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THE REPRODUCTIVE BODY:
Exploring Reproduction Beyond Gender

by

ILYSSA A. SILFEN

A master's thesis submitted to the Graduate Faculty in Liberal Studies in partial
fulfillment of the requirements for the degree of Master of Arts,
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Abstract

THE REPRODUCTIVE BODY:
EXPLORING REPRODUCTION BEYOND GENDER

by

Ilyssa A. Silfen

Advisor: Professor Matthew Brim

Most of us have been taught over the course of our lives that biological sex, gender, and reproduction are inescapably linked and, over time, this has created the illusion that these are all naturally connected. However, these “natural” connections have been formed over time after generations of repetition. While it may seem impossible to separate biological sex, gender, and reproduction from one another, it is important to deconstruct this falsely organic system from both a gender and human rights perspective.

This thesis seeks to explore the complex relationship between society’s reproductive mandate and the reality of the various processes of reproduction in relationship with gender. While society, on paper, simply demands that everyone reproduce, the truth is that society only wants a certain subset of people to do so—those who are heterosexual, cisgender, and behave in conventionally gendered ways. This thesis further examines the gender and biological essentialism inherent in society’s reproductive mandate and explores this mandate in relationship with trans* reproduction, noting that there are certain standards to which trans* individuals are held in order for their gender to be deemed authentic that cis* individuals are not.

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Introduction

Most of us have been taught over the course of our lives that biological sex, gender, and the various processes of reproduction are inexorably linked, soldered together in a seemingly organic manner, creating the illusion that all of these things are somehow naturally connected. We have been taught that biological male equals masculine, biological female equals feminine, that masculine men desire feminine women and vice versa, and that any alternatives to these combinations either do not exist or are somehow sinful and wrong. This is connected to the belief that only men father children and only women give birth to them. It may seem impossible to extricate biological sex, gender, and reproduction from one another, especially considering our socialization to believe that these connections are unutterably true, but it is very important to deconstruct this falsely organic system and prove that these seemingly “natural” connections are not very natural at all. In a society where it is possible to change one’s legally recognized gender and to physically transition from one body to another—from male to female (M to F) and from female to male (F to M)—it is also entirely possible for a man to carry a pregnancy to term and give birth, and for a woman to father children.

Pregnancy as a process—and reproduction as a whole—reveals the politics behind the way in which we choose to engage the relationships between biology (i.e. the body) and gender, specifically the ways in which we identify and classify physical characteristics in relation to our exposure to heteronormative social and cultural belief systems. The processes of reproduction are strictly gendered, and as a result, these processes are treated as evidence of gender both in terms of physicality and ability. Arguments abound concerning the issue of men giving birth and women fathering children, with many believing that if you choose to transition gender and nevertheless use the reproductive organs with which you were born (and therefore the organs

with which you are supposed to no longer identify) in order to produce children, you are not actually the gender with which you identify. In other words, if you are transitioning from male to female for example, it is believed that you are not really a man if you choose to use your uterus to give birth to children, because the uterus has been characterized as a female organ. In that vein, the various reproductive processes, as well as the figure of the child, act as both signifier and condition of legitimacy, as well as a privilege of that legitimacy. In other words, the reproduction of children is believed to only be possible if you are a “real” (cisgender) man or woman, and the production of said children is a privilege of being proven to be a “real” (cisgender) man or woman. The reproduction of children, as well as the ability to produce children, is considered significant proof of gender authenticity, whereas trans*¹ individuals who produce children are considered as not truly being their identified status as a man or a woman since they are using their biological reproductive organs (e.g. the organs with which they are assumed to not identify in terms of their gender identity) in order to produce children. Furthermore, the inability to reproduce as one’s self-identified gender is also used as a signifier of gender inauthenticity (e.g. if you are born biologically male but identify as female, the fact that you cannot gestate and give birth to a child will count as evidence against your female identity). Unlike cisgender individuals, for whom fertility—and the use of it—is proof of their gender authenticity, for trans* individuals, the only proof of their gender authenticity is total sterility. It is in this way that one’s gender authenticity is inherently predicated on one’s reproductive capabilities (and vice versa).

The physicality of gender is in direct relationship with its social nature, where our physical body has to align “properly” with our gender identity in order for us to be perceived by

¹ The asterisk after the word “trans” is in place to include all non-cisgender gender identities and will be used throughout this paper.

society as authentic. A critique exists in both the cisgender and LGBTQ communities that once you begin to identify as the gender opposite from the one you were assigned at birth (to borrow the terminology of the gender binary), you lose the privilege of reproducing children in the way that the gender of your birth would allow you to. This is particularly indicative of how biology and its relationship with gender dictates what we perceive as normal when it comes to pregnancy and reproduction; it also brings up the question of whether or not it is logical to place a gender on certain biological processes (such as reproduction) or on certain organs (the testes, the ovaries, the vagina, the penis, etc.). In a society where we can legally change our sex, where we can transition from one body to another, thereby making it possible for men to give birth and for women to father children, is it feasible to continue to denote motherhood as belonging to women and fatherhood as belonging to men? My conclusion is that it is not, and as a result, I believe that we must take the gender out of reproduction altogether and focus on the functionality of our reproductive organs rather on their significance in our gendered identities, and we must acknowledge that people of many genders (not just male and female) exist, and that many of these people will choose to reproduce. In other words, rather than focusing on reproductive organs and processes as sites of gendered meaning (e.g. ovaries and pregnancy = woman, testes and ejaculation = man), we could instead focus solely on their reproductive capacity. If we chose to ungender reproduction, it is entirely probable that we would begin to discuss pregnancy as a pathway to fatherhood as well as motherhood—ejaculation as a pathway to motherhood as well as fatherhood. Not only would the ungendering of reproduction create processes of reproduction without gender, but it could also possibly end the reproduction of gender.

