see also the
2005 documentary, “Transparent”). Others reported that
their children rejected them (“Transparent” documentary).
Other trans men described losing the support of their
families in the process of transitioning: “A transgender
world is a lonely world. We cry in silence, hiding our
scars, our imperfections. We die everyday, as we get buried
by our families, who swear never to speak to us again”
(Cummings, 2006, p. 40). Wilchins (1997) concurs:
“Loneliness, and the inability to find partners, is one of
the best-kept secrets in the trans community... When we
find partners, they must be willing to negotiate the
ambiguity of the terrain” (p. 120).

Green (2004) reports on an alarming case of
marginalization of two trans men by members of their trans
men’s community due to their family and parenting choices:

In 1999 Matt Rice, an FTM who had been rather
public, announced to the community via email that
he had stopped taking testosterone in order to
conceive a child and that he had given birth to a
son, whom he and his partner Patrick Califia,
another FTM, planned to raise together. Instead of congratulations and good wishes, he was vilified on numerous internet lists for bringing embarrassment upon those of us who regard ourselves as men because ‘men do not have babies.’ A flood of vitriolic messages berated Matt and Patrick, and some even wished the child dead (p. 143).

Once again, these testimonies reveal the difficulties trans men and their partners may encounter when trying to engage in the everyday activities that many others take for granted—marrying, working, having children and finding community. Future research would do well to explore the social resources available to trans men and their partners in terms of providing support to enable the formation of strong relationships, families and communities (see Kenagy & Hseieh, 2005 for an example of such research).

Indeed, research and writing on trans men’s romantic relationships is limited and almost uniformly one-sided (the trans man writing about the relationship). In my own background research, I hoped I would stumble across a number of narratives written by women partners of trans men. Unfortunately, I was disappointed to find only one book-length narrative of this variety (Pratt, 1995). Clearly, more research is needed on women partners of trans men in order to begin to develop more comprehensive sociological scholarship that addresses not only
transgender identity and experience, but the identities and experiences of women, in general.

This Dissertation

Following a three-article format, based on in-depth qualitative interviews with fifty women partners of trans men across (primarily) the United States and Canada, my dissertation examines the following three substantive questions: 1) What does it mean to “queer” normativity through identity work practices? 2) What are the personal and interpersonal effects of a trans partner’s body dysphoria on a woman partner’s body image and on her experiences of sexual and non-sexual relationship intimacy? 3) What do narratives from women partners of trans men, on the performance, structure and division of household labor and emotion work within their relationships, reveal about “doing gender” and “women’s work” within contemporary families? In these articles, I extend existing sociological studies of emotion work, identity work, gender, sexuality, LGBTQ communities, the body, and the family to discern how the various forms of work and partnering in which women partners of trans men engage is both similar to, and distinct from, that performed by women in heterosexual and lesbian relationships. Furthermore, I also explore the explanatory frameworks with which women partners of trans
men engage to explain the work they do in their relationships, highlighting their particular connection to Third-Wave feminist ideals of free will, choice, queer politics, and individuality.

In the first chapter, I discuss how scholarship on transgender identity and communities is slowly beginning to emerge in the social sciences. I also discuss how this scholarship tends to focus on MTF transgender-identified people and to isolate transgender individuals from their social contexts, relegating significant others, friends, family, and allies of transgender people to the periphery. Despite this trend, I present growing evidence that those closest to transgender and transsexual individuals often play critical roles in their trans partner’s personal and interpersonal experiences of gendered embodiment and social recognition. Focusing on trans men to begin narrowing the gap between FTM and MTF representation in social science research, I discuss how non-trans women are the demographic group most frequently reported to partner with trans men.

Juxtaposing quotations from the few existing published narratives of women partners of trans men with trans men’s narratives, I discern potential sites of future social science research and inquiry. First, I address the importance of considering women partners’ personal
investments and involvement with their trans partners’ social and/or medical gender transitions. Second, I consider the ways in which women’s sexual expression with their trans partner may inform, validate, and co-produce transmasculine and/or male identities. Third, I consider how a partner’s gender transition may produce critical transformations of a woman partner’s sexual identity, challenging both her sense of self and her social networks and communities. Fourth, I assert that trans men, and the partnerships and families they create with their women partners, may pose challenges to existing sociolegal and sociological understandings of family and family structures.

In the second chapter, I engage the following question: What does it mean to “queer” normativity through identity work practices? In this article, I explore how women partners of trans men negotiate their own sexual identities in the context of a partner’s gender transition. I reveal that one of the ways that women negotiate this process is by adopting the sexual identity label of “queer,” a term that is paradoxically freeing and confining. I also discuss women’s narratives about resisting and embracing normative gender and sexual identities in the context of their relationships and consider the many tensions among
“passing” as heterosexual, garnering heterosexual privilege, losing one’s lesbian identity and community, and becoming invisible as a queer person within queer communities. Finally, I consider how women partners of trans men, and the families they create, both reflect and disrupt traditional family forms and structures such as marriage, monogamy, and parenting in ways that are often strategic and pragmatic.

In chapter three, I turn to the question: What are the personal and interpersonal effects of a trans partner’s body dysphoria on a woman partner’s body image and on her experiences of sexual and non-sexual relationship intimacy? Here, I shift method to a case study and subsample-focused approach in order to highlight experiences and perspectives (on body image) of lesbian-identified women partners of trans men. This methodological and subsample shift was undertaken in response to a call for papers addressing lesbians and body image. Examining published autobiographical narratives of trans men, in conjunction with narratives from interviews I collected from self-identified lesbian partners of trans men, I urge researchers to more carefully consider the interpersonal and relational aspects of body image and its impact on sexual and non-sexual expressions of intimacy between
partners. I contend that listening to the unique perspectives and experiences of the women partners of trans men can teach us a great deal about the complex interconnections among sex, gender, gender identity, bodies, body image, race, sexuality, and sexual identity by challenging and expanding our pre-figured notions of who and what comprises each of these categories.

In the fourth chapter, I examine the following query: What do narratives from women partners of trans men, on the performance, structure and division of household labor and emotion work within their relationships, reveal about “doing gender” and “women’s work” within contemporary families? In this article, I show how (largely feminist-identified) women partners of trans men, like their counterparts in both heterosexual and lesbian relationship with non-trans people, create “gender strategies,” “family myths,” and “accounts,” as explanatory frameworks when the division of household labor within their relationships is gender-stereotyped and/or inegalitarian. The explanatory frameworks that the women partners of trans men employed, however, were also distinct and somewhat unexpected.

This largely feminist-identified sample of women partners employed individualist, choice-based, and free-will-based explanations for these stereotyped/inegalitarian
divisions of household labor. To reconcile the seeming inconsistence between feminist self identity and reliance on these particular explanatory frames, I consider these women’s immersion within queer and Third-Wave feminist communities and politics, which highlight the importance of performativity, choice, and individuality. In the second section of this article, I reveal another form of women’s work within their relationships with trans men—provision of both basic and more complex medical care. I discuss how administering a trans partner’s testosterone injections, mediating relationships between one’s trans partner and medical care provider(s), and providing post-surgical aftercare all constitute forms of women’s unpaid, untrained, emotion work. I situate this carework in the context of managed care and increasing “work transfer” from hospitals and medical personnel to the home, families and, largely, women. This article also explores the implications of these findings for the subdisciplines of both family sociology and medical sociology.

This collection of articles on the experiences and perspectives of women partners of trans men contributes to emergent sociological scholarship on transgender identities and communities as well as long-standing scholarship on women and women’s family work, in general. If we continue
to build a sociology of transgender identity, experience, and communities that focuses exclusively on individual trans people, abstracted from their social contexts, we will fail to gain multiple perspectives on how gender identities, gender expressions and sexual identities are relational and co-constitutive. There are many substantial challenges that trans men experience if they choose to transition, and many of these challenges arise primarily in social interaction with others. In the words of one trans man from the 2005 Jules Rosskam film, “Transparent”: “I’m not the only one who transitions, everyone around me has to transition.” Further, as Rachlin (2002) writes: “The outcome research indicates that satisfaction with life after gender transition is more likely when individuals have solid professional lives, good family relationships, good social support networks, and are emotionally stable” (p. 14). Furthermore, as long as sociologists continue to research and theorize “the family” without including the voices of those whose families do not neatly fit into our typologies of what constitutes a “family,” our scholarship will be partial and incomplete.

Furthermore, continuing to ignore these contemporary families, and the particular challenges and barriers that they may face, has profound implications for the members of
these families. In the 2005 documentary, “Transparent,” about trans men who have given birth to their children, trans men’s legal status as a parent or guardian was sometimes challenged or contested on questions of their “parental fitness” once they began to transition. Legal marriages and adoptions have also been challenged on the grounds of “deception” (More, 1998). These contemporary sociolegal quandaries are areas ripe for sociological inquiry and systematic study.

While I seek to expand sociological scholarship on gender, sexuality, bodies, work, and families, with this research on the experiences and perspectives of women partners of trans men, I do so with some trepidation. In some instances (e.g., during presentation of this work to feminist sociologists), I find that individuals tend to focus, primarily, on how some of the narratives seem to reflect and/or reify heteronormativity and/or heteronormative gender practices. Halberstam (1998) writes that the ultimate aim of an intensive study of transgender and transsexual embodiments and identities should not be to determine who wins the prize for the most counter-normative, but to establish a body of work that lends to the description and understanding of these various forms of identities and embodiments. Further, Rubin (1998) addresses
the tendency for non-trans people to assail trans people with claims of supporting and/or reflecting binary and/or normative gender embodiments: “They do not walk around, as they seem to be asking us to do, without gender identities or legible bodies... They are not called upon to account for the fact that their gender is something they achieved” (p. 273).

In the novel, *Well of Loneliness* (by Radclyffe Hall), the protagonist, Stephen Gordon, eventually turns her (his?) lover, Mary, over to a male suitor in order to spare her from a life of shame and suffering. In an analysis of this plot turn, Newton (1984) ends her essay with the following quote: “Mary’s real story has yet to be told.” While likely intended to refer to the need to theorize femme subjectivities, this parting shot can also be read to assert that the stories of the women partners of females who embody masculinity deserve telling. The second quote that inspires me comes from Minnie Bruce Pratt (1995), in the form of a conversation about whether or not jazz musician (and trans man) Billy Tipton’s wife “knew” of his birth sex. Pratt writes:

Later you tell me of evidence left by other wives, years ago. If the outlaw husband took another lover, sometimes the wife would go to the police and turn her husband in, to be tried, convicted, and sentenced to jail for perversion, the deception of cross-dressing
into the opposite sex. Unwittingly, the wife would leave a record, the nakedness of their love between lines in a police report. You say, ‘But this life is yours and not just mine. You will write a different record of what our life is’ (p. 169).

It is my hope that the narratives featured herein begin to tell this story—to establish a sociological record—that expands our understandings of not only transgender communities, but of a broader cross-section of women’s subjectivities, identities, experiences, perspectives, work, partnerships, and families.
References


Chapter 2

The Pragmatics of “Passing”: Women Partners of Trans Men Queering Identity and Normativity

In front of Oprah Winfrey, hundreds of studio audience members (several of whom sit wide-eyed and mouths agape) and millions of television viewers, Thomas Beatie and his wife, Nancy, gaze into one another’s eyes and hold hands as they relay the story of how Thomas, a visibly-pregnant man, is carrying the couple’s child. Over the next hour, we learn that Thomas is a female-to-male transsexual who retained his female reproductive organs while obtaining legally and socially-recognized status as male. We follow the couple as they document the mundane normalcy of their lives together as a suburban married couple, accompanying them to ultrasound appointments and watching them decorate their nursery. Their neighbors provide on-camera testimonies vouching for the couple’s relatively seamless integration into the community, even as Thomas and Nancy discuss fears and concerns they have about whether or not “outing” themselves might place their growing family in danger.
On paper, the Beaties’ story seems a perfect reflection of heteronormativity—mirroring a familiar, married, procreative, socially and legally-sanctioned heterosexuality that places them soundly in the center of “normalcy.” On second glance, however, the Beaties’ particular version of heteronormativity is also radically queer. The visual disjuncture between Thomas’ bulging biceps, bearded face and unmistakably pregnant belly is startling; and the social meanings and boundaries between identities such as mother, father, masculine, feminine, male, female, husband and wife are called resoundingly into question. It simply cannot be denied that this personified example of twenty-first century family life is very queer indeed—testing the boundaries of our sociological understandings of gender and sexual normativity.

But what, exactly, does it mean to “queer” normativity through identity work practices and what makes such practices sociologically relevant and interesting? In this paper, I present results from qualitative research with fifty women partners of transgender and transsexual men (henceforth “trans men”) to begin responding to these questions. I find that the experiences and perspectives of this emergent community offer possibilities for conceptualizing how identity work practices generate queer
identities and relationship dynamics that elide simplistic and reductive characterization as either “heteronormative” or “homonormative.”

**Background**

*Normativity: The Context of Trans Identities and Experiences*

Heteronormativity has been conceptualized as a “charmed circle” within which privilege, opportunity and freedom from social stigma are conferred to those conforming to particular social rules and regulations (Rubin 1984). Some of these rules and regulations, for example, dictate that opposite-sex, normatively-gendered individuals monogamously pair (Rubin 1984). Ingraham defines heteronormativity as “the view that institutionalized heterosexuality constitutes the standard for legitimate and prescriptive sociosexual arrangements” (1994, 204). Jackson (2006) describes heteronormativity as “shorthand for the numerous ways in which heterosexual privilege is woven into the fabric of social life, pervasively and insidiously ordering everyday existence” (108). Under such pervasive heterosexual privilege, relational configurations and identities falling outside these compulsory parameters are often rendered socially invisible (Rich 1980). In the current neoliberalist
sociopolitical environment, even those who form same-sex pairings may follow proscriptively normative behavioral patterns, enacting what may be termed, “homonormativity” (Duggan 2002; Seidman 2005). Both heteronormativity and homonormativity are concepts founded upon the actual and/or perceived gender and sexual identities of social actors (Jackson 2006).

Transgender and transsexual individuals and their partners, however, throw our social identity taxonomic classification systems into wonderfully perplexing disarray, ripe for sociological inquiry. What makes a particular couple “same-sex” or “opposite-sex?” Is it the genetic karyotype, of each partner relative to the other? Unlikely, since most of us will live our entire lives never truly knowing our genetic karyotype, let alone those of our partner(s). Is it the relative levels of sex hormones in each partner’s body? Hormone replacement and supplemental therapies allow us to control these presumably natural variations—which we know exhibit greater statistical variation within sex categories than across them (Fausto-Sterling 2000). Then it must be the genitals, reproductive organs and secondary sex characteristics of each partner, right? Modern medicine increasingly allows us to remove and construct these somatic features in dizzyingly variable
amalgamations (Meyerowitz 2002). Further, most of us go through our everyday lives only presuming what lies beneath the clothes and skin of the majority of social others (Garfinkel 1967; Kessler and McKenna 1978). Then it must be the legal status of each partner—whether there is an “M” or an “F” on their birth certificate, passport and/or driver’s license. Wrong again; as yet, no federal policies exist on the designation of sex status on legal documents and state policies on whether or not birth certificates and other legal documents may or may not reflect a literal “sex change” vary widely and inconsistently, as do the policies indicating what hormonal and/or surgical procedures provide necessary grounds for requesting that such changes be made (Currah, Juang, and Minter 2006; Kirkland 2006).

While these ambiguities and inconsistencies may be confusing, they also open up possibilities for remarkable social transgression and transformation. For instance, the medical, legal and social realities of some trans peoples’ lives, in this historical moment, make it possible for them to choose whether they wish to enter into either a “same-sex” or “opposite-sex” legally-recognized marriage or civil union with the very same partner (Robson 2006). It is possible, therefore, that some of these relationships may face accusations of being either heteronormative or
homonormative, depending both upon how partners conceive of their own identities and relationship, as well as how they are perceived by social others. Given the complexity of social identity in the context of transgender and transsexual lives and partnerships, it makes sense to further consider how these identities are relationally formed, particularly attending to the work required to construct, produce, and reproduce these identities.

**Queer Identity and Identity Work: The Context of Trans Identities and Experiences**

Sociological writing on queerness, to date, primarily reflects ongoing intellectual debates regarding the interface between queer and sociological theory (e.g., Duggan 1992; Epstein 1994; Green 2002, 2007; Moon 2008; Namaste 1994; Plummer 2003; Seidman 1994; Stein and Plummer 1994; Valocchi 2005). While sociologists have made considerable progress in including lesbians and gay men as identity-group-based subjects in sociological empirical investigation, explicitly self-identified-queer empirical subjects remain relatively absent in sociology—particularly with regard to gender queerness.

Providing a synopsis of the emergence of queer politics in the late 1980s, Bernstein (2005) highlights its connections to activist-based social movements (such as
Queer Nation) that were explicitly anti-identity. Rather than organizing around presumably-shared social identities based on object of sexual desire, queer politics galvanized those who shared a burgeoning sense of disenfranchisement from (and reaction against) mainstream lesbian and gay identity-based politics (Seidman, 2001). Further, these politics were informed by postmodern and deconstructionist theorizing, aligning them with academic enterprises and theorists (Bernstein, 2005). What is less clear from histories and descriptions of the emergence of queer politics, however, is the timeline and process by which individuals came to assume individual subject identities as “queer.”

Indeed, “queer” seems to have stalled at the theoretical/conceptual level in sociology prior to the actual introduction of the queer empirical subject—more often invoked as a verb or adjective than a noun. This makes sense in the context of the epistemological foundations of queer theory itself—which are rooted in challenging subjectivity and identity itself (Gamson 2000; Seidman 1994). Indeed, some sociologists have made considerable strides in charting the epistemological and methodological tensions that exist between sociology and queer theory (Green 2002, 2007). Others (e.g. Stein 1997)
have described how existing classificatory systems of sexual identity, reflecting binary sex and gender categorizations of “heterosexual” and “homosexual,” are inadequate when describing people’s actual lived experiences.

I argue that further exploration and elaboration of these tensions can be fruitful to the sociological discipline. As Seidman (1994) contends: “the aim [of queer theory] is not to abandon identity as a category of knowledge and politics but to render it permanently open and contestable as to its meaning and political role” (173). Indeed, this work challenges the notion of “queer” as a politics established against identity, and considers the ways in which “queer,” as an individual subjectivity and identity category, complicates our understanding of both queer and identity-based politics. Focusing on the identity work that women partners of trans men perform in their relationships, I will highlight both the productive force and limits of “queer” in articulating and making socially intelligible queer self-identified subjects and communities.

Identity work can be understood as unpaid labor that serves to concretize or reinforce either one’s own social identity, or the social identity of others (DeVault 1991,
1999). Advocacy, social passing, resistance and identity management remain important yet understudied forms of identity work—a type of emotion work—in which women (primarily) engage within their families (DeVault 1999). Specific examples of identity work performed by women partners of trans men include: consciously using alternate gender pronouns as well as language to describe a trans partner’s body (e.g. “he” instead of “she” and “chest” instead of “breasts”); negotiations and decisions about personal appearance choices in relation to one’s partner; determining when to “pass” as part of a heterosexual couple and when to be “out,” personally, as lesbian, bisexual and/or queer; deciding whether or not to “out” one’s partner; assuming a new personal and/or social identity to make a trans partner more comfortable (e.g. identifying as bisexual or queer rather than lesbian); negotiating social group membership based on personal and perceived social identities; and considering (and encountering) possible ramifications of these decisions across various social contexts (Brown 2009; Pfeffer 2008; Ward 2009).

A Few Notes on “Passing”:
The Context of Trans Identity and Experience

Studies of “passing,” and the social accomplishments of sex and gender, have a long, revered, and not
uncontested history in sociology (see Goffman 1967, Kessler and McKenna 1978, Rogers 1992, West and Zimmerman 1987, Zimmerman 1992). Indeed, the notion of “passing,” itself, is highly fraught. “Passing,” carries the assumption that certain individuals somehow authentically or naturally embody particular identities, to which others can only stake inauthentic membership claims. The concept of passing relies on juxtaposed notions of conscious, intentional, deceptive “dupers” and presumably-natural, authentic, deceived “dupes” (Serano, 2007). Nevertheless, “passing” is often held as the gold standard of “successful” transsexualism—particularly by medical establishments.

While “passing” may grant reprieve from the social stigma and potential danger of gender expression that is ambiguous, it often is tenuous and context-specific. Many trans men who always “pass” in ordinary social situations must live in fear about the consequences of being involved in a serious accident during which the removal of clothing (or, in some cases, accessing legal identification records indicating sex and/or gender status) would seriously impair their ability to be unambiguously perceived according to their gender identity. Studying the notion of “passing” is illuminated by focusing on those ordinarily granted “natural” status within identity categories. Elson (2004),
for example, presents a compelling exploration into women’s experiences of identity post-hysterectomy and whether or not those who undergo the procedure are still women or not. Connell (2009) troubles the notion of “passing” and considers how “recognition” may be a more useful conceptual framework for thinking about the juxtaposition between gender identity and social appraisals of one’s gender.

DATA COLLECTION AND ANALYSIS

In the present article, drawing from data collected for a larger project on the experiences and perspectives of women partners of trans men, I ask: What does it mean to “queer” normativity through identity work practices? In the following sections, I describe participant recruitment and the sample, explain the development of the interview protocol, and review my data analysis process.

Participant Recruitment and Sample

Eligible participants included both current and former women partners of transgender and/or transsexual men who had been in a relationship with a trans man for at least three months. Cohabitation was not a requirement for participation. I sought to interview women partnered with trans men at various stages of trans identification and transition—from those who self-identify as “genderqueer,” with no intention of taking testosterone or obtaining
sexual-reassignment surgeries of any variety—to those who identify and are legally-recognized as “male,” who are taking testosterone and have had sexual-reassignment surgeries.

I recruited research participants using list-serv, email group, and paper-flyer postings targeting the significant others, friends, families, and allies of trans men. I largely employed internet-based “snowball” or social-network sampling, the primary method of purposeful sampling when targeting sexual minorities and their partners (Patton 1990; Rosser et al. 2007; Shapiro 2004). I also formed partnerships with local, land-based, social-service agencies serving these populations. I recruited several interview participants, from diverse geographic regions across the United States and Canada, to distribute materials to potential participants in their local regions.

I conducted 50 interviews with non-trans women for this study. The women I interviewed discussed their experiences in 61 individual relationships with trans men. Participants were, largely, reporting on their experiences in a current relationship with a trans man (42), though a minority were reporting on a former relationship or relationships only (8) and were not currently in a relationship with a trans man. Of those not currently in a
relationship with a trans man, the median time elapsed since termination of the relationship was just under four years. Across all reported relationships, relationship duration averaged 2.2 years with a range from 3 months to 11 years at the time of the interview.

More than half (38) of the 61 reported relationships were cohabiting at some point, with an average cohabiting duration of 1.5 years. 4 participants were in legally-recognized, opposite-sex marriages (all in the United States) with their partner and 4 others were engaged to be legally married and 1 participant was in a legally-recognized same-sex marriage (in Canada). Most participants (45) were not current or former parents/guardians of children; though 2 participants were currently raising children in the home with their partner and 4 others reported formerly-raising children or involvement with raising children who did not live with the couple within the home.