One of the ways that we could go about producing this change would be to expand our understanding of gender and its relationship to reproduction in terms of both

physicality/capability and their social construction, separating gender from body parts and acknowledging that neither biology nor gender are as strict as we would like to believe. In talking about the physicality of gender, I am specifically talking about the biological characteristics and physical cues that we use in order to determine one's sex (e.g. secondary sex characteristics), such as developed breasts, the presence or absence of body and/or facial hair, and/or the presence or absence of curves. These physical cues are used as evidence of one's biological sex, which in turn causes many people to assume one's gender. Each reproductive process (pregnancy and insemination) has a specific gender and biological sex attached to it due to repeated assertions about who does what in reproduction. In the example of Thomas Beatie, his pregnant body caused quite a stir in the general public and caused us to take a second look at what gender and biological sex have to do with pregnancy, as well as reproduction as a whole. While identifying as a man, and after having a double mastectomy and hormone treatments so that his physical body would match his gender identity, he used his biologically female reproductive organs in order to produce children. His pregnancy, after it became public knowledge, quickly garnered mass publicity, much of it fierce condemnation. The majority of this rejection had to do with our collective inability to recognize and accept a pregnant male body. Our culture dictates that pregnancy is specifically a female process (read: belonging to cis women), so when we came face-to-face with a pregnant man, it forced us to ask ourselves, is pregnancy (and the pregnant body) truly inherently female? In that same vein, is insemination (and the associated body) truly inherently male? What do our conceptions of gender and biological sex in relation to reproduction say about our conceptions of gender and biological sex overall? That we feel the need to ask these questions, and the answers that are often provided, proves that society is confused about its own reproductive mandate. This mandate is inherently

flawed, and a tension exists between the basic demand that the reproductive mandate makes of society's members ("Everyone must reproduce") and what the mandate is actually requiring. The reproductive mandate is clearly geared toward a specific subset of society, which is heterosexual couples consisting of one cisgender, conventionally masculine man and one cisgender, conventionally feminine woman. Any reproductive act that occurs outside of that subset is considered abnormal and suspect despite the fact that, on paper, all society's reproductive mandate demands is that people reproduce—there is no actual specification concerning who must do the reproducing. The result of the continuous repetition of this specific type of reproduction being touted as the norm is confusion concerning to whom reproduction belongs, who has (and should have) the privilege of reproducing, and the gendered implications of certain reproductive capabilities and processes.

Gender and Biological Essentialism in Reproduction

Gender essentialism is inherent in our perceptions of reproduction, so much so that even our gametes are assigned gendered behaviors. There are two types of gametes – ovum, which are characterized as female, and sperm, which are characterized as male. We often forget that, despite their characterization as female and male, respectively, ovum and sperm have the same basic function—providing the genetic material necessary to produce a baby. In her article "The Egg and the Sperm: How Science Has Constructed a Romance Based on Stereotypical Male-Female Roles," Emily Martin asks us to examine the ways in which the egg and the sperm are characterized, stating:

Take the egg and the sperm. It is remarkable how "femininely" the egg behaves and how "masculinely" the sperm. The egg is seen as large and passive. It does not move or journey, but passively "is transported," "is swept," or even "drifts" along the fallopian tube. In utter contrast, sperm are small, "streamlined," and

invariably active. They "deliver" their genes to the egg, "activate the developmental program of the egg," and have a "velocity" that is often remarked upon. Their tails are "strong" and efficiently powered. Together with the forces of ejaculation, they can "propel the semen into the deepest recesses of the vagina." For this they need "energy," "fuel," so that with a "whiplashlike motion and strong lurches" they can "burrow through the egg coat" and "penetrate" it (489).

The eggs and sperm, despite having absolutely no consciousness, and therefore no conscious motivation concerning their respective roles in reproduction, are given stereotypically feminine and masculine characteristics, with the feminine characteristics of passivity (and therefore the eggs) being portrayed as negative and the masculine characteristics of aggressiveness (and therefore the sperm) being portrayed as positive. Martin goes on to note that "[i]n the case of women, the monthly cycle is described as being designed to produce eggs and prepare a suitable place for them to be fertilized and grown, all to the end of making babies.... By extolling the female cycle as a productive enterprise, menstruation must necessarily be viewed as a failure" (486). This construction of menstruation as a failure rather than a natural biological process that has nothing to do with failure or success is indicative of the extent of the social construction of motherhood as a necessity for all women, and characterizes women's monthly menstruation as a sign/reminder that they have failed in the ultimate womanly endeavor. It is quite interesting to note that this is not coming from a purely sociological/cultural standpoint, but rather from a scientific/biological standpoint with sociological/cultural undertones attached to it. The characterization of menstruation as a failure of the woman to produce a child perpetuates the idea that women's biological capacity to reproduce should automatically translate into a compulsory/required act. Adrienne Rich makes the observation that

None of the "experts'" advice has been either particularly scientific or women-oriented; it has reflected male needs, male fantasies about women, and male interest in controlling women—particularly in the realms of sexuality and motherhood...(230).

Here, Rich examines the institution of motherhood, and the way that it is medicalized and (re)defined by men, as another means of women's oppression. It is surely no coincidence or mistake that motherhood has become compulsory and that motherhood and womanhood are so intricately linked. Femininity is linked so intrinsically with the institution of motherhood due to the perceived inherent characteristics of nurturing instinct, emotional availability, and passivity, all of which are believed to make one a good mother, as well as a good woman.

When looking at gender, specifically at masculinity and femininity and what each means to us, we often look to the abstract concepts of behavioral patterns. In our society, aggression and competitiveness are considered to be masculine while passivity and nurturing are considered to be feminine. However, much of our understanding of gender also comes from the physicality of it—there are certain bodily characteristics that we read as either masculine or feminine. For example, most people would associate a more muscular body with masculinity, as opposed to a softer body, which would be associated with femininity. When the conceptualization of pregnancy enters the picture, this concept of the physicality of gender is particularly important to note, especially concerning how it relates to our notions of gender (specifically femininity). In her study “The Gender of Pregnancy: Masculine Lesbians Talk about Reproduction,” Maura Ryan notes that “[h]eterosexism and patriarchy collude to create an expectation of pregnancy for all women. In addition, the bodily production of pregnancy has been socially gendered as feminine because of its association with female-bodied people” (119). In other words, the repetitive nature of female-bodied persons going through the biological process of pregnancy and childbirth has created the assumption that pregnancy belongs only to female-bodied persons (read: cisgender women). Ryan decided to interview only childfree lesbians for this study because of her observation that the “two ideological codes—that all women should become

mothers through pregnancy and that pregnancy is a femininely gendered endeavor—suggest a conundrum for masculine lesbians” (119). When she conducted these interviews, she found that “all participants agreed that feminine pregnancy is a cultural construction. Still [in the context of why they chose to avoid pregnancy], they talked about [the theoretical condition of] being pregnant as becoming, feeling, and being perceived as more feminine than one might have been before pregnancy” (Ryan 125). While pregnancy is perceived as a cultural construction, there is still an association with typical femininity and with being perceived as feminine, even though pregnancy as a biological process is neither masculine nor feminine. In fact, “many of [the participants’] comments illustrated a distinctly essentialist understanding of pregnancy necessitating femininity. For instance, all participants noted that pregnancy introduces bodily changes that highlight biological femaleness, which is conflated with femininity” (Ryan 125). The curvy, non-pregnant body in and of itself is perceived as feminine, whether that body is perceived as male or female; however, pregnancy brings on bodily changes like enlarged breasts, wider hips, and a protruding stomach, which are believed to amplify one’s femininity and make it even more obvious. Pregnancy, and the physical changes that come with it, amplifies the attributes that we read as feminine and makes more obvious what specific bodily characteristics we look for in order to read someone as female. Ryan noted that for those participants whose masculinity is contingent on their bodily appearance, even though they already “currently have female bodies they expressed concern that they could have *more* of a female body than they do now” (125). This brings to mind an interesting concept of the physical, gendered body as existing on a continuum or spectrum. If it is true that one’s physical portrayal of gender (in other words, the gender they choose to present with their bodies) is contingent on physical characteristics such as body and/or facial hair, the possession of a

muscular or curvy body, and wearing one's hair short or long, then it makes sense that the reproductive process of pregnancy—and the changes that they would experience—would have high stakes for someone who identifies as masculine and/or male. In that vein, it is easy to understand how and why pregnancy is treated as proof of cis women's femininity and femaleness. When a woman becomes pregnant, not only is her abstract femininity confirmed, but her physical "femaleness" is confirmed as well. In another study titled "Reproductive Wish in Transsexual Men," eleven out of the fifty trans* men who participated in the study had children, and "three of the participants gave birth themselves before hormonal therapy and SRS. Two of those three participants who gave birth themselves experienced this as (very) problematic, while one participant found this experience very pleasant" (Wierckx et al. 485). It is not indicated why the two participants found the childbirth experience problematic, but based upon my other research, it is reasonable to assume that they felt their gender identity clashed with the biological process of pregnancy and childbirth, which has been categorized as essentially female and involves "female" body parts in order to complete. In order to eliminate the concept of pregnancy as being a specifically feminine and/or female process, we would need to go even deeper and eliminate the concept of gendered bodily characteristics, which is no easy task!

In our society, we define bodies as male and female. If we were to ask ourselves as a society exactly how we would go about defining these bodies, we would likely argue that we do so by looking at reproductive organs and secondary sexual characteristics. Going beyond that, we might even argue that chromosomes are the deciding factor in determining gender. For example, if somebody has two X chromosomes, they "must" be female, no matter what their external appearance and no matter what surgeries they may have had. However, in all of these

delineations of male and female, we forget the role of culture in constituting male and female as categories that supposedly have unambiguous biological referents. Biology itself certainly did not decide that two X chromosomes denote a female and that one X and one Y chromosome denote a male. Is there something inherent in the X chromosome that makes it female and in the Y chromosome that makes it male? Judith Butler argues in her book *Undoing Gender* that, in our society, how “the genetic presence of the ‘Y’ works in tacit ways to structure feeling and self-understanding as a sexed person is the basis [for evidence of one’s male gender]” (64). Even though the Y chromosome in and of itself is not necessarily inherently male, we have been socialized to believe that its very presence in a person’s body indicates that the person is male. In that same vein, is there something inherent in the uterus/ovaries/vagina that makes them female and in the testicles/penis that make them male? There is absolutely no actual biological evidence that there is a specific gender tied to any of these chromosomes and organs, except for the evidence that people decided exists. There is no reason that we cannot expand our conceptions of pregnancy to include men and insemination to include women, nor is there any reason why we cannot talk about the male uterus, male ovaries, or a male vagina, as well as female testes and a female penis. There is nothing about any of these things that we can pinpoint as being specifically masculine or feminine, and therefore as belonging to only men or women. After all, biology is not nearly as strict as many people would like to think it is. For example, most of us learned in school that the male of the seahorse species carries and gives birth to their young. Even human biology is pretty lax—biology produces human beings that reside outside the boundaries of the gender binary all the time. I cite the example of gynecomastia, which is defined as “swelling of the breast tissue in boys or men, caused by an imbalance of the hormones estrogen and testosterone” (Mayo Clinic). The definition itself reveals a gender binary bias, in

that the swelling of the breast tissue is defined as a medical problem and as being the result of a hormonal imbalance. The only reason it is being described as such is because our culture dictates that men must have a certain level of hormones (more testosterone than estrogen) and a certain type of body (muscular, angular)—therefore, it is no surprise in that context that a boy or a man would be described as having “too much” estrogen and “too little” testosterone, resulting in the development of breasts, which are a specifically “female” body part.