I interviewed women from across 3 Canadian provinces and 13 states in the U.S., which expands existing work on sex and gender minorities focusing almost exclusively on only one or two states, with large urban centers, in the U.S.. In particular, this sample consists of participants from most of the U.S. geographic regions with the highest
proportions of trans men, including two much-under-studied regions with regard to studies of sex and gender minorities—the Midwest United States and Canada (Rosser et al. 2007). Interview participants self-identified as “queer” (50%), “lesbian” or “dyke” (22%), “bisexual” (14%), “bisexual/queer” (4%), “heterosexual” (4%), “undefined” or “unsure” (4%) and “pansexual/omnisexual” (2%). Interviewees’ trans partners (according to reports from their women partners) identified as “queer” (48%), “heterosexual” (34%), “heterosexual but bi-curious” (8%), “bisexual” (8%) and “gay” (2%). 30 percent of the women I interviewed self-identified as “femme” and trans partners were said to gender identify as “a man” (59%), a “trans man” or “genderqueer” (41%). 93 percent of the women I interviewed self-identified as “feminist” and 77 percent reported that their partner also identifies as “feminist.”

Despite aiming for racial and age diversity, only variation on age was successfully achieved. Interviewees’ ages ranged from 18 to 51 years with an average of 29 years. On average, women’s trans partners were slightly younger than they (27 years). Participants largely self-identified as white (45), while 3 participants self-identified as multiracial, 1 as Black, and 1 as Latino. When considering the race/ethnicity of the trans partners
of participants, the sample begins to reflect somewhat greater racial/ethnic variation (e.g. 19 percent were identified as “multiracial”).

The sample was highly educated (59 percent held a Bachelor’s degree or higher and 26 percent held post-graduate degrees). Despite their high levels of education, reported household incomes were well below the national average (nearly 80 percent made $50,000 or less in combined annual household income with nearly 40 percent reporting less than $25,000 in combined annual household income). The trans men partners of the women participants were also highly educated (though less so than their women partners), with 49 percent holding a Bachelor’s degree or higher and 13 percent holding post-graduate degrees.

Trans men partners of the women I interviewed were at various stages of sex and/or gender transition—with most being just a bit over two years into the process. Most were taking testosterone (69%), a considerable minority had had top surgery (38%), while a very slim minority had had bottom surgery of any kind (7%). Likely due (in large part) to testosterone, the majority (63%) of trans men partners of participants reportedly are “always or almost always” “read” in social contexts as male. Approximately 80 percent of women were involved with their trans partner’s hormonal
and/or surgical transition process over the course of their relationship.

**Interviews**

I developed interview questions in conjunction with research positing gender and gendered identities as social accomplishments arising from iterative, interactive practices of “doing” gender (Goffman 1959, West & Zimmerman 1987) and with sociological research highlighting the importance of attending to the processes through which individuals make sense and meaning of their own (often contradictory) experiences (Garfinkel, 1967). My intention was to develop a deeper understanding for how research subjects construct their social worlds through everyday actions and interactions, an approach that may be particularly useful in the context of studying trans lives and families (Rubin 1998; Schütz 1967).

I conducted interviews with participants face-to-face (n=11) whenever geographically possible and conducted long-distance interviews via telephone (n=39). There were no substantive differences in emotional expression or depth of information shared across the two types of interview contexts. Interviewees often expressed gratitude that the research was being conducted, commenting on the lack of available resources reflecting their experiences from their
own perspectives. With interviewees’ consent, I audio recorded our interviews. Interviews lasted from 47 to 150 minutes and averaged 103 minutes. I paid research participants $20 per interview unless they declined payment.

During the project development, data collection, and data analysis phases, I was also partnered with a trans person. While I did not recruit interview participants through revealing this information, I did disclose my status as a woman partner of an FTM genderqueer person if interviewees inquired about my background and/or motivation for studying women partners of trans men.

Several participants spoke to me of concerns sharing information about their lives given that members of trans communities have been interviewed for projects that ultimately portray trans people and their significant others, friends, families, and allies in stigmatizing and/or stereotyped ways. As one interview participant, Mel (28 yrs., ON, Canada), told me: “Given the history of Janice Raymond and stuff, when [my partner and I] first heard about [your study] we were like, not to put it too bluntly, but ‘Are they the good kind or the bad kind?’” I believe that, in these instances, my standpoint as a member of the community provided potential research participants
with reassurance and enhanced their likelihood of participation. On occasion, however, participants would begin to explain particular phenomena (such as surgical transition-related procedures, for example), but then cut their descriptions short, saying: “But you probably know what that’s all about.” In this circumstance, I would inform participants that I wanted to hear more about their experiences from their vantage point and would ask them to explain further. So, in these instances, my connection to the research participants’ community created a level of presumed familiarity that required me to push for greater detail during interviews.

I consistently probed interview participants to expand on what they might only suggest or briefly mention, allowing me to elicit “thick description” (see Geertz 1973) of how gender is actually “done” by women within their relationships with trans men. I encouraged respondents, when offering seemingly-contradictory responses, to reflect upon (and speak about) these contradictions or tensions in greater depth. I also requested that they describe not only what they “do,” but their partners’ reactions, how they felt about these reactions, and/or changed behaviors in response to reactions.
I included the following six major content sections in the interview protocol: 1) Gender and Sexual Identities of Self and Partner; 2) Experiences with a Trans Partner’s Gender Transition; 3) Friends and Family Support and Strain; 4) Community and Social Support and Strain; 5) Relationship Form and Structure and; 6) Language and the Body. Not all sections yielded data relevant to this study. A brief sampling of questions relevant to the present study include: How often is your partner perceived as male when the two of you are out socially? Can you talk to me about your sexual identity? Has your sexual identity shifted at all since being with your partner (or, if applicable, as your partner transitioned)? When you and your partner are out socially, how do you think you are usually perceived by others? How do you feel about that? Are you and your partner currently legally married? Can you tell me more about your marriage? Can you talk to me about whether you and your partner are in a monogamous or a polyamorous relationship? Can you talk to me about your experiences having/parenting and/or any plans to have/parent children?

**Data Analysis**

Interviews were transcribed by a professional transcriptionist I trained to recognize unique terms, language, and expressions common to trans communities.
Subsequent to transcription, I reviewed each transcript for accuracy and fidelity to audio recordings. I imported all transcripts into a qualitative data analysis software program, NVivo/N8, which assists in the digital organization of large quantities of qualitative data (in this study, approximately 2,000 pages of interview text).

I employed blended inductive and deductive coding techniques, informed by grounded theory methods, to distill emergent themes, patterns and trends in the data (see Charmaz 2006, Glaser and Strauss 1967). I read through all transcripts, creating “memos” for each. Each “memo” contained my observations about the interview participant and interview, as well as brief notes about strong or compelling emergent themes and potential links to theory. I next began thematic coding across all interviews. Interviews were coded for approximately thirty demographic variables (“attributes”) connected to the participant, interview, relationship(s), and trans partner(s). Examples of attribute coding include participant’s and trans partner’s race, age, gender identity, sexual identity, educational attainment, feminist identification, reported class, household income, trans partner’s transition-related procedures, length of relationship, cohabiting status and
duration, marital status, parental status and interview length.

Interviews were initially analyzed through an open-coding process to discern emergent themes or “nodes” (Charmaz 2006). Approximately 200 themes and subthemes emerged through this process. The next stage of analysis involved more focused coding that resulted in a distillation of themes through a process known as axial coding (Strauss 1987). Axial coding resulted in a final coding scheme of approximately fifty major themes (“tree nodes”) with various subthemes (“free nodes”). My coding strategies allowed me to identify and juxtapose data providing confirming and disconfirming evidence for themes.

Wherever possible, broader themes were subcategorized into more precise or conceptual themes, generating nuanced subtypes. A brief sampling of major coding themes and subcategories relevant to the current study include: Partner Social Passing Frequency; Feelings About Being Perceived as Heterosexual (Positive, Negative, Mixed); Feelings About Heteronormativity (Positive, Negative, Mixed); Queer Invisibility; Social Acceptance; Dangers of Not Passing; Shifts in Woman’s Sexual Identity as Partner Transitions; Losing Social/Sexual Communities; Sexual Relationship Styles (Monogamous, Polyamorous); and
Parenting. To discern differences in experiences across participants, multiple data matrix analyses were run in NVivo, allowing me to sort excerpts on coded themes by various participant attributes.

**FINDINGS**

Just as trans men have their own transition experiences that they must manage on personal, interpersonal and social levels—so, too, do their women partners. The women I interviewed relayed, in great detail, the various struggles they experienced as they sought to maintain, transform, understand, proclaim and refute various personal and social identities in the context of their relationships with trans partners. In the following sections, I will discuss emergent themes, across these women’s narratives, that describe both identity and how the particular identity work practices with which they report engaging relates to the “queering” of normativity.


Women partners of trans men frequently wondered aloud when I asked them about their own shifting and contingent identities in relation to their trans partners, “What does that make me?” Willow (51 yrs., CA), for example, described
the challenge of personally struggling with issues connected to identity in the context of her relationship with her trans partner: “This relationship brings me to question everything about me and about relationships, about heterosexuality, to ask me about why or how I became a lesbian or was a lesbian.” Martha (25 yrs., MA) articulated the dilemma of self-identification after partnering with a trans man:

I thought of myself as a dyke and then now I’m with someone who identifies as a man and I’m thinking—how do I identify now? I’m not a lesbian. I’m a dyke but I’m not really perceived as queer by many other people right now. And it really messed with me for awhile—what am I? Who am I? Not that I didn’t know who I was, but what identity should I give to people? A lot of times I’d try to adopt my identity as my own and it doesn’t matter what other people think. But it’s hard not to judge myself by other people’s judgments.

Having difficulty figuring out how to self-identify was described often by participants in my sample as not only an internal struggle, but one that emerges from various social and cultural imperatives. As Tiffany (20 yrs., MA) told me, “People are wondering what your sexuality is and even on quizzes I get asked on surveys and things like that and I really don’t know what to put.”

Another participant, Linda (22 yrs., Sydney, Australia), explicitly rejected the social imperative to
identify her relationship with her partner using particular identity labels: “All these people would go, ‘Oh, what does that make you now?’ And I would say, ‘Happy and in love. That’s all.’ I didn’t see why anything else has to matter.”

Current and former lesbian-identified respondents reported facing particular challenges in terms of identity and social/community membership and the attributions others make about their personal motivations, desires and emotional health:

If you’re a lesbian, everybody works so hard to accept it. They accept it, then you fuck them up by being with a trans guy. And then they’re like, ‘Okay, next she’s going to go to men.’ That it’s just this form of evolution to working out your sexual dysfunction or the fact that you were raped or a victim of incest and you’re just graduating in this progressive chain of eventually getting to the pinnacle of the ‘real’ man. And so I sort of feel like maybe people see that as this progressive sort of my growth into being fully, Freudianly, ‘correctly’ socialized to heterosexuality and it just took me longer and I had to go through this range of people to get to this ‘real,’ this mythical ‘real’ man that I guess I’ll fall in love with when I’m fifty or something. -Polly (40 yrs., NY)

Women partners of trans men face challenges in negotiating their own (and their partner’s) shifting identity across a variety of personal, interpersonal, and social contexts.
"I Needed a Language for Not Being Heteronormative": Identifying as Queer

The women I interviewed self-identified as “queer,” “lesbian,” “dyke,” “bisexual,” “bisexual/queer,” “heterosexual,” “undefined,” “unsure,” “pansexual” and “omnisexual.” As such, their sexual identities reflect great diversity. What is most striking about their sexual identities, however, is that a full 50 percent of the women I interviewed self-identified as “queer” [with the next most frequent identities being “lesbian”/“dyke” (22 percent) and “bisexual” (14 percent)]. Importantly, only 4 percent self-identified as “heterosexual.” Nearly 75 percent of the trans men partners of the women I interviewed were perceived as male in social spaces at least half of the time (with 63 percent being perceived as male “always” or “almost always”), while their women partners reported being socially perceived as female almost universally. As such, the women in my sample quite literally are “queering” what many social others visually interpret and perceive as heteronormativity.

Self-identifying as “queer” also emerged in response to the perception that other currently-available choices for expressing one’s sexual identity simply fail to
accurately capture the essence of the relationships that they have with their trans partners:

Before my ex partner... I had been sort of actively claiming that I wasn’t straight... and I was very comfortable telling people that. But I also come from a small town and the options there were very much ‘gay,’ ‘lesbian,’ ‘bisexual’ or ‘straight.’ I didn’t feel that any of those fit me. So I started saying to my friends and to whoever else, ‘Well, I’m not straight’ but that’s as far as it went... I hadn’t had any other partners that would actually complicate that at that point... But [once I met my trans ex partner], it just made sense for me to think about identifying as ‘queer’ and that felt comfortable. – Sage (21 yrs., ON, Canada)

Up until [my trans partner] came out to me I was very comfortable calling myself a ‘lesbian’ or a ‘dyke.’ But the whole thing has really made me question not necessarily my own orientation but the way that people identify and what orientation is. So I don’t really feel comfortable putting a label on it anymore. You can say ‘queer.’ – Robyn (24 yrs., OH)

These experiences stand in contrast to calls for a “post-queer study of sexuality” (Green 2002: 537) in sociology or claims that the term, “queer” exists primarily to symbolize a departure from sexual identity categories (Green 2002, 2007). Rather, in these examples, “queer” emerges as one of the few (if not the only) existing sexual identity categories that can adequately encompass and describe these women’s relationships with trans partners.

In addition to struggles over how to self identify with regard to sexuality, the women I interviewed reported
marked and sometimes painful discrepancies between how they see and understand themselves and how they are seen and understood (or not) in their social worlds and communities. Two themes that frequently emerged for women partners of trans men were actually flip sides of the same coin—becoming invisible in queer social spaces and passing as straight in both queer and non-queer social spaces. Clearly, being “seen” and “not seen,” are powerful social processes that critically inform, validate, and invalidate personal identities.

“I Don’t Want to be a Housewife!”: Rejecting and Resisting Heteronormativity

The women I interviewed often spoke explicitly about not wanting to fall into relational patterns with their partner that might be interpreted as heteronormative. Some women voiced this intention directly to their trans partner—as in the case of Emma (22 yrs., ON, Canada) who spoke of a conversation during which she reportedly told him: “I am a feminist and I don’t want to be a housewife!... that’s not who I am and that’s not who you’re going to be in a relationship with.” Similarly, Frieda (28 yrs., ON, Canada) stated: “He definitely wanted to get married and have children and wanted a very traditional kind of hetero household—mother sit at home, deal with the
kids, father goes to work, that kind of thing. And I didn’t stop dating men to... still have all that. I wanted something else and he just wanted to be like the Cleavers or something.” Toby (50 yrs., MI) told me:

One of my initial reactions when he told me that he had to transition was—I was adamant—I did not want to be seen as a straight woman. So if he wanted to walk around looking like a man and have people see us a straight couple, that was gonna drive me crazy and I would not put up with it. But that didn’t make me question my identity. I mean the reason that I was upset about that idea was that I am a lesbian. I didn’t want to be seen as other than a lesbian. So it was more about how I would be perceived or if he would want me to be perceived that way—which bothered me... One thing that makes it easier for me is that he doesn’t identify as a straight, white man and he doesn’t say, ‘That’s how I identify. I’m a straight, white man. I’m now heterosexual and you are my heterosexual partner.’ So that makes it possible for me to imagine that we can go on.

For these women, then, resisting heteronormativity meant engaging in explicit and sometimes challenging personal and interpersonal negotiations with their trans partners over the relationships between gender identities, expression and roles.

Other women and their partners shared the desire to be seen as non-heteronormative. According to Sage (21 yrs., ON, Canada): “It sort of is a little disturbing to both of us—as individuals and together—to think that we might fall into sort of a heterosexuality, a heteronormative pattern.
Being queer, interacting as queer, presenting as queer and being queer in the world is something that’s really important to both of us.” In a similar vein, Belinda (24 yrs., ON, Canada) explained: “We both say that it’s a queer relationship. Neither of us are interested in passing as a straight couple or having people believe that we’re a straight couple.” These women’s vocal and instrumental resistance to being “read,” socially, as anything but “queer” offers possibilities for queering heteronormativity and homonormativity insofar as it challenges others’ misattributions of identity. Of course, this resistance is also limited given that opportunities to correct social misattributions do not always readily present themselves. I asked women to tell me what identifying as “queer” meant for them in their lives. For some, choosing to self-identify as “queer” serves as a conscious reflection of a political stance that can be interpreted as explicitly counter-heteronormative:

I guess it was sort of never that I was uncomfortable with members of the opposite sex as much as I guess I needed a language for not being heteronormative. So, in a lot of ways, I think... any relationship can be queer no matter what the gender of the people involved. So I guess, for me, it’s sort of about power a lot... and not making assumptions. —Ani (21 yrs., OH)

At first I thought you could only pick ‘gay,’ ‘straight’ or ‘bi’; but I feel like ‘queer’ is
more accurate. Because I think ‘gay’ implies one polarity and ‘straight’ implies another and it doesn’t include a grey area of people having a flexible self-identity—like for androgynous people or anything in that area. So I felt like ‘queer’ was a better identifier for me. Plus I feel like ‘queer’ carries with it a political component more than just like the middle-class gay people who are now, like, you see on TV and everything. ‘Queer’ implies still active, still moving to make the world a safer and better place for people. –Rachel (27 yrs., OH)

Matrix analyses revealed that women judged themselves to more strongly endorse counter-normative practices and politics than their trans partners, particularly when they self-identified as “queer.” Younger women (those under 35 years of age) more frequently worried that their relationships would be misperceived as heterosexual than older women (those 35 years of age and older). There was no difference in reports of traditional versus non-traditional gender roles in relationships across age or sexual identity of participants.

“We’re Just Another Straight Couple with an Extra Set of Tits”: Embracing Heteronormativity?

Despite the fact that most of the women I interviewed self-identified as “queer” and expressly distanced themselves and their relationships from characterizations as “heteronormative,” a vocal minority made statements that could be characterized as supporting heteronormativity. These statements ranged from the seemingly blatant—such as
the quote from Lily (26 yrs., FL) that opens this section—to those couched in the feminist language of gender performativity. First, I will examine the more direct statements from women that seem to support characterizations of their relationships as heteronormative. Second, I explore those statements that present heteronormative relationship configurations as performative. Third, I present statements that reveal some of the nuanced complexity of women’s endorsement of heteronormativity to suggest that certain forms of embracing heteronormativity may, indeed, be quite “queer.”

When I asked Ellia (24 yrs., NM) how she would describe the type of relationship that she has with her partner, she responded: “We’re just a straight couple. He’s my fiancé, we’re getting married, we’re just a straight couple.” Margaret (29 yrs., MA) offered another perspective:

I guess maybe the other part of being radical or feeling radical is being able to choose when not to be. One of the first conversations we ever had was about kids, how many we wanted, and what the time frame was and we aligned completely... Sometimes, when you’re super radical, you get to not be radical. And I want our kids to have one set of parents with one last name.

Margaret’s conceptualization is an interesting and provocative one—it suggests that privately-held queer
identities (which may be socially invisible and/or hidden) are still radical. Furthermore, it suggests that, based on this internally-held queer identity, it is possible (and perhaps even acceptable) to access certain privileges and heteronormative institutions that, seemingly, do not challenge or erode the queerness of these privately-held queer identities. But is this really possible?

Teresa (24 yrs., ME) discussed the ways in which she embraces certain aspects of heteronormativity, but highlighted some of the tensions she experiences in the context of these desires:

A lot of my roles kind of resemble traditional heterosexual feminine roles. A lot of his roles resemble traditional heterosexual male roles. So that’s really hard to separate and to feel good about. I love doing those things. I still love doing those things. I’ve always loved doing those things; but it is harder to do those things and to love them and to— I feel like I have to justify them, whereas I never felt like I had to justify them before... I want [my partner] to open doors for me. I want him to carry heavy things. I like to cook and take care of my partner. I like to dress up and put on make up and be taken on dates. I avoid cleaning things. I’m very organized. Both of us are really loving towards children but I would really want to carry a child if we were to do that.

As a self-identified femme lesbian feminist, Teresa describes feeling that she must justify her desires for relating to her trans partner in ways that reflect heteronormative family relational patterns. Furthermore,
she discusses how she has always had these desires but that she has only felt the need to justify them in the context of her relationship with a trans partner—not in her relationships with women-identified female partners. Such sentiments represent a double-standard and additional burden faced by women who partner with trans men insofar as heteronormative relational patterns may be less believably explained as “performative” within these relationships than they are in lesbian relationships—including those that are butch/femme in structure.

Despite this double standard, many of the women I interviewed did articulate their experiences enacting what others may conceptualize as heteronormative relational structures in ways that center upon performativity.

We’re both very sort of intrigued by 50s décor and roles and all that sort of stuff; and so we will often take on the roles. I will take on the role of housewife or whatever and, a lot of the time, it’s this tongue-in-cheek sort of thing. He’ll be like, ‘Get me a beer!’ and I’ll put on an apron and run off into the other room, ‘Here ya go, dear!’ It’s very sort of playful. Again, it’s the performance of gender instead of really taking it all that seriously. And I’d say in some ways they’re inherently flexible because they aren’t typical presentations of gender. But, at the same time... the kitchen is my kitchen and all this sort of stuff that’s very gendered... Sometimes I’m concerned that other people might not quite get it and that they might think that we’re really espousing these very sort of traditional roles... I think the only times that I’ve felt more concerned is at certain points in
my life I have been very passive in a lot of different ways and I’ve been concerned that if I’m going to be playing a feminine role then that sort of fits it too much—I don’t want to be the passive wife. And so the only times that I’ve been concerned is when you feel like you’re taking it too far. I’d much rather be the tough wife. -Eliza (24 yrs., NS, Canada)

He I think had this fantasy of really wanting to be in that kind of like 50s dad comes home relationship—which I don’t think exists for anybody anymore. But, in his head, part of becoming a man was becoming a ‘Leave it to Beaver’ dad-like coming home and mom has dinner on the table and whatever else is happening. But it turns out he cleans house more than I do and he cooks more than I do. So I think, at this point, our relationship is undefinable by present terms; so I would just say, ‘queer.’ It’s just different. It’s different than anything available. -Rachel (27 yrs., OH)

For Eliza and Rachel, performing heteronormativity is a reportedly conscious relational dynamic that can also be flexible, ironic, counter-heteronormative in practice, empowering and difficult to define.

For some women, embracing heteronormativity is something that occurs on an emotional and ideological, rather than relational and interpersonal, plane. According to Polly (40 yrs., NY):

I still crave a sort of heterosexual... connection where I’m able to stay home with the kids and be a stay-at-home mom. And I would kill my kids if I was a stay at home mom, it’s not like I’m saying I want that! But there’s this sense in me that that’s what I’m supposed to do and that I need to be with them and pick them up and drop them off at school and pick them up from...
school... I think I have this ideology and I think now, being with a man, I feel more able to kind of sometimes fantasize about that in a way that’s very normative but is not, in any way, a representation of my life. But there is some pleasure there of thinking that... I think [my partner] gets aggravated by some of my normative desires.