Biology also produces intersex individuals, whom Judith Butler defines as having “sexually indeterminate or hermaphroditic anatomy” (4). In our society, we treat intersex individuals as abnormalities who require surgery in order to fix them when, in reality, there is nothing wrong with intersex individuals at all. As Butler notes, we need to come to “an understanding that [people] with intersexed conditions are part of the continuum of human morphology” (4). In other words, rather than viewing intersex individuals as being abnormal, we need to expand our collective vision of gender and make it more comprehensive; we do not exist in a binary, but a spectrum, and intersex individuals are simply another part of that spectrum. There are also chromosomal variations such as Triple X Syndrome, where a female-bodied person carries an extra X-chromosome (Mayo Clinic), Klinefelter syndrome, where a male-bodied person carries an extra X-chromosome (Mayo Clinic), XYY syndrome, where a male-bodied person carries an extra Y-chromosome (Holland), and Turner Syndrome, where a female-bodied person is missing an X chromosome or carries one that is incomplete (The University of Utah). We characterize these biological characteristics as “abnormal” as a direct result of our socialization into the sex and gender binaries, not because there is anything actually biologically wrong, *per se* (there are cases where these chromosomal conditions can result in moderate to severe negative health effects, but most people live very ordinary and healthy lives), but because

we fail to conceptualize the possibility that they are simply natural variations of sex and gender. Just because someone has a chromosomal makeup that is not XX or XY does not mean that they are inherently abnormal or flawed, and it is crucial for us to begin to conceptualize a gender spectrum, rather than a binary, in order to be more inclusive of those whose bodies and genders do not necessarily fit into the artificial gender binary. As Butler argues, we need to “question why society maintains the ideal of gender dimorphism when a significant percentage of [people] are chromosomally various” (65) and recognize that “a continuum exists between male and female that suggests the arbitrariness and falsity of the gender dimorphism as a prerequisite of human development” (65). This is particularly important for trans* men with working “female” reproductive systems and trans* women with working “male” reproductive systems—especially those who have chosen to use them to produce biological children—in that it is more inclusive and acknowledges that some men will, in fact, give birth, and some women will father children.

Physicality is not the only factor in how we interpret gender identities and integrate them into our understanding of the world. There are social factors as well, such as family ties, which allow the general population to translate gender difference into something that they can understand more clearly. Both the physicality and the social aspect of gender are represented a great deal in Landau’s article “Reproducing and Transgressing Masculinity.” The article is a write-up of a study that Landau did in which she showed two digital photographs of a heavily pregnant Thomas Beatie (a transgender man who kept his biologically female reproductive organs in order to be able to bear children, choosing to do so because his then-wife was infertile) to a group of American women of childbearing age and recorded their ideological, emotional, and physical interactions with the photographs (178). The first picture portrayed Beatie by himself, one hand behind his head and the other holding his pregnant belly. Landau notes that

the women “more often than not...focused on specific visual codes that they interpreted as ‘masculine’ or ‘manly,’ such as facial and armpit hair and ‘no breasts.’ Then they focused on how the ‘stomach’ or ‘belly’ stuck out because it was a ‘beer belly’ or a disease of some sort” (186). The women in this study react to this image in a very interesting way—the visual of Beatie’s pregnant belly, something that has been traditionally characterized as female, emphasizes his masculine traits all the more. Rather than focusing on his pregnant belly, most of the participants noted his masculine/“manly” traits and then tried to explain his pregnant belly after the fact. In the second picture, Beatie is portrayed with his wife Nancy, who has her head on his chest and is cradling his pregnant belly. Landau notes that “the majority of the women interacted with Figure 2 in some ways that were similar to their interaction with Figure 1, such as how they ideologically decoded traditional visual symbols of facial hair as meaning a ‘man.’ Overall, the women ‘made sense’ of a ‘pregnant (transgender) man’ and a ‘happy family’ instead” (190). In their reactions and interactions with the second photograph, rather than reproducing the figure of a pregnant man, they specifically reproduced the figure of a pregnant transgender man, asking questions about the symbolism of transgender and commenting and questioning the scientific and medical possibilities therein (Landau 191). In other words, in order to understand Beatie’s pregnancy, rather than reading Beatie as a man, the women had to specifically read Beatie as a trans* man—they had to read him as someone who had previously been female-bodied at some point in his life. This in and of itself is progress, according to Landau, who argues that

for the most part [today’s women of child-bearing age] no longer make meaning of pregnancy as traditionally female or feminine and disassociated from masculine men, since “a pregnant (transgender) man” was reproduced. I suggest that this is hopeful for challenging gender and biological essentialisms related to human reproduction because it is an alternative to the norm...Even more progressive is the fairly positive feelings and ideological interpretation of the

visual symbol of a pregnant man who was “transgender,” since just the use of that terminology promotes nonbinary gender and sexuality. (Landau 192-3)

Despite reading Beatie as male, not only were the women in the study able to conceptualize the idea of a pregnant transgender man, they were also able to react to it positively. Beatie’s existence as a pregnant transgender man in and of itself indicates that the reproduced sociological norms relating to the relationship between biological reproductive capacity, gender identity, and sexuality can be (and are being) transgressed. Landau states that “[i]t is plausible that the protruding (pregnant) belly comically revealed, at least to some of the women of child-bearing age, the distinction between the anatomy of men and the performance of gender, a contingent relation that is all too often and erroneously assumed to be natural” (188). For the women participating in the study, Beatie’s pregnant belly does not only emphasize his masculine traits, but it also reveals the performativity of gender vs. the socio-cultural dictates of biology.