Polly’s testimony highlights the recalcitrance of heteronormative imperatives and sentimental attachments to heteronormative relational forms that Connell (1987) might describe as a form of cathexis. Polly’s experience also presents opportunities to consider additional possibilities for queering heteronormativity that extend well beyond the performative. Despite her avowed emotional attachments to some aspects of heteronormative family dynamics, the actual structure of Polly’s everyday family life defies characterization as heteronormative in ways that are both conscious and intentional. It is also noteworthy that Polly’s trans partner resists her emotional attachments to heteronormativity as trans partners sometimes produce and encourage such attachments among their women partners in order to concretize their own maleness and/or masculinity (see Ward 2009). For example, another interviewee, Charlene (24 yrs., ON, Canada), stated:

[My partner’s] experience with dating other lesbian-identified women was that they were very adamant about not falling into what was traditionally sort of the woman’s role—rebelling
against that. And he’s sort of a traditionalist where, for him, he likes the idea of it because it really reinforces his own sense of masculinity.

Polly and her family, therefore, present queer alternatives for conceptualizing heteronormativity in more complex ways—including consideration of the juxtapositions between our ideological/emotional attachments and relational/behavioral connections to it.

Matrix analyses revealed that women ages 35 and older reported desires for normativity more often than those younger than 35 years of age. Those women with trans partners who reportedly passed “always” or “almost always” were most likely to report traditional gender roles in their relationships and to report that their trans partner embraced normativity. Women were also more likely to report traditional gender roles in their relationships when their partners transitioned over the course of the relationship and were trans-identified when the relationship began (as opposed to those whose relationship began as lesbian or those who were with partners who had already completed most of their transition by the time the relationship began).
**Queer Tensions:**

**Challenges of Queer Identity and Relationship Structures**

**Limit(ed/ing) Language**

A provocative theme that emerged among some women I interviewed who self-identified as “queer,” was the sentiment that “queer” can become so all-encompassing as a catchall identity that it may be in peril of becoming an empty category. Gamson (2005) describes this tendency as the “queer dilemma.” While the lack of boundedness associated with “queer” as an identity can make it particularly appealing to those for whom other categories feel overly restrictive or inappropriate, for others this very unboundedness can, paradoxically, feel quite confining:

I could say I’m queer but I also am not so sure I want to signal that identity either because I feel sometimes queerness is a little irresponsible because it’s just so overused that it becomes sort of meaningless. I don’t even know what people [are] trying to indicate to me when they say that. So I don’t know if I feel comfortable saying it... I think my sexual identity doesn’t have a particular proclivity or erotic choice that has anything to do with a pre-existing terminology.... So I feel like in my life I slide myself into the term that worked mostly to make other people understand me—not necessarily because I feel like it really is an adequate description of who I am. —Polly (40 yrs., NY)

For Polly, therefore, “queer” serves as an identity category in which she reluctantly places herself for the
purposes of becoming intelligible to others rather than from a sense of its personal relevance and “fit” with her own life. Amber (19 yrs., ON, Canada) offered another example of the limitations of “queer” as an identity signifier:

‘Queer’ is such a vague term. If you say you’re queer then people will often just assume that, if you’re a girl, then you’re a lesbian. They don’t really think of bi... But I date men so I don’t want to be considered a lesbian. I’m bi, I date both and I want that acknowledged. So I don’t want to be just kind of lost in the queer umbrella. If you’re going to look at me and want to know what box I go in, put me in the right one.

For Amber, then, “queer” is a category that renders her bisexuality and attractions to men invisible. Both Polly and Amber express the potentially-constraining power of a seemingly ‘umbrella’ identity category such as “queer.”

Another theme that emerged was women defining their relationships with their trans partners at the interstices of queer and heterosexual identities. Several participants told me that they conceived of themselves as a “straight queer couple” or “queer straight couple.” One participant told me that this label had emerged after (then-coupled) artists Michelle Tea and Rocco Kaiyatos began identifying in this way publicly and on internet-posted interviews. One of the women I interviewed, however, had another take on
the tendency for formerly-lesbian-identified women to identify in these ways after partnering with a trans man:

How can you be honoring your partner’s transition and maleness if you actively state that you’re a lesbian? Because doesn’t lesbian mean that you love only women? To me, that discounts and actually leads to biphobia. When I’m in these meetings with these women—there’s this biphobia that happens. Like, ‘I can’t be bisexual. I’m heteroqueer now.’ Like saying, ‘Okay, I can’t identify as lesbian and I guess now I’m in a heterosexual relationship; but it’s queer because my partner’s trans.’ Instead of just being able to say, ‘I’m bi because now my partner is male.’ To me, going to then identifying as bi is more supportive of their maleness than becoming queer because that is still not solidifying them becoming male.

-Maya (30 yrs., CA)

Clearly, women and their trans partners must often work to (re)define their identities—as individuals and in relationship to one another—in ways that both challenge and extend existing linguistic and social categories.

Furthermore, the rising visibility and media presence of partnerships between women and trans men, particularly via the medium of the internet, contributes to the emergence of queer cultural communities through which language and support may be continuously developed, challenged and shared.

**Passing as Straight and Queer Invisibility**

When discussing how they are perceived by others, in social spaces, as heterosexual, women sometimes discussed
how it was a social phenomenon highly desired by their trans partner while their own feelings remained more ambivalent or even conflicted. As Frieda (28 yrs., ON, Canada) discussed:

[My partner] definitely was into the whole idea of us passing as a straight couple so nothing queer really fit into our everyday lives or relationship because his main priority was passing as a man and that I should look like a woman so we can pass as a straight couple and he can blend in. So he encouraged me to look more feminine and to have my hair long and things like that; whereas I was starting to figure out my sexuality and everything and I’ve always been one to shock and be different and wear different clothes or have my hair different. So I wanted to shave my head and I wanted to pierce things and I wanted to do things that normal, boring, feminine, straight women didn’t usually do and they didn’t fit in with what he wanted... I kind of felt guilty or selfish if I tried to dress the way that I wanted—if something wasn’t feminine enough or something. Basically, when we were going out together, I tried to look as feminine and as boring as I could so we could pass as a normal, boring couple.

Polly (40 yrs., NY) offered a very similar description of her experiences that was even more focused upon challenges connected to reinterpreting her own identity, the social perceptions of others and social group memberships:

I think I’m still trying to sort out what it means not to be a lesbian. There is a nice recognition when you’re walking down the street with your girlfriend and you’re holding hands and see another lesbian and they see you as a lesbian and it’s like you feel like you’re all in the same club. So I miss that... I just sort of feel like this level of boringness. I guess I have to
say I definitely got off on the transgression of having men look at me and then kissing my girlfriend. And now it’s like I have men look at me and then I kiss him and it’s like, ‘Big whoop.’... It’s just not the same charge. So I think I miss that. I miss some of that transgressive sort of fucking with people’s heteronormative assumptions and now I’m just like basically following the script and it feels a little weird. It’s not quite as fun. [I miss] the performativity of being gay... Sometimes it’s scary and you don’t do it. So I definitely don’t miss being scared.

For Frieda and Polly, being in social spaces with a “passing” trans partner elides their own queer visibility, creating the paradoxical situation of gaining access to social privilege while simultaneously losing access to (and/or recognition by) sexual minority communities with which they strongly identify/identified. Furthermore, both describe “passing” as heterosexual as “boring,” highlighting the power of visibly-queer social identities to provoke and dynamically elicit cathectic, sexually-charged, emotional responses based upon their connection to transgressiveness. These experiences also indicate resistance to homonormativity as they focus on the importance of maintaining a non-normative queer identity. Polly’s remark about passing being safer also highlights another pragmatic aspect of passing in the context of violence against those who are visibly gender and/or sexually non-normative.
Most women who reported being perceived as part of a heterosexual couple by family, friends and/or strangers acknowledged the privilege that such perception entails, while simultaneously expressing discomfort with this privilege and bemoaning the inevitable tradeoff of losing social recognition as queer. Margaret (29 yrs., MA) stated: “I have mixed feelings about it. Sometimes I really like passing. There’s a real social benefit to it; it makes it a lot easier.” Veronica (21 yrs., NY) told me: “It makes me feel safe in the world,” but also commented on the flip side:

It makes me feel really invisible and that’s something he and I both deal with a lot. We don’t like the invisibility factor. We’re always looking for ways to be visible and to educate others. So maybe that’s the only way because I don’t really know how much we can walk down the street wearing shirts that say, ‘We’re not so straight!’”

When I asked Maya (30 yrs., CA), who had just had a baby, about how she and her partner are perceived when they’re in public, she responded: “It’s annoying because we get such privilege everywhere we go... My mother’s like, ‘Thank God!’ And I provided her a grandchild, so I’m ‘normal.’ In some respects it’s good and in other respects I wish everyone had that.” Eliza (25 yrs., NS, Canada), who is legally married to her trans partner, told me: “With family... there’s a thing in the back of my head that
wonders if it’s so easy for them because now we’re a straight couple. It’s almost less explaining for them to do in the future. Sometimes it’s a mixed blessing.” These women’s testimonies reveal a keenly-developed consciousness of the way queer people experience the sometimes-marginalizing gaze of non-queer people, poignantly highlighting the disjuncture between self identification and social perception.

Participants also described the experience of losing queer social communities as they became invisible within queer communities. Margaret (29 yrs., MA) said:

> When I see lesbian couples with a baby, I smile at them and have this moment of like, ‘What a cute couple with a baby.’ And [my partner] and I have this experience together because, at one point, he had been externally identified by others as a lesbian. So we have this moment of, ‘Oh, another queer couple with a baby!’ But [lesbian couples] don’t see us that way. So they don’t see that we’re having this moment of camaraderie like, ‘Yay, you did it, we’re going to do it!’ They see us as like, ‘Oh, those straight people are looking at us.’

Maya (30 yrs., CA) offered a similar story:

> We can go anywhere and not have people looking at us except when we’re in [a gay neighborhood] and then it’s like, ‘Oh, another breeder couple invading.’ And I just want to wear rainbow flags everywhere I go so I can prove that I belong in this community. Sometimes when I’m talking to people... in the queer community, I have to purposely state my involvement with [LGBTQ organizations] in order to kind of have a referral—like I belong. It’s annoying and
frustrating dealing with everyone’s assumptions and there are definitely assumptions made on everyone’s part.

Lilia (22 yrs., CA) also articulated the not-uncommon experience of having her queer identity erased by others within the queer community:

My lesbian friends... [are] like, basically, ‘Oh, so you turned straight.’ Just letting them know that I don’t consider this a straight relationship since he’s very queer. I consider it queer. I can see how it’s straight in some context. But it’s queer. His experiences of growing up as a woman [are] what makes it queer. He didn’t have male privilege growing up even if... he felt like a male inside, so it’s different.

Women partners of trans men faced challenges of marginalization from queer communities not only from the social distancing and (mis)recognition by lesbian others, but sometimes as a result of their own partner’s wish to disassociate from these communities. Belinda (24 yrs., ON, Canada) spoke about losing her connection to lesbian community when her partner disengaged from it:

It was tough for me as someone who had just kind of come out as a lesbian. I remember wanting to do lesbian things and go to lesbian bars and that kind of stuff. And I remember a switch in him where he was like, ‘No, I’m a straight guy.’ And I think that was hard because there was this community that I was trying to get involved with that suddenly didn’t work with his identity... I didn’t really know that there was the option of him saying, ‘I’m queer.’ I just figured that’s what happened when someone became trans—you were a lesbian and now you’re straight.
Belinda articulates the limited (and limiting) nature of social models currently available for women partners of trans men. She simply did not know that there were other ways (than “straight male”) for her partner to identify, and that these different identifications might, in turn, generate alternate possibilities for her own identity and membership to social communities.

Susan (23 yrs., TN) articulated another difficult aspect of women’s partnerships with trans men: the fact that one only belongs to a community of partners of trans men while one is partnered with a trans man:

I lost my community. You know, I’m not like default in the lesbian community anymore... there’s nothing that takes its place. You lose the lesbian community and you really don’t get anything else. There’s no straight community. Not only that, but really hardly anyone perceives you as being part of it before [your trans partner is on] hormones. And the partners’ community—you’re only a valid member of that as long as you’re in your relationship, which has nothing to do with you and everything to do with them.

Susan’s experience speaks to the tenuous and externally-contingent nature of some queer communities insofar as women are only a part of the “partners of trans men community” while they are partnered to trans men. As such, their identities are always dependent upon their partner’s identity rather than something more intrinsic to their own
selves and identities. Ani (21 yrs., OH) discussed this challenge:

I don’t think he’s necessarily trans identified—which was difficult for me at first because it’s a lot easier to be able to [say]: ‘Yes, I’m queer, I’m dating a trans man,’ as opposed to, ‘Yes, I’m queer, I’m dating a man.’ People won’t ask you to justify yourself in the same way—which is fucked up. Your sexuality clearly relies on your partner.

These sentiments also echo earlier writings of lesbians and, more specifically, lesbian femmes, prior to the establishment of “lesbian” and “lesbian femme” as socially-intelligible identities around which social communities could materialize and organize (e.g., Kennedy and Davis 1993; Krieger 1983; Ponse 1978; Taylor and Whittier 1992). These quotes quite clearly articulate the experience of living one’s life in the liminal space of insider/outsider with regard to the queer community. Participants’ stories reveal the impact of not only being rendered invisible in terms of their own queer identities and relationships, but also the critical importance of social recognition in determining in-group/out-group membership.

Queer invisibility was of particular importance and consideration to many of the femme-identified women I interviewed. Indeed, many of these participants discussed how others’ recognition of their queerness often relies
upon their connection to a partner who embodies female masculinity in a culturally-intelligible way. For example, Teresa (24 yrs., ME) told me:

I think as a femme... I don’t feel like I’ve ever been seen as queer when I’ve been by myself. I think so often in my history of dating people that the people that I dated would make me visibly queer. So it’s really interesting when the person I’m dating makes me invisible. And so I don’t gain any visibility as a lesbian or as someone who is queer when being out in public with [my trans partner] the way I would with past partners. So that’s really, really hard. However, in a way it sort of feels almost liberating because now I and only I am responsible for my queer visibility. So I feel like I’ve really kind of owned that and looked at that and looked at how unfair it is. In queer communities, femmes are seen as invisible at all times. I think that’s really unfair. I think that it’s sexism honestly that femmes are seen as invisible beings when really we’re radically queer in our own right and we’re just never given that credit. It’s been a really interesting experience. It’s taught me a lot about my own identity and it’s taught me a lot about my own visibility as an individual.

As Teresa articulates, femme-appearing women partnered with trans men, therefore, may face particular barriers with regard to being recognized as a member of the very communities within which they live their lives. Similarly, butch-appearing women who partner with trans men may face their own unique challenges with regard to identity and social (mis)recognition. Mel (28 yrs., ON, Canada), who described her own gender identity as more “butch,” stated:
“There are definitely times when we’re more sort of a pair of boys.” As such, Mel and her partner (who identify as a queer couple) are sometimes misperceived by others as a gay male couple.

“What Box Do We Fit In?”: Queering Marriage, Monogamy, and Parenting

Marriage and monogamy, often regarded as the primary bastions and symbols of heteronormativity and heteronormative privilege (and, increasingly, a primary goal of homonormative politics), are institutions and practices that are particularly “queered” when considering the lives and experiences of women and their trans partners. Indeed, the relationships created when women legally marry trans men test and push against legal and social definitions of sex, gender, “opposite-sex” marriage and “same-sex” marriage. A small minority of women in my sample (10 percent) reported legal “same-sex” or “opposite sex” marriages with their partners, while many more reported contemplating, discussing and actively planning such legal unions. An even larger minority of women I interviewed (more than 25 percent) reported that their relationship with their trans partner(s) is (or has been) polyamorous.
Women’s reasons for desiring (or not) entry into legal marriage were varied and complex; but most mentioned the importance of gaining access to the material and social rights and privileges that accrue to those who are married. When I asked Linda and Mel if they and her partners had talked about marriage, they responded:

Yeah, definitely. Not as in we need to be married to validate our relationship, but to be officially married on paper so that we are legally each other’s next of kin on paper. I mean, it’s pretty upsetting to think if something happens to either one of us that, technically, we’re not considered each other’s partners in the eyes of the law and would have absolutely no control over what happens to each other in that circumstance. –Linda (22 yrs., Sydney, Australia)

And we’ve discussed it and our decision on whether to be married or not comes down to a case of protecting our rights as a couple. It usually comes in the context of, you know, would it help our tax situation [laughs] or hinder our tax situation. If one of us were to be sick would we want to be sure to be able to sit with the other person in the hospital, to be the one that decisions about life support would be deferred to—if we were to have children, all those sort of maybe more legal implications are where we’re concerned. Is there something in the legal status of marriage that would make our lives a bit easier, you know? –Mel (28 yrs., ON, Canada)

Anna (48 yrs., CA) offered a similar response, connecting her intention to marry to the ability to access certain material benefits and articulating the inner conflict that accessing such social privileges entails:
We made the decision really quickly. It was like, ‘Oh, I need healthcare.’ He was starting a new job, so if I was going to go onto his healthcare it should happen right away. So it was like in a three or four day period we talked about getting married for the first time and then got married all in the same blink of an eye. I was aware though, during that time, of, ‘My God, this is something that I really don’t completely believe in and never believed that I would do and I certainly wouldn’t do it when, like, half the universe of people who would like to get married can’t because they’re not legally able to.

Donna (40 yrs., FL) said: “I work for the federal government. I think we should get married so he could be on my insurance. He doesn’t have any insurance right now and to me that’s really unsettling financially.” Indeed, these women’s narratives articulate the catch-22 nature of (as well as personal ambivalence toward) gaining access to an institution to which they may be both politically and ideologically opposed in order to access valuable economic, legal and social benefits.

Women also described the numerous tensions and complicated questions inherent to navigating the marriage issue when gender and sexual identities complicate decisions that must be made based on currently-available, limiting options. As Martha (25 yrs., MA) discussed:

I don’t particularly care to be married legally. I do think marriage is a patriarchal institution and I don’t agree with it though I do like the celebration of two people sharing their lives together and making that commitment to one
another. So we would talk about that—about marriage and family. I think he would have liked to get married legally and have that be recognized. Though we talked about, ‘How would that happen? Because if you’re identifying as male. And if you ever get your birth certificate changed or if you don’t get that changed, how do we get married? Do we get married as a lesbian couple? Do we get married as a straight couple if you get everything changed? What happens?’ So that, in a way, made it seem intangible. Yes, we’d like to be recognized, but how? How are we going to be recognized and how will we recognize ourselves? Are we going to come to an agreement? Are we getting married as dykes? Are we getting married as just the two people that we are? Are we getting married as a trans couple? As a straight couple? What are we? So it brought up a lot of identity issues around what being married means. What box do we fit in [laughs]? I think that he would have liked to have been married as man and woman. Whereas I would like it more to be me and him [laughs] no matter what our identities are. But I would like it to be a queer marriage—a queer arrangement of people, not a man and a woman getting married.

Even when women and their trans partners access legal marriage, these marriages often rest on shaky legal ground with potentially frightening and destabilizing material consequences should they be externally challenged. For example, Maya and her partner have a legal, “opposite-sex” marriage in the U.S.. They are also both recognized as the legal mother and father of their infant daughter. However, as Maya (30 yrs., CA) discussed:

We are legally married... as long as no one contests it... He’s on the birth certificate and we’re legally married [so] he’s [our daughter’s father by] default. If you’re legally married if
something were to happen to me, [our daughter] goes to him automatically. However... my mother holds a trump card. In other words, if I were to die, she could conceivably potentially sue for custody saying that she’s the nearest relative, not [my partner]... There’s this legal limbo we live in. We joke around but it’s not really joking that we can’t set foot in Florida and a couple other states because we wouldn’t be recognized as being legally married at all. He would never be recognized as [our daughter’s father].

Maya’s family, therefore, provides a striking example of how the rights and privileges conveyed by legal marriage are often tenuous, at best, for some queer families.

Some of the women in my sample expressed anti-marriage sentiments or situated their support of either “opposite-sex” or “same-sex” marriage as far less personally or socially important than other issues and causes. For example, as Trixie (27 yrs., IN) stated:

I’m not really into the idea of gay marriage. If that is something that any gay person wants, I’ll definitely support them in that—that they should be able to have whatever they want. It’s just not what I want. My idea of living my life successfully has nothing to do with assimilating to that kind of heterosexist idea of a man and a woman and a unit and children. That’s just not my plan and it’s not my goal or my dream and it never has been well before I identified as queer at all... That’s not what I want and so when I think about pressing gay or queer issues, marriage is never one of them. It’s not in my agenda to show the public or the world that I’m just like them, I just happened to be queer... I’m kind of just trying to resist assimilation in a lot of ways and I think that when people find out I’m queer they want to let me know how they
feel about gay marriage; and that’s like at the bottom of the list. I think that things like, you know, AIDS research are way more pressing queer issues and I’m just not interested in making gay marriage any sort of—it’s not my plan and I don’t think it’s a major issue that I need to rally behind right now.

The women I interviewed also discussed relationship configurations that differed from the monogamous relational structures generally considered emblematic of heteronormativity.

More than 25 percent of participants in my sample reported that their relationship with their current and/or former trans partner was polyamorous at one point or another. The women I interviewed described a wide variety of romantic and sexual relationship structures, and equally varying feelings about these diverse configurations. Robyn (24 yrs., OH) discussed that, among her community of queer-identified individuals, polyamory is not only common, but perhaps incumbent to “being queer”: “I know a lot of people who have been in open relationships because it’s kind of like people are expected to be in open relationships... it’s kind of the norm. Like you’re supposed to be in an open relationship because, otherwise, that’s like oppressive.” Ellia (24 yrs., NM) offered a similar perspective: “The more people we meet in life it seems like people are very into open relationships. A lot of the queer
community that we’ve been meeting lately, they all seem to be in open relationships.” The women I interviewed discussed numerous subtypes of polyamorous relationship configurations and varying degrees of negotiation between partners regarding the contours of sexual and/or romantic relations with others outside of their primary relationship.

At times, power imbalances during these negotiations emerged. As Emily (23 yrs., ON, Canada) discussed: “He was the one who wanted it to be poly; I didn’t really care either way. I would have rather it be monogamous but he said that he would only have the relationship, be in an actual committed relationship, if it was poly. Only when I started dating someone else regularly did he say that he wanted it to close.” Emily’s comment highlights the tensions that may exist when negotiating polyamory on hypothetical versus actual practice levels. Emily seems to downplay her own concerns and desires for a monogamous relationship while also having her partner change “the rules of the game” once Emily begins to actually engage in sexual activity outside the primary relationship. In addition, Emily’s comment presents a queer understanding of “commitment” that contradicts typical understandings of both heteronormativity and homonormativity—namely, that
polyamorous relationships can, indeed, be committed relationships. Several participants discussed the ways in which their involvement in polyamory contributes to personal and interpersonal growth. According to Nina (25 yrs., CA):

For me, being monogamous I have often seen it related to being in a codependent, unhealthy relationship. So it wasn’t just about we can sleep with other people but it was about acknowledging that we get things from other people. I think that has been important for us—acknowledging he cannot get everything from me, including sex, and that’s okay. And that it feels really good. It is something that we really appreciate and value. So it took a lot more negotiating in the past but it’s pretty easy going now.

Mel (28 yrs., ON, Canada) offered a similar analysis and also discusses the stigma surrounding polyamory and the “closeting” that sometimes surrounds such relationships:

[Polyamory] has its challenges and I think it encourages strong communication because in order to be in a successful poly relationship you need to have really strong communication skills... so I think that it’s helped to develop that. Some of the challenges are jealousy exists—it’s not something that ever gets in the way. It’s not something that causes conflict but it’s something that we acknowledge that we will feel from time to time. Other challenges are the social stigma that can exist outside of our queer or poly-positive circles of friends. We can’t—we’re never that open about it. We’re not open about being poly to our parents and to extended family or strangers. So there can be challenges with that—people don’t really understand it or people think that it’s impossible.
The polyamorous relationship configurations, that a sizable portion of respondents described, challenge conceptualizations of these relationships as “heteronormative,” insofar as heteronormativity relies upon individuals establishing intentionally exclusive, monogamous pairings, the intentional non-exclusivity of the polyamorous relationships, described herein, stands in marked contrast.

Matrix analyses revealed that women from the Western U.S. were more likely to hold anti-marriage sentiments than those from other regions of the United States, Canada, or Australia. Queer-identified women were more likely to be anti-marriage, and to report that their trans partner was more interested in marriage than they, than any other sexual identity group. Bisexual-identified women were more likely than any other group to want to be married. Women’s endorsement of marriage, as a personal goal, increased along with the degree to which their trans partner socially passed—with those whose partner passed “always” or “almost always” most frequently reporting the desire to marry. Women from the Western U.S. and Canada reported the highest rates of non-monogamy in their relationships, while women in the Midwest and Northeast U.S. reported the highest rates of monogamy. Queer-identified women and women younger
than 35 years of age were more likely to report practicing non-monogamy in their relationships than those who were lesbian identified or older than 35 years of age.

DISCUSSION

Transgender and transsexual individuals, and the families they create with their partners, are slowly becoming more socially visible within both mainstream and lesbian, gay, bisexual, transgender, and queer (LGBTQ) social life. As communities and families with trans members continue to grow and develop, it is critical for sociologists to learn not only about the trans members of these communities, but about those closest to these individuals as well. As this study reveals, it is often the persons closest to trans individuals who perform critical, iterative forms of identity work that translate a trans partner’s personal gender identity across multiple social contexts. Although outsiders may conceptualize or misunderstand these relationships as “lesbian,” the women I interviewed (and their partners) primarily identify as “queer.” Furthermore, none of the participants considered their relationships “lesbian.” As Valocchi (2005) writes: “queer analysis... [focuses] on... the many ways in which individual desires, practices, and affiliations cannot be accurately defined by the sex of object choice” (754). As
such, considering these couples’ experiences as instances of “homonormativity” is inappropriate. However, it cannot be denied, that using other definitions of identity (including legal markers such as drivers’ licenses and birth certificates), some of these couples may be classified as “same-sex.” As such, these couples present unique challenges to the field of sociology.

This research underscores the critical importance of sociological investigations of subject claims of performativity. As Valocchi (2005) writes: “a sociological queer analysis... combine a queer sensibility about the performative nature of identity with a sociological sensibility about how these performances are constrained, hierarchical, and rooted in social inequality” (766). I would assert that a queer sociological analysis would also challenge assertions that those in relationships with trans people must have relationships that are somehow more transgressive or counternormative than other types of relationships. As Namaste (1994) writes about queerness and queer theory: “We cannot assert ourselves to be outside of heterosexuality, nor entirely inside, because each of these terms achieves its meaning in relation to the other... We can think about the how of these boundaries... how they are created, regulated and contested” (224). This analysis
offers further insight into the “how”—detailing the ways in which gender and sexual identities and roles are created, regulated and contested in the context of women’s relationships with trans men.

One possibility for expanding current sociological theorizing around heteronormativity and homonormativity is to consider the multiple dimensions upon which they (re)produce and are (re)produced by social actors. As such, we might fruitfully begin not only critical examinations of how social actors engage in heteronormative and homonormative social practices, but the ways in which social actors resist and defy them as well. Further, I assert that it makes sociological sense to expend greater energy understanding the pragmatics behind queer identities and decision making in relation to accessing and expressing particular forms of normativity and privilege. As Seidman (1994) writes: “decisions about identity categories [are] pragmatic, related to concerns of situational advantage, political gain, and conceptual utility” (173). We might also begin to theorize not only the interpersonal, relational and material practices of heteronormativity and homonormativity, but their personal, ideological and emotional components. In so doing, perhaps we can introduce and develop concepts that acknowledge and more accurately
reflect the increasing diversity of family forms and dynamics in the twenty-first century.

\[1\] Original air date: April 03, 2008

\[11\] Whether our sex chromosomes are configured in XX, XY, XXY, XXX, XYY, XXXY, XYYY or some other arrangement.

\[111\] Depending, of course, on where the partners reside. Currently, most states do not legally recognize same-sex marriage or civil unions—and this recognition, when it does exist, is often under constant legal challenge.
REFERENCES


Rogers, M. 1992. They all were passing: Agnes, Garfinkel, and company. Gender & Society, 6: 169-191.


Chapter 3

Bodies in Relation—Bodies in Transition:
Lesbian Partners of Trans Men and Body Image

What Do We Already Know About Body Image
Among Lesbian Partners of Trans Men?

While there is a growing literature on lesbian body image, this research does not generally include, as subjects, self-identified lesbians who are partnered with female-to-male (FTM) transgender and transsexual men (trans men). Nonetheless, the reality of diversity within the lesbian community resists oversimplification. Lesbian identity is not a monolith, and its parameters are both contested and ever-shifting. In this paper, I argue that the failure of current researchers of lesbian body image to consider the experiences of self-identified lesbian partners of trans men 1) ignores and silences this burgeoning community; 2) offers an incomplete understanding of both “lesbians” and “lesbian body image” and; 3) forecloses unique opportunities for greater understanding of how negative body image can be a dynamic and relational process between partners as well as an individual problem arising from external social-cultural messages,
imperatives, forces and institutions. Further, I discuss how negative body image in this relational context may affect body practices of self-identified lesbians and their FTM partners, as well as the ability of trans men and their lesbian partners to engage in mutually-fulfilling sexual and non-sexual intimacy in the context of their relationships.

**Research on Lesbians and Body Image**

Atkins,' *Looking queer: Body image and identity in lesbian, bisexual, gay, and transgender communities*, is one of the most comprehensive and frequently-cited sources for personal writings on body image and identity within LGBT communities (1998). Notably, an entire section is devoted to considering transgender and intersexual identities and body image. Despite the comprehensiveness and focused attempt to represent LGBT communities at the interface of body image and identity, however, this anthology is not without its missteps and omissions with regard to intersections between sexual and gender identities in connection to body image. In one article, a female-bodied person, who lived as a man until his death, is referred to (by the author) as “her” and a “woman” (Crowder, 1998). In addition, throughout the pages of this extensive volume, the perspectives of lesbian partners of trans men about
their own body image are nowhere to be found. Complicating the issue, many of the articles on lesbian body image discuss the supposedly “freeing” aspect of feeling less subjected to male standards of beauty or the male gaze among lesbians (e.g. Myers, Taub, Morris, & Rothblum, 1998; Tucker, 1998). These perspectives—both on lesbian body image and transgender body image—neither encompass nor articulate the perspectives and experiences of lesbian partners of trans men.

In academic research on lesbians and body image, self-identified lesbian partners of trans men may never come to be considered as research subjects due to their failure to “fit” neatly into researchers’ operationalization of what constitutes lesbian sexual identity (e.g., see Owens, Hughes & Owens-Nicholson, 2003; Wagenbach, 2003). As a result of not being “seen” as lesbians by social science researchers, the self-identified lesbian partners of trans men are generally not represented in these studies, despite the fact that the results are often assumed to apply to “lesbians,” in general. Across many of the studies on body image and sexual identity, researchers attempt to draw quantitative comparisons between lesbians and heterosexual women in terms of degree of disordered body practices (such as anorexia, bulimia or binge eating) or negative body
image rather than discerning whether or not there are qualitative differences between these groups in terms of the forms and types of disordered body practices and negative body image each group reports.

This paper is intended to provoke consideration of how absence or exclusion of these voices, experiences and perspectives may distort what we think we know about “lesbians” and body image among this diverse group. In addition, I demonstrate that thinking about body image as a relational construct, another theme not fully elaborated in the academic literature on body image, may usefully expand our understandings of body image as a potentially dynamic, socially-embedded, co-constructed process occurring within primary relationships.

Research Design and Method

The power of qualitative research ultimately lies with a holistic analysis of narratives to discern themes and trends in how research participants make meaning of their experiences within and across interviews. As such, I do not aim to represent either my interview participants’ words, or my own interpretive claims, as absolute, unequivocal or objective “Truths.” Rather, my analysis will necessarily be a (co)construction of the narratives of the women partners of trans men, informed both by substantive content of the
interviews and my interpretations of this content within and across the interviews. Through my research, I offer one of the first substantive and focused explorations into narratives of women partners of trans men to discern their own unique framings of identities, experiences, body image and relationships.

Data for this paper derive from a larger study that more broadly explores the narratives and experiences of the women partners of trans men. Research participants were recruited using snowball sampling and list serve, email group and paper flyer postings targeting the significant others, friends, families and allies (SOFFA) of trans men. At this writing, I have conducted twenty, semi-structured, in-depth telephone and in-person interviews with women partners of trans men. Of these twenty interview participants, seven self-identified as “lesbian” and/or “dyke.” For this paper, due to limited space, I have drawn a subset of the five richest narratives to enable a more in-depth analysis using a grounded, case-study approach. It should be noted that the two remaining lesbian-identified participants’ narratives do not provide disconfirming evidence to my findings and are in general alignment with the narratives I present in this paper.
My larger sample is comprised entirely of cissexual/cisgender (non-transsexual/non-transgender) women who are largely (but not exclusively) white, in their twenties and thirties, well-educated and from the United States. As such, this sample does not fully reflect the rich diversity to be found among women partners of trans men and, in future data collections, I intend to engage in targeted recruitment of a broader range of self-identified women partners of trans men. Additional demographic information for the lesbian-identified participant subsample described in this paper is provided within the case studies that follow.

**Toward a Theory of Relational Body Image: Case Studies of Lesbian Partners of FTMs**

I first began to consider the possibility that body image issues may be usefully conceptualized as relational and dynamic, in ways that have not yet been explored in the research literature, as I compared published, autobiographical narratives of trans men to the narratives I collected during my interviews with women partners of trans men. Conducting a content analysis of published FTM autobiographies, I noticed that the theme of body dysphoria was nearly omnipresent throughout the narratives. While this was not an unexpected finding, what I found most
evocative was the intensity of the language that some transmen used to articulate their negative feelings about the parts of their bodies considered social markers of female sex. In many instances, these narratives revealed unadulterated hatred of, and dissociation from, particular aspects of the authors’ bodies. In particular, breasts, hips and body fat were some of the most frequent sites of elaborated displeasure.

In his autobiography, Mark Rees writes that his breasts were “a deformity I abhorred” (1996, p. 14). He goes on to state: “In the privacy of my room I pummelled [sic] my hated breasts with fury” (p. 16). Mark Angelo Cummings (2006) refers to his breasts as “torture” and a “plague” (p. 8). Rees (1996) reports being “horrified and disgusted” about menstruation and devotes particular attention to descriptions of the ways in which body fat and body fat distribution had a profound effect upon his self image:

One of the things which really bothered me was that my hips and thighs were too large for a normal male. It had worried me when living as a female and did so even more now that I was living as a man. A determined effort was made over some years to ameliorate this, both by exercise and dieting. This anxiety became more acute if other areas of life were not going well. It was obvious that everyone took me for male, so my fears were groundless, but nonetheless they overcame reason and I became almost neurotic about it. [My
partner] said that she feared I could slip into anorexia...I became so neurotic about losing weight that friends and family began to worry about me. In spite of the treatment, my body was still much too feminine for my peace of mind. I hated it. In fact, there wasn’t much to like about myself at all.... Nothing could have removed my feeling of hatred for my body” (pp. 99; 112; 122).

In his autobiography, Dhillon Khosla (2006) pejoratively equates fatness with femaleness on several occasions and discusses his own mission to build lean muscle on his chest.

Aren Aizura describes intense body-based self scrutiny he experiences when in public:

I’m walking down the street in summer. It could be any street, any city, any version of summer: sweaty, sweltering monsoon, or dry windy heat. As I walk, I’m calculating the passability of my moving body. How masculine is my walk today? Are my buttocks tucked under, concealing the tell-tale femininity of their curves? Are my hips swinging, or am I ‘leading from the shoulders,’ as so many FTM passing tip sites assure me that all men do? Am I emanating broadness, a comfortable ownership of the space around me? (in Sennett, 2006, p. 13).

Cummings describes anguish he felt living in his female body: “Being in the wrong body is a crime. Death is appealing to those of us, who are encased in the wrong shell, who are trapped in a flesh of darkness, that... sickens us to the point of madness” (2006: 33). Schleifer (2006) reports on an interview with a trans man: “‘Joe’
refers to a self that struggles to make sense of its body.

He told me that, for him, transitioning ‘is about living in a body that doesn’t make you sick and alienated every time you look in the mirror or take a shower’” (p. 64).

It is important to remember that the force of these narratives clearly reveals the agonizing and frustrating disjuncture some trans men report experiencing between their physical bodies and their sex and/or gender identifications. I highlight the intense negativity of many of these narratives not to impose judgment upon these self-directed feelings, but to push us to consider that such strong personal expressions of intense body dysphoria and surveillance, directed toward markers of female sex, may have powerful (though likely unintended) negative effects upon others who read, hear or witness them. This may be particularly so for those who are closest to the “messenger,” and whose bodies, ostensibly, share such social markers of female sex. In this paper, I consider how some of these expressions by trans men may be internalized and acted upon by their women partners. In addition, how might experiences of body hatred and surveillance affect a site so completely dependent on sharing one’s body–sexual intimacy?
As one trans man notes in the documentary, *Transparent*: “I’m not the only one who transitions; everyone around me transitions.” In the following case studies, I present rather extensive narratives of five, lesbian-identified partners of trans men to assist us in developing a theory of *relational body image*. These narratives demonstrate how the body image of one partner may affect both the body image of another, as well as the ways these bodies may relate (sexually and non-sexually) to one another.

**Toby**

Toby is white, fifty years of age and lesbian identified. Her partner is also white and is forty-five years of age. Toby reports that her partner self identifies as a transsexual man and does not want to be seen as a cissexual (non-trans) man. Toby’s partner is on T (testosterone) and has undergone both “top surgery” (in this case, bilateral radical mastectomy with chest recontouring) and a hysterectomy (one type of “bottom surgery”). The two had been together for eleven years at the time of my interview with Toby. During the first nine years, their relationship was considered “lesbian” by both partners. Despite the fact that her partner was already two years into his transition at the point of our interview,
Toby still identified as lesbian and discussed that she had self-identified as lesbian for more than thirty years—since she was nineteen years of age. Toby described her partner's current sexual identity as "undefined."

Toby spoke at length about her partner’s experiences with body dysphoria:

The body dysphoria’s the thing that doesn’t get talked about when people write or talk about transsexuals. And from what I’ve seen him go through and what I have talked to other people about, it is the most profound aspect of transsexualism and of being transgendered... It’s this sense that the body is not right. Or the body’s okay, it’s just not the one you want it to be.... Being on hormones has made it much more tolerable, but it hasn’t disappeared...When his doctor says, ‘Well, your whatever count is too high, why don’t you drop the testosterone back a bit?’ Within a week—because it’s a daily dose—he starts feeling the dysphoria really strongly again.

Toby also stated that her partner’s body dysphoria has had considerable effects upon his willingness and ability to share his body with her in sexual and nonsexual ways. While her partner showed her his genitals when he first began to take testosterone, she had neither seen this part of his body, nor spoken about it with him, in at least a year at the point of our interview. Toby stated: “I can see him from the waist down, but he doesn’t show me what’s there.”

Toby’s story became more complicated as she revealed that she and her partner, at her partner’s request, have
not been sexually intimate together since a year or so before he began actively transitioning (approximately three years at the time of our interview). When asked if her partner’s body dysphoria had, in any way, affected her own body image, Toby responded:

I talked with someone whose partner is also transitioning who said, ‘It’s starting to make me hate my body.’ But I don’t have that experience. I have begun to feel more self conscious at times. I became more self conscious thinking, ‘Well, yeah, I know intellectually it wasn’t that he didn’t like breasts. He just didn’t want them on his body. They didn’t belong there.’ But I started feeling self conscious about having breasts and being visible—like stepping out of the shower or whatever. There’s kind of a sense, for me, slight dis-ease. And also because of his comments about his future sexuality. Like, you know, maybe I don’t want you to see me—maybe you don’t wanna see me...But as far as my sense of me and my body—there hasn’t been much of a trend.

Toby’s narrative is highly informative insofar as she simultaneously acknowledges that other women partners of trans men experience negative body image in relation to their partner’s gender dysphoria, denies that her partner’s body dysphoria has had a significant effect upon her own body image, yet reveals a developing self consciousness over her own breasts and naked body.

I asked Toby if she could speak at greater length about the lack of sexual relationship between herself and her partner over the past three years:
It’s kind of been shit for me [laughs], to speak frankly. Part of my understanding of having a partner, for me, is having a sexual relationship. It’s not the most important thing, obviously, ’cause otherwise I would have left. But that’s a piece of it. And as [my partner has] gone through these ups and downs—dealing with the body dysphoria stuff and dealing with kind of getting his own sense of his feet under him—he’s absolutely not wanted to even touch me... I said, ‘Look, you know, if nothing else is going on, you have to hug me once a day. I just need it to know you’re really here.’ He couldn’t even do that. So um [exhales loudly] so it’s an issue. Like I say, I wait. I’m waiting. We’re very slowly working toward trying to become closer again now.... And I’m hoping we’ll eventually move into physical contact and mutual sex again.

Thus, while Toby asserts that her own body image has not been seriously impacted by her partner’s body dysphoria, she admits that the absence of a sexual relationship between them has had other effects upon her relationship. Toby spoke further about the painful severing of physical connection and intimacy during the transition experience:

I can remember crying a lot in various—I was going to say, ‘moments,’ but it was more like, you know, periods of several hours. Me crying and saying, ‘What’s going on? I need to know what we’re doing. You won’t even hug me. I’m telling you that I need to be touched to know you still kind of exist—that I exist in your world. You say you can’t even hug me.’ [very long pause] He was pretty inarticulate—very distressed and pretty inarticulate because he didn’t exactly understand, for himself, what was going on. He just knew he felt really bad and didn’t know—didn’t know what he might want from me, how he wanted things to go. He just felt like he had to withdraw and figure out what the heck was going on.
Toby’s narrative painfully articulates the manner in which an FTM partner’s physical (both sexual and nonsexual) withdrawal, in response to body dysphoria, can have profound effects on both the relationship and the partner who has been “shut out.” This perspective is important given that body dysphoria is often discussed as a highly individual problem.

**Michele**

Michele is thirty-two years of age, white and self-identifies as a dyke. Her partner is twenty-four years of age and white. They had been together for one and a half years at the time of our interview. Michele described being lesbian-identified since she was eighteen years of age—the past fourteen years of her life. Michele stated that her partner had been transitioning since they met. According to Michele, her partner had self-identified as lesbian since the age of seventeen, but then began to question his gender identity at the age of twenty. He came to self-identify as “queer,” feeling that a lesbian identity was overly confining, and had also recently begun to self-identify as transgender. Michele reports that while her partner is interested in top surgery, he is not currently taking (or
planning to take) T because “he doesn’t want to seamlessly meld into the male culture.”

Michele described how her partner’s gender presentation interacts with her own in ways that affect their social intelligibility as a couple, as well as her personal sense of self:

The more I look like a girl and present as a heterosexual girl, the more likely [my partner] is to pass as a boy. And sometimes that makes me uncomfortable because I don’t like having my queer identity elided over—especially since I’ve owned it for so long.... It makes me angry. It makes me feel invisible. It makes my queer identity feel invisible.

Michele described how her own body comportment and (sexual and nonsexual) bodily interactions with her partner have become more salient to her as he contemplates top surgery:

In some ways, it will be a relief for [my partner] not have breasts because [my partner] right now has breasts, you know, and so they remind me [pause]. It’s not as though I have to pretend that he doesn’t have breasts because of the open pact between us and, in fact, [my partner] even sits with his shirt off regularly—has shifted back to that. He had stopped doing that for a long time. But they’re certainly not a part of our erotic life whatsoever—I don’t touch them. In fact, I even have shifted the way that I sleep at night. Because it used to be that I would sleep up against [my partner’s] back and slide my arm around his waist and sort of tuck it underneath his body, but then I would end up touching his breasts. But for a good two months after he first came out and informed me of his growing feelings of transness, I didn’t know what the hell to do with my arm. I would try various things. I really couldn’t figure out how to
sleep. So snaking it around the waist felt a little feminine and girly. Sort of sleeping like this [makes a cupping motion with each of her hands, with each person facing away from one another] replicated too closely the metaphor of being sort of shut out by this... We used to shower together frequently and we stopped doing that. Often, I will have to help him get his binder on... and if I touch his breast or something it’s like, ‘Oh God, I’m sorry’.... I know that he’s not comfortable with his chest at all, feels alien from it, desperately wishes it gone.

When I asked Michele whether or not her partner had experienced any body dysphoria since beginning to identify as transgender, she stated:

[He] is very physically active right now and is experiencing his body in positive ways for the first time. And rugby has definitely has helped with that, mountain biking has definitely helped with that. We’ve started running even more. I mean we run every day and we lift three times a week—we increased that a lot—so it’s gotten a lot better but there was a time where early in the spring where [he] was just expressing and feeling a huge amount of body dysphoria just like nothing could get his chest flat enough. Nothing. Like he would stand there talking about how much you could see his chest and there would be nothing there. It drove me mad... But that drove me just absolutely crazy because nothing would be enough and there are still days when nothing is enough to quell [his] sense of disgust with his chest. Now he tells me—and I believe this is true—he actually likes lots of other things about his body. He likes how strong his body is. He likes that he has a lot of muscle for a female-bodied person. There’s a point of macho pride without T. [speaking as her partner] ‘Those boys they just sit on their lazy asses and take T and they just get muscle like crazy. I worked for every bit of this.’
Michele’s narrative reveals that, for her partner, great focus on exercise and muscle development is required to stave off feelings of body dysphoria. I inquired about whether or not her partner’s attention to (and focus on) his body has affected her own body image:

[He] had such a critical eye for every portion of his appearance... [He] got into such a minute scrutiny of his body and how it appeared and other people’s trans bodies and how they appeared. It’s like that minute scrutiny rubbed off onto me and so, suddenly, I was being really hypercritical about my own body in ways that I hadn’t been before, and finding displeasure in it... And this is crazy, this is dysphoric—feeling like my thighs are too flabby. Like my body, itself, is distasteful. My face is showing signs of age in ways that are unattractive. Those kinds of issues. Not helped by the fact that [my partner] doesn’t frequently express appreciation for my body. So those interior messages weren’t getting rebuttal from my partner. Finally, I spoke with him about this issue. He regretted that that was happening for me and sometimes remembers to say, ‘You look nice.’

In this quote, Michele clearly expresses that her own body image has been negatively affected in relation to her partner’s critical focus on his body.