Gender essentialism has played a large role in the general public’s reaction to Thomas Beatie’s pregnancy, including his pregnant body and how that body was interpreted within the context of our society’s conceptions of biological sex and the related reproductive processes and capacities. As a society, we expect certain bodies of certain biological make-up and gender representation to reproduce in specific biological and gendered ways. Beatie pushes against the norms of heteronormative cisgender reproduction in that he uses a visually male body in a conventionally “female” manner for the purposes of reproduction and refuses to see himself as any less of a man because of it. I return to Jamie Landau’s study in the next chapter to explore the societal and cultural implications of the gender essentialism inherent in our reactions to reproductive bodies that exist outside the socially accepted sex/gender/reproductive intersection.

Connecting Biology, Normative Gender Roles, and Reproduction

In order to analyze the role of normative gender roles in reproduction (and vice versa), we must look at Darwin's work. In her book *Evolution's Rainbow: Diversity, Gender, and Sexuality in Nature and People*, in a chapter titled "The Theory of Evolution," Joan Roughgarden discusses Darwin's theory of evolution and sexual selection and how he applied a deeply sexist and heteronormative social hierarchy and structure to the biological processes of the natural world. She notes that

Darwin pejoratively viewed diversity within a species as a hierarchy beginning with superior individuals and winding down do the "retarded," a view that is diversity-repressing and elitist, stressing a weeding out of the weak and sickly and naturalizing male domination of females....The contradiction evident in Darwin's attitude to diversity within species...plagues our society today, from biology and medicine to politics and law. (Roughgarden 165)

In other words, even though Darwin published his theory long ago, the contents of his theory have had far-reaching implications in practically all aspects of our society. We continue to believe that men are hard-wired to be sexually aggressive and that women are hard-wired to accept it. In relation to this, Roughgarden discusses a then-recent publication of a theory of the naturalness of rape, where the argument is made that "men unable to find mates in the 'usual way' can reproduce through rape. Genes for rape then increase, leading to the brain's acquisition of a 'rape chip.' All men are therefore potential rapists, although they do not necessarily act on this potential, depending on external circumstances" (173). Another example of the defense of male sexual aggressiveness as "natural" can be found in the article "Why Do Men Rape? An Evolutionary Psychology Perspective" by William F. McKibbin, Todd K. Shackelford, Aaron T. Goetz, and Valerie G. Starratt, which argues

For rape to be produced by evolved psychological mechanisms, it must have recurrently generated reproductive benefits for ancestral rapists. These benefits must have outweighed the costs that men may incur if they attempt or

successfully complete a rape. Despite the costs, there is evidence that rape may have increased the number of women with whom ancestral men copulated and, therefore, the reproductive success of rapist males. (McKibbin et al. 88)

In this argument, the authors state that rape is an *evolved behavior*, i.e., an improved behavior from our ancestors. Not only are the authors arguing that rape is an evolved behavior, they are also arguing that there are reproductive benefits to rape, and therefore making the argument that rape is evolutionarily beneficial. These are just a few examples of the many societal repercussions of Darwin's work that Roughgarden discusses in her chapter:

Today's [sexual selection] theory makes matters worse by adding new mistakes, morphing what Darwin actually wrote into a caricature of male hubris. According to today's version, males are supposed to be more promiscuous than females because sperm are cheap, and hence males are continually roaming around looking for females to fertilize. Conversely, females are supposed to be choosy because their eggs are expensive, and hence they must guard their investment from being diluted with bad genes from an inferior male. A male is naturally entitled to overpower a female's reluctance lest reproduction cease, extinguishing the species. (167-8)

Darwin's theory of sexual selection is rooted in heterosexism and has resulted in what can only be called a biological defense not only of a sex and gender binary, but also of male sexual aggression and rape. As Roughgarden notes, "Sexual selection theory has long been used to perpetuate ethically dubious gender stereotypes that demean women and anyone else who doesn't identify as a gender-normative heterosexual male" (172). Lesbians in particular, in a society that is both deeply homophobic and sexist, face a unique sort of hostility; they face derision not only because they are women who love women but also because, due to the fact that they only love other women, men are removed from the equation entirely. They face a unique spectrum of violence, ranging from minimization and being made invisible within society and within their own families, to physical acts of violence such as murder and "corrective" rape. The concept of corrective rape stems from the idea that women are only supposed to be sexually attracted to men, the result of which is the belief that all lesbians need is a good man to remind

them of their place. This physical act of extreme violence stems from the socially constructed and unbending connection between biological sex and sexuality and extends into the connection between gender and reproduction. While this connection is made out to be a natural, organic connection, it is in reality a compulsory act, an act driven by social pressure and repetition, creating the illusion that this connection is normal.

As Wittig argues in her critically important essay “One is Not Born a Woman,” women are only women due to their social and political relationships with men—she states that “Once the class ‘men’ disappears, ‘women’ as a class will disappear as well, for there are no slaves without masters” (106). If women love women, they exclude men from their primary romantic, emotional, and sexual lives, and they do not fulfill their socially constructed roles within heterosexual relationships, heterosexual marriage, and reproduction, the latter of which is more often than not a compulsory act. In that vein, Wittig acknowledges that women who control their reproduction will also have to reject the label “woman,” stating that “gaining control of the production of children will mean much more than the mere control of the material means of this production: women will have to abstract themselves from the definition ‘woman’ which is imposed upon them” (104). Our society conflates womanhood and motherhood to an excessive degree, essentializing the biological capabilities of pregnancy and childbirth as well as the supposedly natural and innate ability of childcare as the ultimate signifiers of woman-ness. Therefore, it is not that far-fetched to argue that women who reject motherhood could also be considered “not women” and that motherhood in and of itself is a socially constructed identity, one that, to borrow and paraphrase Judith Butler’s argument concerning the performance of gender, relies on repetition, performativity, and compulsion in order to be continually reproduced as a natural given. Those of us who reject motherhood as an inevitability are often characterized

as unnatural, further perpetuating the belief that woman→mother is the natural cycle of things and any other choice is, by definition, unnatural. In other words, to question motherhood is to question womanhood, and by refusing to engage in the institution of motherhood, by refusing to acknowledge motherhood as an unavoidable life course, we remove ourselves from a system that defines us by our biologically determined reproductive and sociologically constructed nurturing capabilities.

As Wittig states, “instead of seeing giving birth as a forced production, we see it as a ‘natural,’ ‘biological’ process, forgetting that in our societies births are planned (demography), forgetting that *we ourselves are programmed to produce children*, while this is the only social activity ‘short of war’ that presents such a danger of death” (104). When we provide young girls with dolls, meant to prepare them for inevitable motherhood, we are preparing them through play for a role that is supposedly naturally innate and biologically inevitable, and we fail to address the very real physical, emotional, and mental risks involved with pregnancy and childbirth, as well as the emotional and mental stressors involved with childcare. Adrienne Rich, in her essay “Compulsory Heterosexuality and Lesbian Existence,” agrees with Wittig, wondering why “species survival, the means of impregnation, and emotional/erotic relationships should ever have become so rigidly identified with each other; and why such violent strictures should be found necessary to enforce women’s total emotional, erotic loyalty and subservience to men” (232). Rich argues here that women’s capability of producing offspring has, over time, become an obligation due to the strict gender hierarchy that states men’s desires are worth more than women’s physical and sexual autonomy. This is evident in that men’s bodies and sex lives are not regulated to the same level as women’s bodies, if at all. There has yet to be a legislative bill passed that restricts men’s access to Viagra and vasectomies, or forces unwanted medical

procedures on them in order for them to access these things. Women are not allowed autonomy over their bodies simply due to the fact that they have the capability of producing children, and our legal system is continually trying to implement policies that make sure this disallowance sticks—these same systems make it close to impossible for women to prevent pregnancies and terminate the pregnancies that result from the lack of access to birth control methods. For a society and a legal system that believe that all women are naturally wired for motherhood, they certainly have to do a lot of work to make sure that women do not opt out! In that regard, what are women who cannot reproduce or, like myself, have chosen not to reproduce? Are we not-women? Half-women? How about women who are just beginning or ending their periods, such as those going through menarche or menopause? How about trans* men, who have decided to produce children using their biologically female reproductive organs in order to do so? These questions alone illustrate the illogical nature of defining human beings as only two biological sexes, and they also demonstrate an inherently violent ideology that is aimed at women who do not, will not, and/or cannot reproduce.

It is for these reasons that I take serious issue with the way in which society promotes a natural link between being biologically female, and therefore feminine, and therefore naturally nurturing and maternal and desiring of pregnancy. In other words, according to today's social norms, women by their very nature have an unshakeable desire to bear children. This link has caused pregnancy and birth to become a compulsory act rather than a choice, and one could argue that pregnancy and birth were never a choice for women in the first place. For many people, women are defined by their ability to reproduce; in fact, this very rhetoric concerning reproductive capability was used to discredit Thomas Beatie's gender identity. Many people in both the straight and LGBTQ communities argued that he was not really a man because he had

decided to keep his ovaries, uterus and vagina, and because he had made the decision to perform a decidedly female act: giving birth. Many cisgender women criticized him for taking away the one thing that makes women worthwhile, or at least the one thing that only women can do, and this alone is evidence of how society's outdated and hostile connections between biological sex, gender, and reproduction have become the norm. The vehement censure of Beatie's decision to birth his own children has had far-reaching implications outside of his reproductive capabilities and choices. For example, in March 2013, Beatie decided to divorce from his wife, but the judge refused to grant the divorce, stating that "he had no jurisdiction to approve a divorce because there's insufficient evidence that Beatie was a man when he married Nancy Beatie in Hawaii. He said the Beaties never provided records to fully explain what Thomas Beatie actually had done and not done to become a man" (Davenport and Fonseca). In other words, the judge refused to grant them a divorce because, due to Beatie's apparently ambiguous legal gender status, it was not entirely clear whether or not he and Nancy were legally married—the issue being that same-sex marriage is illegal in Arizona, and therefore, if Beatie was still legally a woman at the time of the marriage, the marriage would be considered invalid. The general consensus is that the legal, federal definition of gender includes whatever is present on your birth certificate. In that case, since Beatie was granted a new birth certificate in Hawaii before the marriage (Davenport and Fonseca), the marriage would indeed be valid and therefore eligible for a divorce. What is particularly interesting is the way in which the judge refers to Beatie's gender as something that he "became," and which included certain steps that he would have to take in order to be considered a man. As Butler notes, "to go from F to M, or from M to F, is not necessarily to stay within the binary frame of gender, but to engage transformation itself as the meaning of gender...becoming is the vehicle for gender itself" (65). The judge's response to Beatie's gender

identity reflects this avenue of thought. However, it is clear that, for the judge, the aforementioned list of steps to “become” a man included the removal of Beatie’s ovaries and uterus, as well as his cessation of the use of those reproductive organs, as noted by the judge’s comment that “he was unable to find legal authority defining a man as someone who can give birth” (Davenport and Fonseca). The reason for this is likely that one’s reproductive capacity is not referenced in any legal definition of “man” or “woman,” which is also quite interesting to note. If one’s reproductive capacity were a factor in the legal definition of gender, then anyone who is infertile would, legally speaking, not be considered a man or a woman.