Like Toby, Michele also reported sexual dysfunction in her relationship that she attributes to her partner’s body dysphoria. When I asked Michele to discuss some of the ways that her partner’s shifting gender identity has affected her, she discussed a sexless period in their relationship that lasted about four months:
That period was, well, the sex totally shut down and he had no language to tell me why—couldn’t figure out what he wanted, couldn’t figure out why he felt so strange and awkward in himself and with me. [He] shut down emotionally in a lot of ways... It was a period of real isolation as far as intimate contact of any sort and also very little language to talk about what was going on. So finding out that he was feeling as though he was a trans person and wanted to explore that far more consciously in his daily life was a huge relief in some ways. It was like—‘Oh my God, there’s something here!’ because, otherwise, it’s really easy to... and I did deeply personalize the lack of desire, the sexual rejection, because it’s the most intimate state of your life to have constant rejection in that area is tough turf to understand.... I was thinking he’s bored so what can I do to make it exciting. Let’s see, he no longer finds me attractive for whatever reason... Lots of self-loathing along the lines of why am I not attractive? What can I do to generate any kind of sexual energy? And also feelings of desperation. And towards the end, feelings of inevitable failure.... When this first started [my partner] wouldn’t vocally articulate that he wasn’t able to engage in sex. So I would get a cold shoulder. And, at one point, the phrase I used with a friend was—‘It was worse than trying to have sex with a corpse.’ Because at least you don’t expect a corpse to ever respond, no matter what you do, the corpse is not going to respond. And so I would get no response whatsoever and actively pulling away from and turning and no language around that to explain what was going on initially.... I felt totally undesirable—utterly vacated of any kind of ability to generate any sexual desire in my partner and also the real pain around myself feeling quite a bit of desire and knowing that it was absolutely not reciprocated.... And then we talked about that and I talked about how devastating that was to me and I’m still feeling the effects of that period, it really shook my sexual confidence in a way I have yet to recover from. So that and then occasionally it turned into [him saying] like, ‘I don’t know what I want but what you’re doing is
not what I want but I don’t know what I want. So
search your mind and come up with something else
to offer me.’’"

Michele’s complex and painful discussion of this time in
her life reveals that what took place in the past continues
to affect her in the present. Michele expresses her
feelings of negative body image and a reduced sense of
sexual desirability in response to her partner’s withdrawal
and inability to express desire for her. At the end of this
quote, we also learn that Michele was ultimately held
responsible for eliciting a sexual response—which likely
heightened her sense that her partner’s lack of sexual
desire stemmed from her personal failure or lack of sexual
attractiveness and desirability. Michele also discussed
continuing sexual difficulties in her relationship with her
partner.

For example, Michele further discussed how her partner
only initiates sex when he is drunk and that they often
have sex when they are both drunk. In addition, Michele
stated that, “During sex, he wears generally more clothing
than he would wear even going to bed at night.” Michele
hypothesized that these actions make it easier for her
partner not to have to fully experience all of the
conflicting feelings that he has about his body, sex and
having sex with another female body. I asked Michele to
reflect on all that she had told me and to consider what she thought was at the root of these issues around sex and intimacy in her relationship. Michele stated:

It is the inability of our partners to be connected to their bodies, to feel comfortable in their bodies, to feel sexual desire at all, to not feel a sense a shame around that. And it is discouraging to me that every single trans partner that I have spoken with struggles with this issue. People who have been in relationships for ten years, five years, a year and a half, two years, for all of us it is a huge issue... [I know a] woman who is a pretty prominent partner of a trans person in [our] community and after we had a conversation about this issue, [she] put a post up on one of the moderated forums about how she was going to say that she and her partner—she’s going to come out of the closet! Even though they love each other and they’re married and they’ve been together this many years, they have—from the beginning and continuously—struggled around having an active sex life. And she also thinks that it’s a sign of an epidemic that we’re not talking about and that both people suffer from that and that partners bear a huge brunt.

**Tiffany**

Tiffany is twenty years of age, white and lesbian-identified. Her partner is a nineteen years of age, Asian trans man who self-identifies as heterosexual. Tiffany and her partner had been together for two years at the point of our interview and lived together only during summer months. Tiffany’s partner has been transitioning since their relationship began.
When I asked Tiffany to discuss whether or not her identity as a lesbian had been challenged by her partner’s transgender identity, she stated:

When I first started to be with him, it became a thing where I shaved my legs every single day because I was trying to be feminine. I think now that I’ve been with him for awhile I think it’s definitely something that has calmed down. I mean, I don’t notice it as much. I still shave them and I always have... I think in the beginning it was a lot more of an issue because I felt that I had to over-feminize myself—that I had to always be in pink and that I had to always act very feminine and girly because I was trying to offset him and make him feel more masculine. And I think, for awhile, that made me question myself because I was worried about having to work this hard to look female and I wondered if it was what I was supposed to be doing.... I mean it’s definitely a problem with sexuality because it seems to come up a lot. People are wondering what your sexuality is and, even on quizzes, I get asked on surveys and things like that and I really don’t know what to put because I can’t put that I’m heterosexual and I can’t put that I’m a lesbian. I almost feel like I’m compromising him by saying that I’m a lesbian because he’s still female and I don’t want to do that.

In this quote, Tiffany describes a process that, in some ways, is similar to Michele’s discussion of how social intelligibility shifts in response to the physical appearances of each partner. In this case, however, Tiffany describes intentional attempts to modify her own body and gender presentation, in feminizing ways, in order to contrast and bolster her partner’s masculinity.
Tiffany also discussed dynamic and critical interfaces between her own and her partner’s race, gender and sexual identity in terms of bodies, feelings and the social world:

I’m taller than he is and I’m Caucasian and I have a bigger build than he does because he’s genetically smaller, so I always felt uncomfortable and almost out of place when I was with him at the beginning of the relationship because I was so much bigger than he was. So I felt that if I over feminized myself that that would kind of be downplayed and not as noticeable. I think it was for as much of my own comfort at the time as it was for his. Some of it was to try to make him look more masculine and some of it was because I wasn’t positive how I felt in a relationship with a trans-guy, and I wanted to make myself feel more comfortable especially when we were out in public and he wasn’t passing 100% in the beginning, I wanted to make myself feel more comfortable and not have people look as much.

In this instance, Tiffany notes that the visual contrasts between her and her partner’s bodies, which she attributes to racial differences, serve as important social signifiers of gender and sexual identity in ways that challenge both her partner’s FTM identity and her own initial insecurity with being in a relationship with a trans man. In addition to deliberate efforts to modify her appearance in order to highlight her partner’s masculinity, Tiffany describes intentional conditioning she undertakes personally:

I think both of us have really trained our brains to see his body as masculine and mine as feminine and it’s really—even though by doctor’s standards our bodies are identical, I see his as being
completely different from mine. And he sees it as being completely different than mine. To a doctor, the same parts are there. But to me, they’re not. It seems different for some reason.

These narratives reveal the ways in which Tiffany engages in conscious processes of internal and external body (and body image) transformations that are both active and critical to the production of her partner’s FTM identity in personal, interpersonal and social contexts.

**Kendra**

Kendra is twenty-one years of age, white and self-identifies as a dyke. Her partner is a twenty-four years of age, white, bisexual-identified trans man. At the time of our interview, the two had been in their relationship for three years and were living together. Kendra’s partner was formerly dyke-identified, but began to identify as transgender and to transition eight months into their relationship. Kendra’s partner is on T, has had top surgery and wants a hysterectomy.

Like Toby, Kendra told me that while she feels her partner has body image issues, she does not feel that her partner’s body image issues have affected how she feels about her own body. Nonetheless, similar to Tiffany’s narrative, she relayed a story that revealed her efforts to change her physical appearance in relation to her FTM
partner’s desire to be perceived as a man in a heterosexual relationship. In particular, Kendra discussed aspects of relational identity in terms of gender presentation, gender identity, sexual identity and social perceptions:

When he first came out and started transitioning, it really was difficult because he expected me to become more feminine and play more of the ‘straight girl’ role, the straight girlfriend, and be very feminine. And he wanted me to grow out my hair— I had my hair very short—and dress in women’s clothing so that way he thought I wouldn’t ‘give him away’... When he wouldn’t pass, he would always look to me and be like, ‘Well, you gave me away. It’s pretty obvious you’re a dyke and people just assume that I’m a dyke, too, I guess.’... I was really upset about it for a long time because I felt like this was his transition and why would I have to change who I am just so he could be happy with who he is? And it took me awhile to realize that I needed to do this for him at this point in his life. It was something that was really important to him and I have the rest of my life to look however I want. But at this point in time, it was very critical to him, emotionally—to feel safe—that I didn’t look like a dyke.

This narrative is a clear example of a self-identified lesbian partner engaging in body work, connected to gender and sexual identities, in order to bolster or concretize the masculinity/maleness of an FTM partner. Kendra also discussed how she experienced confusing feelings about her own body, gender identity and sexual identity upon beginning her relationship with her transgender partner:

When he came out to me as trans, I really thought for a long time about my own gender. I was happy
having breasts and a vagina, but I would start having dreams where I would have a penis. And then I would start wondering, well, could I be trans too? And that was kind of conflicting for awhile. And it also, like, the whole sexual orientation thing was a big challenge—coming to terms with people asking me, ‘Well, does that mean that you’re straight now?’ And then I would be like, well, does that mean that I am? I really had a big problem with my identity as far as sexual orientation goes because I had no idea how to identify any more. I didn’t know if I should change it because I’m technically with a man now? Or does it not change because, biologically, the ‘parts’ still aren’t there? Or what?

Kendra captures some of the personal and social challenges that the women partners of trans men confront on a daily basis in terms of the complex and often contradictory intersections between their own and their partners’ bodies, gender identities and sexual identities.

**Teresa**

Teresa is twenty-four years of age, lesbian-femme-identified and Asian. Her partner is a twenty-four years of age, white, butch-identified trans man who is queer-identified in terms of sexual identity. She states that her partner is on T, has had top surgery and is perceived by everyone as male. He has a lesbian-identified history. The two had been together for a year and a half at the time of our interview and did not live together at that time or in the past.
I asked Teresa whether her partner’s body image had ever intersected with her own:

I started to feel really bad about my body and I think that is because—not necessarily how [my partner] talks about his body but the way in which he interacts with his body. And I see him being really uncomfortable with his body and I think that’s just kind of rubbed off on me. He’s very uncomfortable. He doesn’t like to be seen naked. So, after getting out of the shower, for example, he’ll immediately wrap a towel around his waist or put on underwear immediately. So I stopped walking around naked. Whereas, before, I was very comfortable being naked, for the most part. But now, I very rarely walk about naked. I didn’t even realize that I was until another partner [of a trans man] asked me if I walked around naked and if I ever had. And I was like, oh my God! Like, oh wow, okay! So that’s changed. So that was really hard to realize. It’s that subconsciousness. He is really conscious about weight gain. But, mostly, the weight is distributed differently because he’s on testosterone. When he gains weight it is not—it doesn’t make him look feminine. He carries it sometimes in his thighs—which really bothers him—but mostly in his stomach. He started to get that male belly thing. He doesn’t like that but he can joke about it. For me, I think I just felt less—again, this is self conscious—I think I felt less proud of my curves. So when I gain weight, I feel bad about that. Whereas, before, I was like, ‘Oh, look at me, I look a little curvy this month—that’s great.’ Now I’m kind of like, ‘Oooh, I’m fat. I’m getting fat, I’m going to do something because I’m fat.’ Whereas I used to say, ‘I’m getting a little curvier.’

Teresa’s narrative echoes Michele’s in terms of personally experiencing negative body image in relation to an FTM partner’s body dysphoria—particularly with regard to body fat. Her story also parallels Toby’s in the discussion of
trans men hiding their bodies (after showering, for example) and partners adopting some of these same body-hiding practices. Like Toby, Teresa also mentions a larger community of women partners of trans men who regularly discuss how they are affected by this issue.

Similar to Toby and Michele, Teresa also discusses the painful sexual difficulties that have arisen in her relationship with her partner due to body dysphoria. She makes it clear that grappling with this issue is not confined only to the participants whose voices appear in these case studies. Indeed, the recurring theme of difficulties with sexual and non-sexual intimacy emerging across these narratives recalls, or perhaps parallels, another controversial theme discussed in the literature—that of “lesbian bed death” (see Rothblum & Brehony, 1993) in ways that compel closer, updated examination. These narratives may assist us in discerning how body image is implicated in declining sexual intimacy between partners. I asked Teresa to describe some of the primary topics that she talks about with other women partners of trans men:

A lot of the time, most of the time, it’s about sex and commiserating about lack of sex or about intimacy changing or about...yeah, just not feeling good about our own bodies because our partners don’t like their bodies. And so, sometimes, I feel like a lot of times as a partner I take that on and I start hating my own
body, which is hard. It’s been a really big struggle, actually, in the last year and a half for me to stay connected to my body and still love my body when I partnered with a person who changed their’s. So, a lot of times it’s about that, it’s about our bodies or about our sex lives. I would say sex comes up most often.

As asked to describe, in further detail, the way body image issues have impacted her sexual relationship with her partner, Teresa stated:

[My partner] and I rarely have sex. When we do, it’s totally on his terms... It is consensual but it still is totally on his terms... It’s never spontaneous. It’s always a really big deal, like you have to do a lot of individual prep work and it has to be this really emotional, really present experience. And that’s really hard because I want my partner to come home from work and tackle me on the bed. It’s hard. I understand that it is about him intellectually. I understand it is about his body issues. But, emotionally, it feels like it’s about me not being desirable.

Teresa stated, with great emotion, that this had been the status of sexuality in her relationship for all but the first three months since it began.

**Conclusion**

In this paper, I attempt to bring the voices of lesbian-identified partners of trans men from invisibility to foreground in a discussion of lesbians and body image. I have considered some of the ways in which complex interrelationships between sex, gender, gender identity, race, sexuality and sexual identity may broaden our current
discussion of body image, which tends to construct negative body image as an individual problem that arises from internalization of external social-cultural messages, imperatives, forces and institutions. I also challenge some of the parameters that have been placed on the category of lesbian and discuss the general omission of the perspectives of women partners of trans men in research on body image and identity.

Examining published autobiographical narratives of trans men, in conjunction with narratives from interviews I collected from self-identified lesbian partners of trans men, I suggest that researchers more carefully consider the interpersonal and relational aspects of body image. While the case studies offered in this analysis are both limited in number, and not fully representative of the diversity that exists among lesbian-identified partners of trans men, I offer them as a provocative starting point with the hope that future research will begin to not only include these voices, but to feature them in their own right. I contend that listening to the unique perspectives and experiences of the women partners of trans men can teach us a great deal about the complex interconnections among sex, gender, gender identity, bodies, body image, race, sexuality and sexual identity by challenging and expanding our pre-
figured notions of who and what comprises each of these categories.
References


Chapter 4

“Women’s Work?”:
Women Partners of Trans Men Doing Housework & Emotion Work

In 2002, a Special Status Committee convened by the Council of the American Sociological Association remarked on the discipline’s “deafening silence” regarding scholarship on transgender issues and lives. Since this time, published scholarship on transgender and transsexual individuals has slowly become more common (e.g. Dozier, 2005; Hines, 2006; Rubin, 2004; Shapiro, 2004; Schilt, 2006). As focus on transgender and transsexual individuals emerges in sociology, partners of transgender and transsexual individuals have not yet appeared as intelligible subjects within published sociological research. To begin addressing this silence, I present research on the shifting nature of contemporary families and family work—expanding sociological knowledge of (non-trans) heterosexual, lesbian, and gay cohabiters and families to include cohabiters and families comprised of transgender and transsexual men (henceforth referred to as
“trans men”) and their non-trans women partners (henceforth referred to as “women”).

Transgender individuals, communities, populations, and families are quite diverse and non-monolithic. As such, I chose to focus on constituents from one particular type of trans family configuration/form (women partners of trans men) since my aims and intention were to establish substantive knowledge on a particular population. Women partners of trans men were chosen as the subjects for this study due to their relative absence across the academic, professional, biographical, and autobiographical literatures. Further, this study focused upon non-trans women as this group comprises the largest demographic of partners of trans men (Chivers & Bailey, 2000; Devor, 1993; Lewins, 2002).

To date, no nationally-representative, peer-reviewed data source exists on the lifetime prevalence and growth trends of transgenderism and transsexualism. As such, accurately ascertaining the size and growth of these populations remains elusive at best. Nonetheless, a sociological approach to estimating significance and growth of these communities may usefully include consideration of other social parameters such as media representation and visibility. Once confined almost exclusively to
sensationalistic portrayals on television talk shows such as Jerry Springer (as chronicled by Gamson, 1998), trans lives and realities are now receiving more serious media depiction and consideration than ever before. The lives of transgender individuals are depicted in films and documentaries such as Boys Don’t Cry (1999), Normal (2003), Soldier’s Girl (2003), Transamerica (2005) and Transgeneration (2005).

Over the past two years alone, trans individuals and families were featured on three episodes of The Oprah Winfrey Show (air dates on 05/15/07, 10/12/07, 04/03/08), which reaches an estimated 49 million viewers per week in the United States and is broadcast to 117 countries worldwide (HARPO Studios, 2008). Most recently, Winfrey teamed with People magazine to profile Thomas Beatie, a pregnant transgender man, and his wife Nancy. According to broadcast ratings, this episode was a season-leader in terms of viewership (Albiniak, 2008). Trans issues have also been extensively covered by every major U.S. television broadcast news network and the British Broadcasting Channel (BBC). Furthermore, print and internet media increasingly features stories focusing on the lives and experiences of trans individuals (e.g., Barkham, 2008, April 08; Tresniowski, 2008, April 14).
This study responds to an existing gap in the sociology of families literature, in the context of increasing trans visibility and media representation, with regard to women’s experiences in transgender family life. In this paper, I use data from a larger study, on women’s reported experiences in relationships with trans men, to focus on two particular aspects of family life: household labor and emotion work. Household labor and emotion work were chosen as the foci of the present analysis as these topics constitute a great deal of the existing sociological scholarship on women in families over the past thirty years. This existing scholarship provides a rich (though incomplete) empirical foundation upon which to draw comparisons to women situated within yet-unstudied, contemporary family forms.

In this study, I address the following primary research question: What do narratives from women partners of trans men, on the performance, structure and division of household labor and emotion work within their relationships, reveal about “doing gender” and “women’s work” within contemporary families? This research builds upon existing sociological literature on families to consider how emotion work may be a useful conceptual framework for understanding the particular forms of labor
in which some women partners of trans men engage in the context of their relationships. Learning more about the everyday experiences of women partners of trans men holds the potential to expand not only how sociologists of the family understand and theorize about the work members of this minority group perform within their relationships, families, and communities, but also the myriad understudied ways the work women, in general, constructs and contributes to family life in the twenty-first century.

**Background**

*Notes on Language, Concepts, and Terminology*

It should be understood that, as is common to identity-based communities, the following primer on terms and concepts is both incomplete and contested; there is no universally agreed upon set of definitions for lesbian, gay, bisexual, transgender, and queer (LGBTQ) identity and experience. While this section is intended to provide a cursory overview of terms and concepts as I intend and understand them for the purposes of this study, additional resources are available for those seeking more in-depth information about transgender terminology, lives, experiences and communities (e.g. Devor, 1997; Green, 1999; Namaste, 2000; Serano, 2007; Vidal-Ortiz, 2008; Wentling, Schilt, Windsor, & Lucal, 2008).
For the purposes of this study, “sex” is constituted by a perceived and/or actual convergence of hormonal, chromosomal, and anatomical factors that lead to a person’s classification, usually at birth, as “male,” “female,” or “intersex” (see Preves, 2003 on intersex identity). “Gender” can be understood as the vast array of social and cultural constructions (involving bodily comportment, manner of dress, social roles, etc.) that adhere to individuals once they have been assigned to a particular sex category (thus marking an individual as a “girl,” “boy,” “woman,” or “man”). “Gender identity” is a concept that refers to one’s subjective sense of being a boy, girl, man, woman, or some combination thereof. “Gender expression” refers to one’s social presentation of gender in everyday life (through dress, bodily comportment, vocal expressions, etc.). Gender expression may also shift across social contexts depending on perceived safety and risks (Green, 1999). To “transition” is to bring one’s gender expression into closer alignment with one’s gender identity. Transition may involve changes in one’s style of dress, hair, body comportment, pronoun/name use, legal sex/gender status, social roles, hormones [taking testosterone (“t”)], and/or physical anatomy [e.g. bilateral radical mastectomy with chest wall recontouring]
or reduction mammoplasty ("top surgeries") and hysterectomy, oopherectomy, metaoidioplasty, and/or phalloplasty ("bottom surgeries").

"Transgender" and "genderqueer" are umbrella terms for those whose gender identity and/or expression does not normatively align with their assigned sex. "Transsexual" (a particular type of transgender identity or embodiment) describes an individual who makes surgical and/or hormonal changes to their body in order to bring it into closer correspondence with their gender identity. "Trans" is an abbreviated term that refers to "transgender" and/or "transsexual." Individuals designated "female" at birth, who come to gender identify as a man or on the masculine spectrum, are referred to as "female-to-male" ("FTM") or "trans men." It is critical to distinguish between "gender identity" and "sexual identity"—all people have both. For example, some trans men self-identify as heterosexual (and partner with trans and/or non-trans women); while others self-identify as gay (and partner with trans and/or non-trans men), bisexual, or "queer" (those whose sexual identity cannot be neatly classified as heterosexual, gay, or bisexual).
For over thirty years, sociologists have made great strides in documenting and theorizing unpaid household labor performed by women within (non-trans) heterosexual families (e.g. Hochschild, 1989; Oakley, 1974). Despite continuing rises in the numbers of women working outside the home for pay, concomitant with supportive social attitudes for women’s equality (among men and women), women still report experiencing “the second shift” at home (Bianchi, 1995; Kamo, 2000). Despite increasingly-liberal gender-role attitudes, heterosexual women continue to perform the bulk of household labor across both cohabiting and marital contexts (Bianchi, Milkie, Sayer, & Robinson, 2000; Smock, 2000). Even more surprising, some research demonstrates that men actually perform less household labor once married than when cohabitating with their women partners (Gupta, 1999) or when earning less income than their women partners (Bittman, England, Sayer, Folbre, & Matheson, 2003; Greenstein, 2000).

One of the most lasting lessons from Hochschild’s (1989) study was that men and women who are ideologically committed to egalitarian relationships co-construct elaborate “gender strategies” and “family myths,”
describing the division of housework as equal although women actually perform the majority of this labor. Rather than assailing women with claims of “false consciousness” regarding incommensurability between one’s feminist self-understanding and participation in traditional, inegalitarian, sex-typed divisions of household labor and emotion work, this work demonstrates the complexity and function of “family myths” and “gender strategies.” These “family myths” and “gender strategies” serve important personal and social functions as they allow individuals and couples to retain and preserve deeply-held commitments to egalitarianism and keep relationships and families intact (Hochschild, 1989).

Accompanying developments in sociological inquiry into women’s lives and relationships has been greater attention to the experiences of sexual minority women and female same-sex cohabitation, partnerships, and families (for a review, see Patterson, 2000). Survey research often reports that household division of labor among cohabiting lesbian couples is relatively egalitarian (Blumstein & Schwartz, 1983; Kurdek, 2001, 2006, 2007). Some ethnographic qualitative research, however, suggests the issue is actually more complex (Carrington, 1999; Moore, 2008). It may also be possible that notions of what constitutes an
“egalitarian relationship” are shifting and multiple (Deutsch, Kokot, & Binder, 2007). For example, some qualitative research reports that lesbian couples structure household labor in “strikingly similar” ways to that of heterosexuals and generate “family myths” and “gender strategies” to actively create the semblance of egalitarianism in their relationships (Carrington, 1999, p.21). Other research posits egalitarianism itself (as defined by partners’ relative economic independence and equivalent distribution of childcare and household labor) may not be a defining goal among all lesbians. Research with Black, lesbian stepfamilies, for example, reveals that the partner performing the greater share of household labor and childcare is often ascribed higher relationship status (Moore, 2008).

Just as research demonstrates that household labor among (non-trans) heterosexual couples is often divided along gendered dimensions (Kroska, 2003), we might expect that, even among (non-trans) “same-sex” partners, tasks might still be differentially allocated based upon differences in gender identity and/or expression between partners. Although same-sex couples may engage in myth-making in similar ways to that of heterosexuals, it is critical to note that this myth-making may be motivated by
factors particular to having a lesbian identity, or in ways designed to shield partners from potentially-stigmatizing social claims connected to gender identity. Among lesbian couples, the partner who assumes less responsibility for household labor may be socially shielded by the partner who performs more household labor so that the under-performing partner is rendered less vulnerable to accusations of enacting stereotypical masculinity or that the relationship mirrors “traditional” heterosexuality (Carrington, 1999).

It is also important to consider how increasing social support for gender equality impacts social desirability of reporting inequalitarian divisions of household labor on self-report surveys (Kamo, 2000). As such, quantitative, survey-based measures of division of household labor may not fully capture nuanced negotiations occurring between partners within households, particularly among those who are ideologically-committed to gender equality. In consequence, some researchers note the critical importance of employing qualitative methods to study households of gender/sexual minority couples (Smock, 2000).

*Emotion Work in (Non-Trans) Heterosexual and Lesbian Relationships*

The concept of emotion work was first introduced thirty years ago (Hochschild, 1979). The contribution of
this concept to earlier sociological thought was that emotion functions not only in highly personal and psychological ways, but is also determined by and through social rules, negotiation, and regulation. “Emotion work” (occurring in the unpaid, private sector of home) is delineated from “emotional labor” (occurring in the paid, public sector of market economy; Hochschild, 1989). Researchers propose that emotion work is a critical component of family work and marital satisfaction among (non-trans) heterosexual couples, mediating against feelings of marital burnout—particularly when such work is also performed by men (Duncombe & Marsden, 1993; Erickson, 1993, 2005). Research on emotion work enabled sociologists to better understand how social actors engage in active management of their own and others’ emotions—and how this work is gendered in particular, predictable ways.

For example, the knowledge of family members’ tastes and preferences is a form of (primarily) women’s work that treads a thin line between instrumental household labor (such as shopping and cooking) and emotion work (such as keeping family members happy, satisfied, and feeling cared for; DeVault, 1991). Even among same-sex couples, one partner tends to know tastes and preferences of another to a greater extent; this knowledge is generally associated
with the partner who most often cooks and shops for the family (Carrington, 1999). Researchers also propose that, contrary to most sociological work that posits sex as the primary determinant of who engages in emotion work within relationships, gender constructions (Erickson, 2005) and gender ideologies (Minnotte, Stevens, Minnotte, & Kiger, 2007) may actually be better predictors. Conceptualizing emotion work in this way allows us to predict that women partners of trans men may be expected to perform greater or lesser amounts of emotion work than their trans partners based on the way each partner’s gender is constructed individually and interpersonally, rather than assuming an egalitarian division based on sex. As such, we should not necessarily expect to find egalitarian divisions of household labor and emotion work among “same-sex” couples whose gender identities are quite dissimilar.

**Method**

I now extend these conceptual frameworks on the division of household labor and emotion work, among both (non-trans) heterosexual and lesbian couples, to focus on an emergent and understudied population in the field of family studies—partnerships between women and trans men. The present study focuses on the primary research question: What do narratives from women partners of trans men, on the
performance, structure and division of household labor and emotion work within their relationships, reveal about “doing gender” and “women’s work” within contemporary families? This research question was designed to obtain an in-depth understanding of the various forms of unpaid household labor and emotion work that women partners of trans men report performing in their relationships, as well as to tap into the various explanatory frameworks used to describe these forms of work and their division.

**Methodological Approach and Interview Protocol**

To investigate the present study’s primary research question, an interview protocol was developed to address gaps in the sociological literature. Interview questions were developed in conjunction with research positing gender and gendered identities as social accomplishments arising from iterative, interactive practices of “doing” gender (Goffman, 1959; West & Zimmerman, 1987). The protocol was also developed in accordance with sociological research highlighting the importance of attending to the processes through which individuals make sense and meaning of their own (often contradictory) experiences (Garfinkel, 1967). My intention was to develop a deeper understanding for how research subjects constructed their social worlds through everyday actions and interactions, an approach that may be
particularly useful in the context of studying trans lives and families (Rubin, 1998; Schütz, 1967).

Interview participants were consistently probed to expand on what they might only suggest or briefly mention, allowing me to elicit “thick description” (see Geertz, 1973) of how gender is actually “done” by women within their relationships with trans men. Respondents were also probed, when giving seemingly-contradictory responses, to reflect upon (and speak about) these contradictions or tensions in greater depth. Respondents were probed to describe not only what they “do,” but their partners’ reactions, how they felt about these reactions, and/or changed behaviors in response to reactions. The protocol was also developed with considerable attention to the importance of the language women partners of trans men use. In my inquiries, I probe not only actual care-taking activities, but how women felt prepared (or not) to engage in these activities and the emotional and material effects of providing such care.

The interview protocol had six major content sections: 1) Gender and Sexual Identities of Self and Partner; 2) Experiences with a Trans Partner’s Gender Transition; 3) Friends and Family Support and Strain; 4) Community and Social Support and Strain; 5) Relationship Form and
Structure and; 6) Language and the Body. Not all sections yielded data relevant to this study. A brief sampling of questions relevant to the present study include: Is your partner currently in the process of transitioning? (If “yes”): Can you tell me about your partner’s transition? What is your role in your partner’s transition process (if you have one) and how do you feel about that role (or lack thereof)? Do you and your partner have certain gender roles in your relationship? (If “yes”): How would you describe the gender roles in your relationship and how do you feel about them? How flexible are the gender roles in your relationship? (If “no”): Why do you think you and your partner do not have certain gender roles in your relationship like some other couples do?

To get a sense of women’s perceptions of division of household labor within their relationships, I asked cohabiting interviewees (as part of the Relationship Form and Structure section of questions) to tell me who has primary responsibility for a list of specific tasks (e.g., cooking, writing grocery lists, knowing a partner’s tastes and preferences, fixing things around the house, garbage and recycling, shopping for (and sending) birthday and holiday presents, decorating, scheduling and attending doctor appointments, child care, elder care, pet care, lawn
care, auto care, and driving). I also asked each participant the following questions: Can you tell me your feelings about how the household labor is divided between you and your partner overall? Has the division of household labor ever been a source of conflict and/or resentment in your relationship? (If “yes”): Can you tell me what happened and how you handled it? (If “no”): Why do you think you and your partner have never had conflict or resentment over the division of household labor?

Recruitment

Eligible participants included both current and former women partners of trans men who had been in a relationship with a trans man for at least three months. Three months was chosen as a minimum cutoff point for participation due to the fact that I wished to gather data on perceived relationship dynamics from individuals across as wide a swath of relationship durations as possible—from those in the early stages of relationship development to those in long-term relationships. It is important to remember that the present study (on division of household labor and emotion work) is only one component of a much larger project. As such, cohabitation was not a requirement for participation in the study. I sought to interview both trans and non-trans women as participants and all
recruitment materials contained the recruitment phrase, “self-identified women partners.” I sought to interview women partnered with trans men at various stages of trans identification and transition—from those who self-identify as “genderqueer,” with no intention of taking testosterone or obtaining sexual-reassignment surgeries—to those who identify and are legally-recognized as “male,” who are taking testosterone and have had sexual-reassignment surgeries.

Women were recruited using list-serv, email group, and paper-flyer postings targeting the significant others, friends, families, and allies of trans men. I employed internet-based social-network sampling, the primary method of purposeful sampling when targeting sexual minorities and their partners (Patton, 1990; Rosser, Oakes, Bockting, & Miner, 2007). The internet serves as the primary site for transgender and transsexual community building, social support, and dissemination of gender transition-related information, making it likely that even those who are older and poorer have found ways to access the internet for these purposes (Shapiro, 2004). I also formed partnerships with local, land-based, social-service agencies serving these populations. In addition, interview participants from geographic regions across the United States and Canada were
recruited to distribute materials to potential participants. Each research participant was paid twenty dollars per interview unless they declined payment.

Data Analysis

Interviews were transcribed by a professional transcriptionist I trained to recognize unique terms, language, and expressions common to trans communities. Subsequent to transcription, I reviewed each transcript for accuracy and fidelity to audio recordings. I imported all transcripts into a qualitative data analysis software program, NVivo/N8, which assists in the digital organization of large quantities of qualitative data (in this study, approximately 2,000 pages of interview text).

I employed blended inductive and deductive coding techniques, informed by grounded theory methods, to distill emergent themes, patterns and trends in the data (see Charmaz, 2006; Glaser & Strauss, 1967). I read through all transcripts, creating “memos” for each. Each “memo” contained my observations about the interview participant and interview, as well as brief notes about strong or compelling emergent themes and potential links to theory. I next began thematic coding across all interviews. Interviews were coded for approximately thirty demographic variables (“attributes”) connected to the participant,
Interviews were initially analyzed through an open-coding process to discern emergent themes or “nodes” (Charmaz, 2006). Approximately 200 themes and subthemes emerged through this process. The next stage of analysis involved more focused coding that resulted in a distillation of themes through a process known as axial coding (Strauss, 1987). Axial coding resulted in a final coding scheme of approximately fifty major themes (“tree nodes”) with various subthemes (“free nodes”). My coding strategies allowed me to identify and juxtapose data providing confirming and disconfirming evidence for themes.

Wherever possible, broader themes were subcategorized into more precise or conceptual themes, generating nuanced subtypes. A brief sampling of major coding themes and subcategories relevant to the current study include:

Overall Household Labor (participant does more, partner
does more, both do roughly equal work, neither does this work); Administration of a Trans Partner’s Testosterone Shots (partner always gives himself shots, participant always gives shots, both give shots, partner not taking testosterone); Division of Household Labor and Conflict (conflict often arises, conflict does not often arise) and; Explanations for Perceived Inegalitarian Division of Household Labor (individualist-choice-based, structural/systemic-based). To discern differences in experiences across participants, multiple data matrix analyses were run in NVivo, allowing me to sort excerpts on coded themes by various participant attributes.

**Participant Sample**

Fifty women completed individual, in-depth, audio-recorded interviews for this study. Eleven interviews were conducted face-to-face and the remainder by telephone. Comparative analyses of the interviews did not reveal considerable differences in respondents providing rich descriptions, expressing strong emotion or revealing intimate personal details between the face-to-face and telephone interview contexts. The 50 participants in this sample provided detailed information on 61 individual relationships with trans men. Forty-two participants were currently in a relationship with a trans man and eight were
reporting on a former relationship (or relationships) and
were not currently in a relationship with a trans man. Of
those not currently in a relationship with a trans man, the
median time elapsed since termination of the relationship
was just under four years. Across all reported
relationships, relationship duration averaged 2.2 years
with a range from 3 months to 11 years at the time of the
interview.

Of the 61 reported relationships, more than half (38)
were cohabiting, with an average cohabiting duration of 1.5
years. Four participants were in legally-recognized,
opposite-sex marriages (all in the United States) with
their partner and four others were engaged to be legally
married and one participant was in a legally-recognized
same-sex marriage (in Canada). Two participants were
actively engaged in raising children in the home with their
partner and four others reported formerly-raising children
or involvement with raising children who did not live with
the couple. Interview length averaged 103 minutes and
ranged from 47 to 150 minutes. Interviews were digitally
audiorecorded with participant consent.

Participants include women from thirteen states across
the U.S. and three Canadian provinces, greatly expanding
existing work on sexual and gender minorities that tends to
focus almost exclusively on only one or two states (namely California and New York) in the U.S. The geographic diversity of this sample also closely mirrors that of the largest survey of trans men conducted to date, indicating that this sample consists of participants from most of the geographic regions in the United States with the highest proportions of trans men and also includes two much-understudied regions with regard to studies of sex and gender minorities—the Midwest United States and Canada (Rosser, Oakes, Bockting, & Miner, 2007).

The women in this study self-identified as “queer” (50%), “lesbian” or “dyke” (22%), “bisexual” (14%), “bisexual/queer” (4%), “heterosexual” (4%), “undefined” or “unsure” (4%) and “pansexual/omnisexual” (2%). According to the women I interviewed, their trans partners identified as “queer” (48%), “heterosexual” (34%), “heterosexual but bi-curious” (8%), “bisexual” (8%) and “gay” (2%). Approximately 30 percent of participants were in a lesbian-identified relationship with their partner prior to his transition. None of the participants I interviewed considered their relationship with a trans partner “lesbian” once their partner began the transition process. In terms of gender identity, 30 percent of the women I interviewed self-identified as “femme.” Trans partners were
said to gender identify as “a man” (59%) or as “a trans man or genderqueer” (41%). In terms of feminist identity, 93 percent of the women I interviewed self-identify as “feminist” and 77 percent responded that their partner also identifies as “feminist.” Despite aiming for a racially-diverse sample, this sample reflects greater variation on age of participants (29 years on average with a range from 18 to 51 years) than on race/ethnicity. Forty-five participants in this study are white, three are multiracial, one is Black, and one is Latino. The sample does reflect somewhat greater variation in race/ethnicity when considering race/ethnicity of trans partners of participants (e.g. 19 percent were identified as “multiracial”).

Participants reported higher than average levels of education (59 percent have at least a Bachelor’s degree and 26 percent have a post-graduate degree), but household incomes were well below the national average (nearly 80 percent made $50,000 or less in combined annual household income with nearly 40 percent reporting less than $25,000 in combined annual household income). The trans men partners of the women participants were slightly younger than participants (27 years of age, on average) and, like the participants, were highly educated (though less so than
their women partners), with 49 percent holding a Bachelor’s degree or higher and 13 percent holding post-graduate degrees. Trans men partners of the women I interviewed were at various stages of sex and/or gender transition—with most being just a bit over two years into the process. Most were taking testosterone (69%), a considerable minority had had top surgery (38%), while a very slim minority had had bottom surgery of any kind (7%). Likely due (in large part) to testosterone, the majority (63%) of trans men partners of participants reportedly are “always or almost always” “read” in social contexts as male. Approximately 80 percent of women were involved with their trans partner’s hormonal and/or surgical transition process over the course of their relationship.

**Results**

"It’s Not Because of Gender Issues for Us": Women Doing and Explaining Household Labor

Most participants in my sample (93 percent) and their trans men partners (77 percent) are feminist. As documented in the previous literature review, one of the primary contributions of feminist social research, over the past thirty years, has been to document striking inequalities in division of household labor between men and women. In the context of strong personal feminist identification among
study participants, therefore, it is unsurprising they felt it necessary to deploy “family myths” and “gender strategies” to explain gender stereotyped and/or inegalitarian divisions of household labor or emotion work in their relationships. What was surprising was the form and structure of these explanations.

The women I interviewed often described grueling work schedules both inside and outside the home. Many discussed financial hardships and the need to obtain as much paid work as possible, often in conjunction with college or graduate school attendance. Michele offered one of the clearest examples of a woman partner’s investment of physical, psychological, and emotion work for a trans partner’s primary benefit. When I asked Michele to estimate how much of her life is comprised of taking care of her partner, she replied: “A lot... I would say about 70 percent of my life. That’s scaled back from what it was—which was, like, 80 percent.” I asked Michele to reflect on what this has meant for her in her own life:

I provide an enormous amount of support around maintaining the household, doing domestic tasks. I have assimilated massive amounts of [my partner’s] own work—school work—to assist him in completing his work. [This is in addition to] a huge amount of emotional time spent in processing transitioning, family, frustrations around the transition process . . . A huge amount of work. I’m supposed to be writing a dissertation . . .
My own work has been very neglected . . . I put it off since [my partner] started transitioning.

Others spoke about an inegalitarian division of household labor, but rationalized the reasons for this division. Ani stated: “I do the dishes; but I’m so neurotic about having a clean house and he is not . . . I definitely do more than he does but, again, I’m the one that happens to be a neat freak.”

Linda offered a similar description, echoing the direct reference to personal preferences, rendering the pattern more idiosyncratic or personal rather than a reflection of traditional gender roles: “I think I would play a little bit more of an active role in laundry because it’s one of those things that I have to have my way. Like if he was doing it, for example, everything just gets tossed in; whereas I have to do it my special way.” Lilia discussed some of the ways she experiences gender in relation to her partner and to household work: “I feel very female when I’m cleaning up his room. He doesn’t ask me to clean up his room, he’s just very messy. So I clean up on my own free will and try and take care of him, which, sometimes he’ll let [my emphasis] me do . . . It makes me feel very female.” Some women partners expressed annoyance with (what they felt was) their partner’s misperception
about the division of household labor. Ani stated: “Cooking is definitely me, but he thinks he does more.”

Several women went to some lengths to assure their partners (and me) that choices they made were based not on gender stereotyping or roles, but on autonomous personal decisions. Veronica told me:

I’ve been working full-time for a couple years now. My musical career has gone by the wayside because of that. So, for me, my own personality, I think I would be happier being at home, making a home, being able to work on my own, being able to practice and have that sort of freedom. And we were discussing it a lot and I made it very clear that if I do adopt those traditional roles, it’s not because of gender issues for us, it’s just because the nature of our own sort of goals and just the nature our own selves.

Linda echoed some of this same sentiment:

I would say he’s definitely more of an outdoors person than I am. Like I don’t know how to drive a car, I don’t have my driver’s license where he’s driven cars from a young age. He fixes the car outside. He’s the one who scoops up the dog poo. He putters around in the garden. I cook a little bit more than he would though I don’t think we do things like that because we feel we have to but that’s just what our personal interests are.

Kendra offered another individualist explanation for what some may see as gendered roles:

I’m the one who’s always cooking, and I’m definitely more of a nurturer . . . I could see how someone from the outside could say we have very gendered roles in our relationship, but I don’t know that they’re really that gendered. He’s definitely going to be the bread winner, but
that’s because he’s going to get his doctorate and I really have no desire to ... But I don’t feel bad about it because he likes to do it.

These statements reflect a general unwillingness—or, in some cases, outright refusal—to link women’s personal preferences, at least in the area of household labor, to women’s gender roles or socialization. In the quotes above, interviewees either never discuss gender or gender roles, or expressly reject any connection between inegalitarian division of labor within their homes and women’s traditional gender-role socialization. These quotes reveal a conceptual disjuncture of the personal from political as they suggest traditional division of household labor is a rather unremarkable matter of individual free will outside the realm of gender-role socialization and imperatives. Women’s narratives on the division of household labor in their families also “do gender” as they reflect predominant cultural scripts for men and women dividing household labor in accordance with seemingly “natural” tastes and preferences. Given the scarcity of alternative cultural models for enacting non-hegemonic male and trans male identities, adherence to existing, predominant, and normative social models remains unsurprising.

Matrix analyses of participants’ quotations revealed some interesting contrasts among participants. Women whose
relationships began prior to a partner’s transition, and whose relationships were initially considered “lesbian,” were more likely to report that they performed more household labor than their trans partner. They were also more likely to offer choice and free-will-based explanations for perceived inegalitarian divisions of household labor. Women whose relationship was never understood as “lesbian,” and whose partner transitioned prior to the beginning of their relationship, were the least likely to report performing more household labor than their partner and also the least likely to offer individualist, choice, and free-will-based explanations for perceived inegalitarian divisions of household labor.

Indeed, this group of women entered their relationships with more of an understanding that their relationships were with men—and all of the attendant social baggage that entails. In other words, their expectations for their partners performing household labor was likely lower than those women who initially (or at some point during the relationship) perceived their partner as a woman—someone who would be expected to equally share household tasks and responsibilities. As such, it might be expected that this group of women would perceive their trans partners’ household contributions to be exceptional
rather than expected. Further, it can be hypothesized that this group of feminist women would be more likely to employ cultural scripts of unequal labor division between the sexes (a system-based explanatory framework) since they have primarily experienced their partner as male. Of course, these hypotheses require further testing involving both focused follow-up questions for women partners, and ethnographic methods involving participant observations within participants’ homes.

“*You Have Bleeding, Oozing Stuff!*“: *Women Doing Medical/Healthcare Emotion Work*

While the women I interviewed discussed engaging in a wide range of emotion work within their relationships, one of the most compelling, frequent, and sociologically-relevant activities they discussed was the provision of both basic and complex medical/health advocacy and care. While women whose partner transitioned over the course of their relationship reported providing the most transition-related support for their partners, women whose partner had largely completed their transition prior to the start of the relationship still reported providing a great deal of transition-related support (in the form of emotional support, advocacy, bimonthly testosterone injection administration, etc.). Indeed, transition should be
considered an ongoing, iterative, relational, and lifelong process. The women I interviewed revealed their multiple roles as personal advocate, mediator, and emotional supporter for their partners, especially in terms of dealing with a partner’s medical and health needs. Samantha stated:

I’ve always been very active in his medical care. I’ve always known when his doctor’s appointments are, known what they’re for, made sure he’s gone to them, found doctors in the area. I think it’s sometimes hard for him to deal with the actual bureaucracy of things. I think I’m a lot better dealing with it.

Samantha continued by describing an encounter her partner had with an inept medical practitioner:

[His doctor] was a recommendation from his pediatrician . . . She sort of blew off his gender . . . didn’t acknowledge it. As soon as he told her that he was trans, she wouldn’t look him in the eye and he just felt like she rushed through his exam and did everything she could to not be around him. So he came out of it crying. He was really upset . . . I’m very proactive . . . and so I was ready to call the office and speak to somebody about it and educate them on their trans issues . . . But he was like, ‘No, no it’s okay, it’s okay.’ . . . He was really depressed . . . he was suicidal.

Samantha was not the only interviewee who described emotion work invested in trying to help a partner with depression or even suicidal ideation. These testimonies indicate the level of involvement some women have in providing emotional support to (and advocacy on behalf of) their trans
partners—sometimes at times of great personal crisis. Women described serving as islands of support during times when trans men may wish to have little outside contact due to privacy, job security, and/or personal safety considerations.

Women offered many stories about feelings connected to administering a trans partner’s testosterone shots. Linda stated: “The first time, I was terrified that I was going to hurt him more than anything. Really, really scared. I’ve never given anyone a needle in my entire life. Yeah, my main fear was that I was going to fuck it up really bad and hurt him or hit a nerve or something like that. But now it’s fine.” Kendra also spoke about giving her partner testosterone injections: “He kind of developed this fear of needles and so he couldn’t inject it any more. So I’ve done it for quite some time now. . . . At first, I was really nervous about it. You know, if you do one thing wrong, you could kill him; but it’s just routine for me now.” These comments reveal that (at least in the beginning) administering testosterone injections can be events imbued with anxiety about one’s own adequacy as well as fears of hurting, potentially seriously, one’s partner. These quotes also reveal how performing medical care for a trans partner becomes a routinized aspect of everyday life. Interviewees
discussed that their involvement with their trans partner’s medical care sometimes extends far beyond the administration of testosterone injections.