Gender essentialism is inherent in our analysis of, and reactions to, trans* men’s pregnancies. In the article “Reproducing and Transgressing Masculinity: A Rhetorical Analysis of Women Interacting with Digital Photographs of Thomas Beatie,” which I referenced earlier in this paper, Jamie Landau notes that many cis-women’s reactions to male pregnancy have been negative, arguing a belief that trans* men are attempting to appropriate pregnancy, which is a specifically “female” domain (182). She notes that “scholars predominantly argue that verbal and visual representations of male pregnancy generally symbolize male takeover of human reproduction at the expense of erasing reproducing women” (Landau 183). It is interesting to explore why, in feminist scholarship and general discourse surrounding pregnancy where cis-women have been fighting to be viewed as more than just baby-machines, cis-women would react this way to the ungendering of pregnancy through the lens of the trans* male body. The majority of the argument surrounding reproductive rights is that women are more than just walking uteri, and yet when faced with the possibility of male pregnancy, despite not wanting to be known by our biological reproductive capacity alone, we revert back to the argument that pregnancy is a woman’s domain. This idea of trans* men appropriating pregnancy and

invisibilizing pregnant cis women is similar to the transphobic rhetoric of many rad-fem (radical feminist) groups who argue that trans* women are merely men in drag infiltrating women-only spaces. Likewise, pregnant trans* men are seen as infiltrating the women-only space of pregnancy and childbirth, and as a result, male pregnancy is treated as a threat to women's reproductive capacity. However, this interpretation of male pregnancy is inherently flawed. When Thomas Beatie first went public with his pregnancy, women's pregnant bodies were not instantly erased from the picture as originally feared. In fact, the complete opposite happened—the majority of public commentary continued to vehemently argue pregnancy to be a woman's domain. The interpretation of trans* male pregnancy as threatening to the “natural order” of female-bodied pregnancy is interesting in that it requires Thomas Beatie, as well as all trans* men, to be read as male in order to work. Landau argues that, rather than erasing women's pregnant bodies, “a ‘pregnant man’ deconstructs the distinction between ‘male’ and ‘female,’ challenges traditional notions of gender, and enables a person to ‘escape the dictates of biology’” (183). In other words, the figure of the pregnant man makes visible the problematic way in which we characterize male-bodied persons as those who sire children and female-bodied persons as those who carry and give birth to them, and the even more problematic way in which we have made these characterizations essential to our interpretations of bodies, and our acceptance of bodies, as either male or female.

Taking the gender out of reproduction, in this case specifically pregnancy, would have major effects on women's everyday lives. First of all, there would be no more insistence on women having babies simply because they are women. Women would no longer have to give birth in order to prove their womanliness. In fact, most women do not know that they have the option of not having children, and by taking the essentialist femininity out of pregnancy, women

would have the option of saying no to motherhood without social sanctions and censure—there would be no more pressure on women to conform to a gender essentialist mandate of pregnancy, childbirth, and childcare. Secondly, there would be no more pressure on women to continue an unwanted pregnancy, as well as no more controversy surrounding abortion care. The controversy surrounding abortion has much to do with the perception that the instinct towards motherhood is innate in all women (for the purposes of staying on topic, I am choosing not to address the “right to life” argument at this point in time). In fact, one of the main factors in denying women abortions is the presumption that all women’s natural state is “mother.” Anti-choice legislation enforcers believe that, through the use of such tactics as waiting periods and forced ultrasounds, women’s supposedly natural instinct to protect their child will magically kick in and they will be eager to allow their child to live (to borrow the rhetoric of the anti-choice movement). These biological women are not just being punished for the general act of having an abortion; they are also being punished for denying, or even lacking, their “natural” maternal instincts. As Maura notes in her study “The Gender of Pregnancy,” “when someone fails to do gender ‘correctly’ he or she is held accountable for his or her social transgressions” (122). Instead of committing themselves to the “natural” progression of woman→mother, they are instead subjugating the supposed naturalness of that progression by seeking to terminate the pregnancy, and in the interests of preserving the illusion of the innate nurturing, maternal instinct of every biological woman, they are being punished for acting their gender incorrectly.

One of the things I have noticed recently about the conversation surrounding pregnancy and abortion is the overarching message that until men can get pregnant, they have no say in what women choose to do with their reproductive organs. The essential point of this statement rings true—unless you are capable of carrying a pregnancy, you should not have a say in what

other people do with their unwanted pregnancies. This essential point is much more inclusive, while the original statement fails to acknowledge trans* men who still have their biologically female reproductive organs—therefore, the assertion that “men cannot get pregnant” is clearly untrue. Abortion rights are equally important for both ciswomen and trans* men, particularly when referencing the fact that, for many trans* men, a pregnancy could put them in serious physical and/or psychological danger. Aaron, a trans* man, had this to say about his pregnancy:

I gave birth to my son in 2004—a son who was wanted, planned for, and loved. The deep love I had for my child didn't make the pregnancy an easy one, however. I am a transgender man. I had not come out as transgender or begun transitioning when I was pregnant, and carrying the pregnancy/giving birth was a very traumatic, difficult experience due to the cognitive dissonance between my mind and body. After all "men" can't get pregnant, right? Well, this one did.... The feelings of depression and despair were only endurable by focusing on the joy that would await me at the completion. (“Our Stories”)

In Aaron’s case, while he was happy to be pregnant and excited to meet his child, the physical reality of his pre-transition body combined with the subsequent pregnancy and childbirth—coded as “female” reproductive acts—did not match the physical, emotional, mental, and psychological reality of his gender. Aaron chose to keep the pregnancy because he wanted a child, but what about other trans* men for whom pregnancy and childbirth is physically, emotionally, and psychologically not an option? While I think the intentions of abortion rights advocates are essentially good, I think in their rush to defend women’s right to have an abortion, they have forgotten that there are, in fact, men who can get pregnant and, in turn, men who do not want to be pregnant. Including trans* men in conversations about abortion rights and abortion rights activism is crucial, and the gender essentialism in both, whether intentional or not, needs to be addressed. Anti-choice rhetoric is guilty of this same thing, although on a different level—it is based on the belief that men do not get pregnant, only women get pregnant, and that all women who get pregnant must keep the pregnancy. They, too, fail to realize that not all women can get

pregnant, whether they are cis women or trans* women, and that some men can and do. Another thing that is important to discuss is trans* men becoming pregnant pre-transition and pre-coming out as trans*, as in Aaron's case. On the outside, the pregnancy would look like a typical pregnancy. However, to someone whose gender identity is the "opposite" of what one would expect in a pregnancy, this could be anything but typical. We need to consider the implications of pregnancy from a trans* perspective, not just from a functional reproductive standpoint, but also from the perspective of psychological, emotional, and mental well-being.