Some of the most evocative and compelling aspects of women’s narratives focused upon their partners’ surgical transitions. Interestingly, many of these narratives highlighted trans partner’s experiences, despite me specifically asking women to reflect on their own impressions of the transition process, providing detailed descriptions of their personal involvement throughout.

Samantha replied:

Right now, we’re trying to find a doctor in the area and we’re looking at pictures of their results. And we’re also trying to figure out how on earth to pay for it. We’re basically in the beginning stages of it . . . It was a decision that I already decided a long time ago that I would definitely help him pay for it.

Samantha’s use of the collective “we” and “we’re” at numerous points in her narrative reflects the degree to which she felt involved with her partner’s transition on multiple levels—including economic. Samantha’s narrative was one of many illustrating how tentative and artificial divides between intimacy and economics can be within families [see Zelizer (2005) for further discussion]. While some women reported discussions and negotiations with
partners regarding details connected to transition surgeries, this was not always true.

Teresa discussed her sadness and frustration in connection to being left out of most of her partner’s surgical transition decisions:

In trans community, it’s the idea that I will support my partner and will do cartwheels whenever he decides to [physically alter] his body and that I’ll be really happy about it. Whereas, really, when my partner had chest surgery . . . [the] process for me [was] that a body I had always known changed. I think it’s important to let partners have that grief. I don’t feel like I was given space to really feel things that I was feeling because there was this expectation that I just was going to support it wholeheartedly. That was really hard.

Kendra described her feelings about her partner’s impending surgery:

I was really concerned . . . that he would need someone to help him with a lot of things after surgery . . . I was just like, ‘If you’re expecting me to help you with this—which I’m more than willing to do—then you need to help me help you. I need to know these things so I can help you.’ And so that was frustrating.

These comments reveal that some women are concerned about their trans partner’s surgical transitions in terms of the support they will be personally expected to provide. Women also expressed fears or concerns about their partner’s risk of death during surgery, ways their partner’s body will change and/or the fact that they love their partner’s body
as it is. Tiffany discussed emotions connected to her partner’s top surgery:

It’s kind of weird because you get so used to somebody’s body being a certain way—especially somebody you’re close to. You get to a point where you memorize every single part of their body. And so it’s very difficult when something changes—especially that quickly . . . It’s something that’s important for him to do; so by the time he gets it, I’ll be ready for it and I’ll be supportive. But I really wish he didn’t have to... having that piece of him cut off and tossed away is very difficult.

Despite the numerous concerns women reported in terms of being excluded from surgical decision-making processes, considering possible negative surgical outcomes, and mourning the loss of a partner’s familiar and beloved body, women still described enormous personal involvement with partners’ surgeries and post-operative care. Willow told me: “Oh God. It was like being an advocate for him, getting him food, helping him with the pain stuff, helping him get dressed, keeping him company, just being there, helping him sit up, helping him walk to the bathroom.” Gail offered a particularly visceral recollection:

I remember it [top surgery recovery] being totally intense. It’s like blood—and the smell was so intense—and that was the first time I was like, ‘Whoa—you have bleeding, oozing stuff!’ And just feeling kind of like you’re just kids taking care of each other. You’re twenty-four [years old] and it’s weird because you have no nurse or anyone telling you what to do . . . It’s so major. Someone just cut their body, had it
reconstructed... I didn’t feel confident in it [taking care of her partner] . . . I get kind of queasy and stuff and I remember the smell being really intense . . . We were basically locked up in this room for three days . . . I felt really disconnected from the outside world.

In this not-uncommon example, an interviewee describes involvement in post-surgical caretaking for what is generally considered major (yet outpatient) surgery. This caretaking can take mental, physical and emotional tolls. Further, pain and helplessness some trans men experience after surgery may be taken out, in frustration, on a weary partner. Veronica said: “The person who is going through the medical transition is really wrapped up in their own issues. And the person who is giving the support feels neglected.”

Women partners of trans men play critical roles in their partners’ continuing journeys from female-to-male identity, embodiment, and social status. Interviewees discussed extensive involvement in processes of sex and gender transition—serving informally (and sometimes at great personal cost) as personal assistants, medical aides, and advocates on a partners’ behalf. Women described these ways of “doing” gender and relationships as simultaneously exhausting, rewarding, challenging, unprecedented, and transformative. Feelings of nervousness and/or worry, in
connection to a partner’s transition, was reported almost universally across participants whose partner underwent hormonal and/or surgical transition over the course of their relationship. Among participants whose partners largely completed their transition prior to the beginning of their relationship, 60 percent reported ongoing transition-related anxiety.

**Discussion**

*Women Doing and Explaining Household Labor in the Context of Feminist Self-Identification*

In accordance with previous sociological research, women partners’ explanations for inegalitarian divisions of household labor might best be understood as instances of “family myths” or “gender strategies,” that allow them to continue functioning within particular roles and relationships with relatively little reported discord or threat to their identities as feminist and/or non-traditional (Hochschild, 1989). What was less expected, however, was that these feminist-identified interviewees employed a highly-particular type of “family myth” or “gender strategy,” not previously described in the literature, predicated on ideals of individualism, free will, and choice. Further, participants whose relationships with their partner initially began as “lesbian,” and those
who went through a hormonal and/or surgical transition process with their partner over the course of their relationship, were more likely to offer these individualist, choice-based and free will explanations than those whose partner’s hormonal and/or surgical transition was largely completed prior to the start of their relationship. These unexpected findings require further consideration and analysis.

The vast majority of interview participants (82 percent) were ages 35 or younger. As such, these individuals came of age in the sociohistorical context of Third-Wave rather than Second-Wave feminism. While it might be reasonably argued that the feminist “wave” metaphor is overly-simplified and reductive, I argue that it may also serve as a useful heuristic when considering the sociohistorical trajectory of contemporary transgender identity and communities in North America. The Second-Wave feminist era existed from the early 1960s to the late 1980s. This era of feminism, focused on collective action and “sisterhood,” was largely devoted to securing social gains for women across the areas of equal pay, reproductive rights, sexual freedom, and equality within the family (Henry, 2004). Third-Wave feminism arose in the early 1990s as a reaction (in part) to Second-Wave feminist politics
(Reger, 2005). Third-Wave feminist founders often claim that Second-Wave feminism advanced gender essentialist politics and was relatively insensitive to differences connected to gender, race, and sexual identities (Heywood & Drake, 1997). Third-Wave feminism is grounded in notions of individualism, free will, choice, performativity, personal power, sex positivity, and belief in the constructedness of gender, sexuality, and race (Henry, 2004; Heywood & Drake, 1997; Reger, 2005).

Some consider transgender and transsexual identities and communities critical outgrowths of Second-Wave feminism and vital components of Third-Wave feminism. Rubin’s (2004) exploration into the lives and identities of transsexual men, for example, traces the multiple disconnects between transgender identities and communities and Second-Wave feminism. Rubin (2004) asserts that transsexual men began to form coherent subcultures and identities once they intentionally disassociated themselves (and were pushed away) from Second-Wave lesbian feminist politics of “sisterhood” and the “woman-identified-woman.” Third-Wave feminist politics of gender performativity, choice, personal power, and individualism may serve as more welcoming to trans men’s identities and communities (which include women partners).
Further, the tenets of Third-Wave feminism may be particularly compelling for women partners of trans men whose relationships began as “lesbian,” or who were with their partner prior to and throughout his gender transition. By focusing on individualism, free will, and choice, it becomes more possible for this group of women to simultaneously acknowledge stereotypically-gendered inegalitarian divisions of household labor within their relationships and to explain this inequality away by focusing on the specificity and exceptional nature of their current trans relationship in ways that are less likely to fundamentally challenge one’s overall conception of self and behavior as “feminist” and/or “lesbian.” It is in this context of Third-Wave feminist discourses of individuality, free will, personal power, choice, and performativity that these women participants’ explanatory frameworks for assuming gender-stereotyped/disproportionate amounts of household labor and emotion work can be better understood. Of course, to better understand and situate these explanatory frameworks does not absolve them from critique. Instead, we might call into critical question the problematics involved in feminist politics that obscure the mechanisms and processes of family inequalities under assertions of personal power and performativity. It may be
time to reevaluate particular family dynamics to call for
greater equality between partners (rather than “the
sexes”). Indeed, this research demonstrates that sharing a
particular chromosomal sex pattern with one’s partner does
not negate the powerful social pull and processes of
gendered inequalities within the family.

Scott & Lyman (1968) offer another useful conceptual
frame for understanding women’s narratives about “doing”
gender (vis-à-vis doing household labor) within their trans
families. According to Scott & Lyman (1968), individuals
manufacture socially-accepted verbal “accounts” to explain
socially-unacceptable behaviors to others. These “accounts”
arise in two primary forms—either as “excuses” or
“justifications” (Scott & Lyman, 1968, pp. 47-52). In the
context of women’s accounts for stereotypically-gendered
inegalitarian divisions of household labor (when speaking
with someone presumed to hold negative valuations of such
behaviors—the interviewer), justifications were most
frequently invoked by study participants. More
specifically, the women in my study employed the use of
“self-fulfillment justifications” (Scott & Lyman, 1968, p.
52), in which they simultaneously acknowledged inequities
in the division of household labor and emotion work in
their relationships and neutralized them by focusing on
assertions of their own free will, personal power, performativity, and choice to act in such ways. Of important sociological consideration, these verbal justifications function to absolve social actors and behaviors from critique.

As demonstrated through these analyses, gender and gendered identities are relational, social accomplishments arising from iterative, interactive practices of “doing” gender (Goffman, 1959; Martin, 1998; West & Zimmerman, 1987). The women partners of trans men that I interviewed reported acting in critical ways to shape, support, reflect, and co-produce seemingly normative forms of masculinity and femininity in ways that deserve more focused sociological exploration and consideration. We must remain cautious, however, that we do not make overly-simplistic or reductive assessments about these women participants and their relationships. Without readily-available, socially-sanctioned and supported models for how to “do” (trans)gender and trans partnerships in counternormative ways, these couples are navigating relatively-uncharted territories. Further, scholars and trans community members have noted, it is irresponsible to place disproportionate burden upon those who are trans-identified (and, by extension, their partners) for
reforming the entire gendered social order (Serano, 2007; Wentling, Schilt, Windsor, & Lucal, 2008). The women I interviewed are no more and no less responsible for (or necessarily desirous of) the maintenance or overthrow of the gendered social order within the family than those whose lives have been more fully studied and documented by sociologists of the family over the past thirty years.

Women Doing Medical/Healthcare Emotion Work in the Context of Managed Care

Sociological research on families often focuses on women’s performance of emotion work across the areas of childcare and eldercare (e.g., DeVault, 1991, 1999; Hochschild, 1989). A growing body of literature, in the medical sociology subfield, documents women’s increasing involvement as unpaid, untrained, amateur nurses for aging and/or ailing nuclear and/or extended family members (e.g., Guberman, Gagnon, Côté, Gilbert, Thivièrge, & Tremblay, 2005; Glazer, 1990). In many instances, women are called upon to provide care for family members’ chronic and/or acute health conditions or crises. This shift of patient care and aftercare, from hospitals (and paid, trained, medical personnel) to families (and, disproportionately, women), is theorized as “work transfer” (Glazer, 1990, 1993) under managed care. This scholarship calls rigid
distinctions between public/private spheres and commodified/uncommodified labor into question as it situates women’s provision of unpaid medical/healthcare family labor as an integral component of contemporary capitalist modes of production (Glazer, 1990). Results from the present study expand this scholarship by introducing a previously unexamined population—women serving as a trans partner’s unpaid and untrained personal medical/healthcare advocate, therapist, and nurse.

Results from the present study are unique insofar as they focus upon performance of medical/healthcare-based emotion work within families whose members (both care providers and recipients) are relatively younger than those reported in the medical/healthcare “work transfer” literature. Furthermore, the medical/healthcare procedures (testosterone injections, “top surgeries” and “bottom surgeries”) described herein are frequently considered “elective” and are not covered expenses under most medical insurance plans. This places enormous emotional and material burdens on trans families.

The experience of assisting a partner with transition-related medical/healthcare was one shared by 80 percent of study participants. The tasks to which women reported attending included researching trans-friendly healthcare
providers, scheduling and attending a trans partner’s medical appointments, advocating on behalf of one’s trans partner in the instance of encountering inept healthcare practitioners, obtaining medical insurance and negotiating with medical insurance companies, saving/raising/contributing funds for transition-related medical procedures not covered by insurance, juggling family disclosures about transition-related procedures, arranging for time off from work/school to provide medical/healthcare services, administering testosterone injections, and providing aftercare for major surgical procedures (e.g., changing dressings, administering pain medications, monitoring surgical sites for signs of infection and “milking” fluid drainage tubes from surgical sites and measuring/tracking/disposing of their outputs).

The work performed by these women constitutes critical involvement in a trans partner’s medical/healthcare that has previously been invisible and undocumented in both the medical sociology and family sociology literatures.

This study also documents the personal and emotional costs of “women’s work” in providing unpaid, untrained medical/healthcare for a trans partner undergoing transition-related medical procedures. Women’s reports of providing care are frequently tinged with feelings of
anxiety, frustration, fear, and inadequacy. Study participants reported feeling alone, sad, disgusted, terrified, angry, exhausted, unsupported, neglected, confused, and unprepared. Furthermore, participants described how providing transition-related medical/healthcare, and dealing with the attendant emotions (both one’s own feelings and the feelings of a trans partner), can become a consuming process that draws time, energy, and focus away from other activities such as work, school, friends, family, and self care. Given most of these participants were providing medical/healthcare for trans partners during developmental time periods critical to personal educational and career success (their twenties), implications of such emotional and material investments in another’s medical/healthcare deserve greater sociological attention, consideration, and inquiry.

Limitations

As previously discussed, this sample of women partners of trans men is comprised, primarily, of non-trans white women. Subsequent research on this population should seek to expand this sample to include a greater number of trans women and women of color to discern how their perspectives are similar to, and different from, those of non-trans white women partners of trans men. Greater sample diversity
could be obtained through the use of stratified purposive sampling on gender identity, race and ethnicity (Patton, 1990), as well as through links with social-service sites serving lesbian, gay, bisexual, transgender, and queer (LGBTQ) persons of color and establishing “key informant” contacts with trans women and women of color who are partnered with trans men and who are socially-connected to similar others.

Some may express concern that this study, relying on self-reports from women partners, does not capture an “objective” understanding of the work that is done in these relationships and/or how women “do” (trans)gender and work within their relationships and with their partners. Much sociological work on women, household labor, and emotion work, however, focuses exclusively on women and their self-reports of their own and partners’ contributions. Further, some may express concern that both former and current partners of trans men were included in the study. It could be hypothesized that a bad break-up might negatively affect accurate perceptions (and subsequent reporting) of equitable division of household labor and emotion work in one’s relationship. I would argue that, while this is possible (among the minority of participants reporting on a past relationship), we should not dismiss the alternate
possibility that those reporting on current relationships may be motivated to underreport inequalities in their relationships.

Indeed, I assume that participants are guided by multiple, competing motives as they share their stories about their former and current relationships and I analyze their narratives as reports or “accounts” rather than unequivocal facts (Scott & Lyman, 1968). Although such an approach certainly has its limitations, it also has the advantage of ascertaining women’s perceptions of their own and partners’ contributions and feelings, which some (e.g. Frisco & Williams, 2003; Yogev & Brett, 1985) suggest play more critical and complex roles in relationship satisfaction and quality than actual performance of these important aspects of family and personal life. For example, perceptions of equality or inequality within relationships may affect relationship stability and dissatisfaction (see Kurdek, 2007).

**Significance and Contribution**

Despite potential limitations of this study, this research fills an important gap in the sociological empirical and theoretical literatures on women, families, relationships, LGBTQ communities, household labor, emotion work, and work transfer under managed care. Although it is
not possible to judge the representativeness of samples of women partners of trans men, given that there has been no systematic study of this population to date, the data reported herein reflect a geographically non-localized sample with relatively-high geographic variation, making this study the largest, most comprehensive study of women partners of trans men conducted to date. The qualitative research undertaken in this study provides a rich foundation for subsequent quantitative and qualitative studies, which may be developed from emergent themes, to further expand empirical knowledge on this vastly-under-researched population. Building upon this study, I intend to conduct research utilizing ethnographic, multi-method approaches (such as those employed by Hochschild, 1989 and Carrington, 1999) to study trans families, their members, and dynamics.

Trans men and their significant others, friends, families, and allies are becoming increasingly visible within both mainstream and LGBTQ social life. As communities and families with trans members continue to grow and develop, it is critical for researchers and theorists of the family to learn not only about the trans members of these communities, but about those closest to these individuals as well. Indeed, as this study reveals,
it is often the persons closest to trans individuals who are called on to provide the greatest support and understanding. Although outsiders may conceptualize or misunderstand these relationships as “lesbian,” the women I interviewed (and their partners) self-identify, primarily, as “queer.” Under sociology’s current typological approach to family studies (e.g. cohabitating versus married, heterosexual versus lesbian versus gay), this contemporary family form remains “queer” indeed—an wayward outsider receiving little to no research consideration as a distinct and important family type.

Sociological knowledge about “doing” gender, cohabitation, families, identities, and work is developed, expanded, and challenged through studying experiences, everyday family practices, “gender strategies,” “family myths,” and “accounts” of women partners of trans men. This research also provides further evidence, useful for the subfield of medical sociology, for increasing displacement of medical/healthcare provision onto (mostly women) family members in the context of managed care. Further, it actively responds to calls (e.g., DeVault, 1999) for greater sociological research into hidden and taken-for-granted forms of emotion work occurring within families. Bringing experiences and perspectives of women partners of
trans men into dialogue with existing sociological theory and research on women, gender, relationships, families, household labor, and emotion work enables more complete and nuanced understanding of these important areas of sociological inquiry on our twenty-first century social landscape.
References


Chapter 5

Conclusion

Dissertation Objectives

The goal of this dissertation was to begin to engage more deeply with a diverse set of complex questions that emerge at the interstices of sex, gender, sexuality, work, and families. Using a three-article format, I explored the following questions: 1) What does it mean for women partners of trans men to “queer” normativity through identity work practices? 2) What are the personal and interpersonal effects of a trans partner’s body dysphoria on a woman partner’s body image and on her experiences of sexual and non-sexual relationship intimacy? 3) What do narratives from women partners of trans men, on the performance, structure and division of household labor and emotion work within their relationships, reveal about “doing gender” and “women’s work” within contemporary families?
Contributions of This Dissertation

Expanding "Queer" Sociology

Lagging behind the humanities, sociology has only recently begun to grapple with queer theory and politics. And in the midst of this grappling, queer theoretical subjects have been sidelined and elided. A powerful contribution of this study of women partners of trans men, who primarily identify their relationships and/or themselves as “queer,” is the way in which it brings queer theoretical subjects to the center of sociological focus and inquiry.

I find that one of the ways in which women negotiate the process of being with a trans partner is to adopt the sexual identity label of “queer,” a term that, I would argue, is paradoxically freeing and confining—an identity category that is, borrowing from Joan Scott’s (1999) assessments of the categories of “man” and “woman,” at once overflowing and empty. It is overflowing insofar as it can best represent the messy (and potentially radical) undefinability of these women’s identities when partnered with a trans man. It is empty as its deployment, as an all-encompassing umbrella identity, obscures the complex differences among the subjects by which it is constituted, just as it fails to reflect any particular cultural,
relational or identity politics. This research expands sociological understandings and discussions of what it means to be queer, to do queer and to queer.

Complicating Intersections of Everyday Life, Identities, Politics and Structural Constraints

This research urges us to (re)consider the complicated interface between contemporary feminist self identity and politics and individualist versus structuralist accounts for gender inequalities in everyday life. Articulating the identity work processes through which women partners of trans men arrive at their queer identities, I highlight the complex tensions that underscore the adoption of these identities. Women partners of trans men, and their relationships, are often accused of parroting heterosexual normativity. In other instances, they are cast as homonormative by those who misunderstand their relationships as lesbian.

Standing as a corrective to these overly-simplistic assessments, I highlight the powerful social, legal, and medical systems that structure normative social-relational practices such as marriage and parenting. I consider women’s normative enactments as they are compelled not only by normalizing social-structural forces, but by strategic planning and pragmatism as well. Further, I urge
sociologists to consider the biases and assumptions inherent in assertions that women’s relationships with trans men can or should be more or less normative than relationships between women and non-trans partners.

Theorizing Sociological Tensions Across Queer Identities, Relationships and Family Life

Tensions imbued women’s narratives about identity—revealing how they work to both embrace and resist normative gender and sexual identities in the context of their relationships with trans men. For example, women discussed feeling less afraid of homophobic violence in their lives when they’re perceived, socially, as part of a heterosexual couple—about having older people smile at them when they’re walking down the street holding hands with their trans partner—about being able to legally marry and adopt children if their partners’ sex status changes—and having parents and other family members express relief that they’ve “finally” settled down with a man.

But women also spoke to me about how these forms of privilege also carry a hefty price tag. They spoke about the work involved to manage disclosures about who knows their partner’s gender history and who does not. They also spoke about feeling invisible as queer within queer communities—about being trapped in a liminal space with
regard to community, whereby you’re not fully a part of any community and your identity is determined largely by your partner’s identity as trans; you’re the woman partner of a trans man.

The fifty women I interviewed entrusted me with some of the most private, exciting, painful, transformative, and fraught aspects of their lives. Mostly feminist, they were not particularly eager to detail perceived inegalitarian divisions of household labor and emotion work within their relationships. Yet they did; and they explained the reasons for these inegalitarian divisions in ways that made sense for them in the context of their life circumstances. When I have presented these findings, many have focused on the perceived inegalitarian/stereotyped divisions of household labor rather than on the processes and context that drive the explanations for these perceived inegalitarian and/or stereotyped divisions of labor. This is interesting considering that I never actually quantify the frequency and/or degree to which the actual division of labor was inegalitarian and/or stereotyped.

Such quantification seemed far less important to me than analyzing how women felt about (and explained) perceived inegalitarian and/or stereotyped divisions of labor when it did occur in their relationships. Rather than
demonstrating that these couples “are just like every other heterosexual couple,” or a modern-day “Ozzie and Harriett,” I wish to highlight the particular ways in which this group of women employ individualist, choice-based and free-will explanations for inequality. This is a powerful finding, particularly in the context of these women’s feminist identities, that highlights enduring inconsistencies between personal politics, political ideologies, and actual, lived experience. It also serves as an example of the way in which Third-Wave feminist politics, in practice, may actually obscure and/or impede certain pathways to women’s empowerment.

Further, women’s narratives revealed how accessing certain social institutions—such as marriage and adoption—are under constant legal scrutiny and threat, destabilizing the partnerships and families they create. These narratives also add to timely debates, surrounding marriage equality, by introducing dizzying social and legal permutations of “same-sex” and “opposite-sex” marital possibilities and social realities. I argue that these tensions, and the structural instabilities upon which these relationships are constructed, are what truly establish them as “queer”—even in the face of seeming normativity. In other words, no matter how normative these couples may appear—their
relationships are under constant tension and threat of being invalidated, challenged and undone in terms of legal and social recognition.

In a recent New York Times Op-Ed, Jennifer Finney Boylan (a trans woman married to a non-trans woman) asks the question: “Is My Marriage Gay?” This is a question more and more trans people and their partners are asking as same-sex couples fight for, and attain, access to legal marriage. Finney Boylan relates the complex and contradictory intersections of gender, sexuality, and the law as she discusses the case of a trans woman in Texas:

Mrs. Littleton [a trans woman whose non-trans husband died], while in San Antonio, Tex., is a male and has a void marriage; as she travels to Houston, Tex., and enters federal property, she is female and a widow; upon traveling to Kentucky she is female and a widow; but, upon entering Ohio, she is once again male and prohibited from marriage; entering Connecticut, she is again female and may marry; if her travel takes her north to Vermont, she is male and may marry a female; if instead she travels south to New Jersey, she may marry a male.

This human drama is being played out, in conceptually-dizzying permutations, across America. A participant living in Ohio related a similar story about her trans partner’s struggle to have the sex designation on his legal documentation changed from “female” to “male”:

He has a Massachusetts driver’s license. In Massachusetts, they require you to change your birth certificate [in order to change the sex
designation on the driver’s license]. But he was born in New York and it’s difficult in New York to change your birth certificate. I guess they need pretty explicit documentation and part of what they require is bottom surgery.

Other women told me about how their trans partners had to strategically wait to change their legal status to male so that they could have certain medical procedures (such as hysterectomy) covered by insurance since most policies will not cover a legally male person’s hysterectomy. Others spoke about how their trans partner’s testosterone was not covered by insurance until they changed their legal status to male. And other important legal and social questions are emerging as well: “Am I my partner’s husband or wife?” “Am I my child’s father or mother?” “Am I a widow or a widower?” “Should/can we get married as a same-sex or a non-same-sex couple (and to/for which recognition, gains, and consequences)?”

Further, I reveal aspects of women’s relationships with trans men that most would consider explicitly non-normative—such as disproportionately high rates of non-monogamy. More than 25 percent of my sample reported polyamorous rather than monogamous relationship structures—a finding that aligns with recent work by Green (2008) on gay and lesbian couples who access legal, same-sex marriage. I would argue that this finding holds promise in
complicating recent debates that fighting for marriage equality is largely a normative, assimilationist goal. I also contend that describing these relationships as normative—even when women and their trans men partners access normalizing social institutions such as marriage and parenting—is preliminary and misguided. Indeed, these marital and parenting arrangements are under constant legal contestation, placing these families under tremendous tension, strain and uncertainty.

Studying this contemporary family form also holds the power to move sociological scholarship on sex, gender, and sexuality forward. The experiences described herein articulate complex tensions between fitting in and chafing against, wanting to blend and wanting to stand out. By attending to the contradictory forces that compel social actors as they engage in everyday life activities, in the context of some extraordinary life circumstances, we might develop a more nuanced analysis of contemporary social life that is less driven by a need to circumscribe it as either normative or counternormative, conforming or revolutionary. If we begin, instead, to approach these lives and experiences with a critical appreciation of the cathetic, pragmatic, context-specific, and strategic aspects of particular relationships and social processes, we are doing
justice to the narratives with which we have been entrusted by our participants.

**Bringing the Body Back Into Sociology**

In addition to talking to women about their identities and relationship structures, I also talked to them about their bodies and body image. This dissertation works to bring the body back into sociology as a viable unit of social analysis. Talking to women about their own bodies, in the context of their relationships with their trans partners, cast light onto the ways in which body image is a social-relational construct. While varying degrees of body dysphoria is described as a near-universal experience among pre-transition transsexuals, the personal effect of this dysphoria on others is rarely considered. The narratives from women I interviewed suggest, however, that it is important to consider how a partner’s negative body image (and/or body hatred) may affect the body image of significant others. Further, women broke (what was said, by some, to be) a taboo to articulate the difficulties that they faced in their relationships with regard to sexual and non-sexual intimacy.

Focusing on relational body image, and the effects of body dysphoria on sexual and non-sexual intimacy, poses a challenge to existing sociological empirical work. For
quite some time, the body has been displaced from serious sociological consideration. Here, I reassert the body as an appropriate and necessary site for sociological analyses. Narratives from women partners of trans men reveal how body image extends far beyond personal psychology and into the realm of body practices (such as covering, hiding, and disciplining) and sexual and non-sexual intimacy between bodies.

**Expanding the Sociology of Women’s Work and Work Transfer**

Exploring women’s emotion work, as well as their household labor, was critical to this study. The women I interviewed relayed startling and compelling stories about providing medical care to partners’ bleeding, reconfigured, unconscious, in-pain bodies. In addition to broadening the medical sociological literature on work transfer (to, disproportionately, women family members), I believe that the narratives of women partners of trans men have much to teach us about the profound emotional investment that medicalized carework entails.

Women must often temporarily put aside their own emotions, about a partner’s changing and changed body, in order to provide critical care and support. They spoke to me about feeling inadequate, afraid, and excited. It is important to remember that all of this caretaking occurs in
the midst of these women’s crucial involvement with a profound process that often transforms not only a trans partner’s body, but relationships between bodies and others’ social perceptions as well. To be part of such a process was described by participants as both powerful and daunting. I bring these complicated relationships between (trans)forming bodies into greater sociological focus.

Towards a More Inclusive Public Sociology

Across these articles, I have extended existing sociological studies of emotion work, identity work, gender, sexuality, LGBTQ communities, the body, and the family to include women partners of trans men. Despite recent inclusion of lesbians and gay men in empirical sociological work, trans people and their significant others, friends, families, and allies are rarely featured. Further, when trans people and their SOFFAs are featured, it is not uncommon to include trans men and trans women in the same sample, as if the groups (and the issues they face) are similar.

In this dissertation, I elected to focus on the women partners of trans men given my desire to develop in-depth understanding, as well as this group’s relative absence across the biographical, autobiographical, and academic literatures. The women I interviewed often expressed
profound enthusiasm and gratitude that someone had decided to study their lives, perspectives and experiences. Jodi said: “I’m just really glad you’re doing this. Trans issues, in general, are underrepresented. FTMs are more underrepresented. And then SOFFAs are even more underrepresented. So it’s really thrilling to do this.” Martha concurred: I thank you very much because I don’t have this opportunity very often. I saw that and jumped on it right away. I thought, how great is that that I get to talk about my relationship? It doesn’t happen very often. I appreciate it.” Emily offered a clear and simple question that expressed the sentiments of most participants: “How come there’s nothing from our side?”

Ani articulated the critical, yet invisible, role of women partners of trans men: “We’re behind the scenes; we’re dealing with the same issues.” Ellia told me: “There’s definitely an outlet for the trans person themselves. But when this was all happening, I had nothing. And so I always thought, ‘God I wish somebody would do something about that; that would be such an amazing resource for people.’” Marisol said:

I really wish there was more stuff for female partners of trans men to read, more resources... it’s really difficult to find that. And it’s like I really think you covered a whole lot of ground here and the whole reason that I wanted to
participate is because of exactly that. I want there to be information for people to find and people to be able to read about other people’s experiences—whether they’re experiencing something similar or not—just to find some sort of reflection of what they’re going through.

Furthermore, women spoke about how having such resources could assist them in educating their trans partners about the struggles they face in their partnerships with trans men. Ellia said:

If I could have given my boyfriend a book or something and say, ‘Read this; this puts into better words what I’m going through.’ Because I would get so emotional and so wrapped up and so hysterical at times that I felt like [I wasn’t] actually communicating with [him about] what’s going on in my mind.

This research also serves as a critical adjunct (and, in many instances, corrective) to the primary contemporary source of information on trans lives and communities—the media. As one of the interviewees for this study, Mel, told me: “God bless Oprah, ‘cause I think [my parents] saw a couple of Oprah episodes [on trans people]. I think my mom’s response was, ‘Oh yes—I read about that in Maclean’s.’ Every little bit helps I think—every little bit of information.”

Participants also mentioned Jerry Springer depictions of trans people and the stigmatizing and stereotyped nature of such portrayals. Participants discussed fears about
their partner’s physical safety that deepened upon watching films based on the lives of trans people who have been physically assaulted and/or murdered (such as Boys Don’t Cry and Soldier’s Girl). Mel said:

I went through a period of terror when I first got with him—and he would go out alone—that like something would happen to him like Boys Don’t Cry action—like he was going to be raped and killed. And I felt really protective of him which, now looking back, was kind of natural and also kind of fucked up because he’s an adult.

While the goal of much sociological research on minority groups is to produce information that can inform research on majority populations, it was also critical to me, as a feminist sociologist, to produce information about an understudied minority group so that this population could have access to a resource reflecting their lives, experiences, and perspectives. Mel told me:

I’m so curious to hear about the other people who have participated in the study. I’m sure you’re getting an amazing breadth of opinions and positions. It’s one thing that can be so hard for people to understand who aren’t a part of the trans community—just how great of a diversity of opinions and views there are within the trans community.

This collection of articles, on the experiences and perspectives of women partners of trans men, begins to represent and explore the rich diversity and complexity of these (trans)formative relationships, situating them at the
center of sociological analysis and inquiry rather than the periphery.

**Limitations and Considerations for Future Research**

The women I interviewed provided an enormous wealth of data across a range of substantive content areas more broad than that covered in the articles herein. As such, this data remains ripe for future analysis. Future research might employ the use of triangulated data collection methods and broadening the sample to include trans men. By interviewing each member of a couple individually and as a couple, as well as conducting ethnographic research inside participants’ homes, we will begin to expand this burgeoning research on trans families, work, and medical work transfer and the sociological scholarship on families, work, and medical work transfer in general. The following paragraphs outline particular areas of interest for future analysis, development and inclusion in a book-length manuscript.

Women articulated both strengths and challenges they faced in building community among women partners of trans men. Historical and contemporary trajectories for the development of trans identity and community deserve more focused consideration. Data collected for this dissertation, juxtaposed with existing data on lesbian
butch-femme identities and communities, can be used to explore potential connections, overlaps and disconnects between lesbian butch-femme identities and communities and the emergence and development of trans (and trans partner/SOFFA) identity and communities. The importance of the internet and virtual communities in facilitating the development of these communities can also be explored. This vein of research may begin to answer contentious questions about whether or not trans communities are contemporary iterations of lesbian butch-femme communities that effectively render the latter obsolete.

Women described their roles as co-creators and documentarians of a trans partner’s transition rituals and rites of passage, through photographing a partner’s pre-surgical and transitioning body, raising funds for transition surgeries and throwing pre-surgery “farewell parties.” These forms of labor deserve greater sociological focus given their connections to women’s identity work, emotion work and material support practices within families.

In accordance with other research documenting relationships between trans men and women partners (e.g., Rosser et al., 2007), the women partners of trans men in my study reported a higher-than-expected percentage of
interracial relationships (between white women and non-white trans men). This finding is interesting and deserves further exploration. In addition to further analyses of existing data, future research might expand the scope of this dissertation research by expanding the sample with regard to racial and sex identity diversity.

This dissertation, focusing primarily on white cissexual women, may not speak to the experiences of women partners of trans men who are non-white and/or trans. For example, the issues that trans men of color face differ, in important ways, from those of white trans men. While feminist analyses of trans men often convey concern that transitioning from female to male entails an assumption of male privilege, these analyses sometimes do not consider the ways in which race and gender intersect to shape experiences. Indeed, some groups of trans men of color report experiencing relative decreases in social privilege upon transitioning from female to male (Dozier, 2005; Schilt, 2006). Future analyses and research would do well to focus on both trans women partners of trans men as well as the importance and impact of racial differences between partners in terms of transition processes and relationship dynamics.
References


## Appendix A
### Participant Demographic Information

<table>
<thead>
<tr>
<th>Pseudonym</th>
<th>Age (years)</th>
<th>Highest Level Education Completed</th>
<th>Race/Ethnicity</th>
<th>SES/Class</th>
<th>Sexual Identity</th>
<th>State/Province of Residence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abigail</td>
<td>28</td>
<td>Master's</td>
<td>Caucasian</td>
<td>Unknown</td>
<td>Lesbian/Dyke</td>
<td>California</td>
</tr>
<tr>
<td>Amber</td>
<td>19</td>
<td>Some College/Associates</td>
<td>Caucasian</td>
<td>Middle</td>
<td>Bisexual</td>
<td>Ontario</td>
</tr>
<tr>
<td>Ani</td>
<td>21</td>
<td>Some College/Associates</td>
<td>Caucasian/Jewish</td>
<td>Unknown</td>
<td>Queer</td>
<td>Ohio</td>
</tr>
<tr>
<td>Anna</td>
<td>48</td>
<td>Bachelor's</td>
<td>Caucasian</td>
<td>Lower-Middle</td>
<td>Bisexual</td>
<td>California</td>
</tr>
<tr>
<td>Belinda</td>
<td>24</td>
<td>Some College/Associates</td>
<td>Caucasian</td>
<td>Middle</td>
<td>Queer</td>
<td>Ontario</td>
</tr>
<tr>
<td>Bella</td>
<td>18</td>
<td>Some High School</td>
<td>Caucasian</td>
<td>Middle</td>
<td>Heterosexual / Straight</td>
<td>Ontario</td>
</tr>
<tr>
<td>Charlene</td>
<td>24</td>
<td>Bachelor's</td>
<td>Caucasian</td>
<td>Unknown</td>
<td>Lesbian/Dyke</td>
<td>Ontario</td>
</tr>
<tr>
<td>Donna</td>
<td>47</td>
<td>Master's</td>
<td>Caucasian</td>
<td>Working</td>
<td>Lesbian/Dyke</td>
<td>Florida</td>
</tr>
<tr>
<td>Drea</td>
<td>28</td>
<td>Bachelor's</td>
<td>Caucasian</td>
<td>Poor/Disabled/Unemployed</td>
<td>Bisexual</td>
<td>Florida</td>
</tr>
<tr>
<td>Eliza</td>
<td>25</td>
<td>Bachelor's</td>
<td>Caucasian</td>
<td>Middle</td>
<td>Queer</td>
<td>Nova Scotia</td>
</tr>
<tr>
<td>Ella</td>
<td>24</td>
<td>Bachelor's</td>
<td>Latina</td>
<td>Middle</td>
<td>Lesbian/Dyke</td>
<td>New Mexico</td>
</tr>
<tr>
<td>Emily</td>
<td>23</td>
<td>Bachelor's</td>
<td>Caucasian</td>
<td>Lower-Middle</td>
<td>Queer</td>
<td>Ontario</td>
</tr>
<tr>
<td>Emma</td>
<td>22</td>
<td>Some College/Associates</td>
<td>Caucasian</td>
<td>Upper-Middle</td>
<td>Queer</td>
<td>Ontario</td>
</tr>
<tr>
<td>Eva</td>
<td>29</td>
<td>Master's</td>
<td>Caucasian</td>
<td>Middle</td>
<td>Lesbian/Dyke</td>
<td>New York</td>
</tr>
<tr>
<td>Pseudonym</td>
<td>Age (years)</td>
<td>Highest Level Education Completed</td>
<td>Race/Ethnicity</td>
<td>SES/Class</td>
<td>Sexual Identity</td>
<td>State/Province of Residence</td>
</tr>
<tr>
<td>-----------</td>
<td>-------------</td>
<td>-----------------------------------</td>
<td>-----------------------</td>
<td>----------------------</td>
<td>-------------------</td>
<td>-----------------------------</td>
</tr>
<tr>
<td>Frieda</td>
<td>28</td>
<td>Master's</td>
<td>Caucasian</td>
<td>Working</td>
<td>Unknown</td>
<td>Ontario</td>
</tr>
<tr>
<td>Gail</td>
<td>28</td>
<td>Bachelor's</td>
<td>Caucasian</td>
<td>Working</td>
<td>Queer</td>
<td>California</td>
</tr>
<tr>
<td>Jodi</td>
<td>38</td>
<td>Bachelor's</td>
<td>Caucasian</td>
<td>Lower-Middle</td>
<td>Queer</td>
<td>Colorado</td>
</tr>
<tr>
<td>Josie</td>
<td>31</td>
<td>Bachelor's</td>
<td>Caucasian/Jewish</td>
<td>Poor/Disabled/Unemployed</td>
<td>Queer</td>
<td>Washington</td>
</tr>
<tr>
<td>Judy</td>
<td>27</td>
<td>Some College/Associates</td>
<td>Caucasian</td>
<td>Working</td>
<td>Bisexual</td>
<td>British Columbia</td>
</tr>
<tr>
<td>Julie</td>
<td>30</td>
<td>Master's</td>
<td>Caucasian/Polish Citizen</td>
<td>Middle</td>
<td>Bisexual/Queer</td>
<td>Washington</td>
</tr>
<tr>
<td>June</td>
<td>21</td>
<td>Some College/Associates</td>
<td>Caucasian</td>
<td>Working</td>
<td>Queer</td>
<td>Ontario</td>
</tr>
<tr>
<td>Kendra</td>
<td>21</td>
<td>Some College/Associates</td>
<td>Caucasian</td>
<td>Unknown</td>
<td>Queer</td>
<td>Ohio</td>
</tr>
<tr>
<td>Kyla</td>
<td>45</td>
<td>Some College/Associates</td>
<td>Caucasian</td>
<td>Poor/Disabled/Unemployed</td>
<td>Lesbian/Dyke</td>
<td>Michigan</td>
</tr>
<tr>
<td>Lea</td>
<td>37</td>
<td>Master's</td>
<td>Caucasian</td>
<td>Working</td>
<td>Bisexual/Queer</td>
<td>Michigan</td>
</tr>
<tr>
<td>Lilia</td>
<td>22</td>
<td>Some College/Associates</td>
<td>Irish, Native American, Black</td>
<td>Unknown</td>
<td>Pansexual/Omnisexual</td>
<td>California</td>
</tr>
<tr>
<td>Lily</td>
<td>26</td>
<td>Master's</td>
<td>Caucasian/Jewish</td>
<td>Middle</td>
<td>Queer</td>
<td>Florida</td>
</tr>
<tr>
<td>Linda</td>
<td>22</td>
<td>Some College/Associates</td>
<td>Caucasian</td>
<td>Unknown</td>
<td>Queer</td>
<td>Sydney</td>
</tr>
<tr>
<td>Lynne</td>
<td>35</td>
<td>Bachelor's</td>
<td>Caucasian</td>
<td>Middle</td>
<td>Queer</td>
<td>California</td>
</tr>
<tr>
<td>Margaret</td>
<td>29</td>
<td>Doctorate</td>
<td>Caucasian</td>
<td>Upper-Middle</td>
<td>Bisexual</td>
<td>Massachusetts</td>
</tr>
<tr>
<td>Marisol</td>
<td>32</td>
<td>Some College/Associates</td>
<td>Caucasian</td>
<td>Working</td>
<td>Queer</td>
<td>New Mexico</td>
</tr>
<tr>
<td>Martha</td>
<td>25</td>
<td>Some College/Associates</td>
<td>Caucasian</td>
<td>Middle</td>
<td>Queer</td>
<td>Massachusetts</td>
</tr>
<tr>
<td>Pseudonym</td>
<td>Age (years)</td>
<td>Highest Level Education Completed</td>
<td>Race/Ethnicity</td>
<td>SES/Class</td>
<td>Sexual Identity</td>
<td>State/Province of Residence</td>
</tr>
<tr>
<td>-----------</td>
<td>-------------</td>
<td>-----------------------------------</td>
<td>------------------------------------</td>
<td>----------------------------</td>
<td>-----------------</td>
<td>-----------------------------</td>
</tr>
<tr>
<td>Maya</td>
<td>30</td>
<td>Unknown</td>
<td>Caucasian</td>
<td>Poor/Disabled / Unemployed</td>
<td>Bisexual</td>
<td>California</td>
</tr>
<tr>
<td>Mel</td>
<td>28</td>
<td>Bachelor's</td>
<td>Caucasian</td>
<td>Lower-Middle</td>
<td>Queer</td>
<td>Ontario</td>
</tr>
<tr>
<td>Michele</td>
<td>32</td>
<td>Master's</td>
<td>Caucasian</td>
<td>Unknown</td>
<td>Lesbian/Dyke</td>
<td>Michigan</td>
</tr>
<tr>
<td>Nina</td>
<td>25</td>
<td>Unknown</td>
<td>Caucasian/Latina</td>
<td>Unknown</td>
<td>Queer</td>
<td>California</td>
</tr>
<tr>
<td>Polly</td>
<td>40</td>
<td>Doctorate</td>
<td>Caucasian</td>
<td>Upper-Middle</td>
<td>Undefined</td>
<td>New York</td>
</tr>
<tr>
<td>Rachel</td>
<td>27</td>
<td>Some College/ Associates</td>
<td>Caucasian</td>
<td>Working</td>
<td>Queer</td>
<td>Ohio</td>
</tr>
<tr>
<td>Robyn</td>
<td>24</td>
<td>Bachelor's</td>
<td>Caucasian/Jewish/Native American</td>
<td>Unknown</td>
<td>Queer</td>
<td>Ohio</td>
</tr>
<tr>
<td>Sage</td>
<td>21</td>
<td>Some College/ Associates</td>
<td>Caucasian</td>
<td>Upper-Middle</td>
<td>Queer</td>
<td>Ontario</td>
</tr>
<tr>
<td>Samantha</td>
<td>20</td>
<td>Some College/ Associates</td>
<td>Caucasian</td>
<td>Unknown</td>
<td>Queer</td>
<td>Michigan</td>
</tr>
<tr>
<td>Selma</td>
<td>43</td>
<td>High School Diploma/GED</td>
<td>Caucasian</td>
<td>Working</td>
<td>Queer</td>
<td>Michigan</td>
</tr>
<tr>
<td>Susan</td>
<td>23</td>
<td>Bachelor's</td>
<td>Caucasian</td>
<td>Lower-Middle</td>
<td>Bisexual</td>
<td>Tennessee</td>
</tr>
<tr>
<td>Tabitha</td>
<td>33</td>
<td>Master's</td>
<td>Caucasian/Jewish</td>
<td>Upper-Middle</td>
<td>Queer</td>
<td>California</td>
</tr>
<tr>
<td>Teresa</td>
<td>24</td>
<td>Bachelor's</td>
<td>Caucasian</td>
<td>Unknown</td>
<td>Lesbian/Dyke</td>
<td>Maine</td>
</tr>
<tr>
<td>Terry</td>
<td>35</td>
<td>Unknown</td>
<td>Black/African American</td>
<td>Unknown</td>
<td>Heterosexual/ Straight</td>
<td>Michigan</td>
</tr>
<tr>
<td>Tiffany</td>
<td>20</td>
<td>Some College/ Associates</td>
<td>Caucasian</td>
<td>Unknown</td>
<td>Lesbian/Dyke</td>
<td>Massachusetts</td>
</tr>
<tr>
<td>Toby</td>
<td>50</td>
<td>Master's</td>
<td>Caucasian</td>
<td>Unknown</td>
<td>Lesbian/Dyke</td>
<td>Michigan</td>
</tr>
<tr>
<td>Trixie</td>
<td>27</td>
<td>Bachelor's</td>
<td>Caucasian</td>
<td>Middle</td>
<td>Queer</td>
<td>Indiana</td>
</tr>
<tr>
<td>Veronica</td>
<td>21</td>
<td>Some College/ Associates</td>
<td>Caucasian</td>
<td>Unknown</td>
<td>Queer</td>
<td>New York</td>
</tr>
<tr>
<td>Willow</td>
<td>51</td>
<td>Unknown</td>
<td>Caucasian</td>
<td>Unknown</td>
<td>Lesbian/Dyke</td>
<td>California</td>
</tr>
</tbody>
</table>

“Unknown” indicates that participant was not asked a particular question and/or declined to provide this information.