Trans* Reproduction and the Reproductive Mandate

Judith Lorber notes in her book *Paradoxes of Gender* that "[a]s a process, gender creates the social differences that define 'woman' and 'man.' In social interaction throughout their lives, individuals learn what is expected, see what is expected, act and react in expected ways, and thus simultaneously construct and maintain the gender order..." (60). One of the many ways in which gender constructs and maintains the social differences that help maintain the gender order is, as Judith Butler so aptly terms it, compulsory repetition. Butler argues in her book *Undoing Gender* that "according to its [hypostatized heterosexuality] precept, those who enter kinship terms as nonheterosexual will only make sense if they assume the position of mother or father" (123-4). Butler then goes on to reference Sylviane Agacinski, who argues within this line of thinking that "...there is no absolute right to a child, since the right implies an increasingly artificial fabrication of children. In the interests of the child, one cannot efface its double origin," (118) referring to a child's "invariable beginning with a man and woman, a man who occupies the place of the father, and a woman who occupies the place of the mother" (Butler 118). In other words, the presumed natural order of reproduction dictates that in the reproductive

process, there must be a mother and a father in order for the reproductive relationship to make sense, and speaking from a heterosexist point of view, men are the ones who father the children, while women are the ones who give birth. When Butler and Agacinski talk about the reproduction of culture, they are specifically talking about the reproduction of who does what in the process of reproduction, as well as who plays what role and what that means for the figurative child. Of course, when talking about men fathering children and women birthing them in this context, we are expressly talking about cisgender and presumably heterosexual men and women. It is in this way that reproduction has, over time, become a very specifically gendered process, and trans* individuals problematize this presumed natural order by making it possible for women to be fathers and for men to be mothers. In other words, the dictum that “men are fathers and women are mothers” goes right out the proverbial window. Butler further discusses the French cultural belief that the child needs the signifiers of mother and father in order to achieve proper development and to assimilate properly into hir² culture and society, noting that “[t]he belief is that culture itself requires that a man and a woman produce a child, and that the child have this dual point of reference for its own initiation into the symbolic order, where the symbolic order consists of a set of rules that order and support our sense of reality and cultural intelligibility” (118). In contemplating this belief, we must recognize that it is not saying that a child needs the signifying figures of a mother and a father—it is saying that a child needs the signifying figures of a heterosexual, cisgender, feminine woman as hir mother and a heterosexual, cisgender, masculine man as hir father. In that regard, one must wonder what proponents of this belief think will happen when one’s biological father identifies as a woman and/or one’s biological mother identifies as a man. Wittig notes that “by its very existence,

² I am choosing to use gender-neutral terminology here and throughout this paper when applicable.

lesbian society destroys the artificial (social) fact constituting women as a ‘natural’ group” (103). Is it not possible, then, that by their very existence, trans* parents destroy the artificial (social) fact constituting fathers and mothers as natural, specifically gendered groups, as well? When we start looking at the issue of the right to have children, trans* reproductive rights become not just a gender issue, and not even just a biology issue, but also a human rights issue.

Gayle Rubin, in her essay “Thinking Sex,” discusses how “[m]odern Western societies praise sex acts according to a hierarchical system of sexual value....Individuals whose behavior stands high in this hierarchy are rewarded with certified mental health, respectability, legality, social and physical mobility, institutional support, and material benefits” (279). In other words, certain sex acts, such as reproductive sex between married couples, are given more social and cultural value than others, which results in better social standing for those who commit the sex acts that society deems most valuable. According to Rubin’s conception of the sexual hierarchy, “good” sex is considered to be heterosexual, cisgender, and reproductive, while trans* individuals are at the bottom of said hierarchy (282). A similar hierarchy exists for reproduction, where society praises certain reproductive acts according to a similar system of reproductive value. Society’s reproductive mandate simply states that everyone must reproduce; what is not mentioned, however, is that in order for the reproductive act to carry any social weight, the participants must be married (preferably), heterosexual, cisgender, and conventionally masculine or feminine if they are a man or a woman, respectively. Trans* individuals who choose to reproduce using their biological reproductive organs are a living paradox for the sexual/reproductive hierarchy, in that they are fulfilling the reproductive mandate (and participating in “good” sex by reproducing), but they are not the cisgender participants that society requires in order for the reproductive act to be seen as legitimate and socially valuable.

Society does not know whether to praise them for reproducing (and thereby following society's mandate) or censure them for being the "wrong" people to engage in reproduction.

In American society, trans* people are often only accepted (if they are accepted at all) as long as they promise to occupy (hetero)normative gender roles. In his essay "Normalized Transgressions: Legitimizing the Transsexual Body as Productive," Dan Irving explores how assimilatory politics play a role in the framing of legitimate transgender/transsexual bodies (15) and argues that there is an "imperative to be 'proper' in the eyes of the state" (23). He goes on to argue that "the valorization of the maleness or femaleness of post-transition transsexuals hinged in part on understandings of their productive capacity....The real-life test was administered by GICs [Gender Identity Clinics] to monitor the ability of the transsexual patient to live entirely as a demonstrable member of the opposite sex" (Irving 20). For trans* people, this often (if not always) means giving up their ability to reproduce, since in order for their gender to be considered "legitimate," they would have to give up their reproductive organs, which are strictly gendered. Irving goes on to note that "only a particular transsexual narrative – one that subscribes to hegemonic and heteronormative categories of sex/gender – will be accepted as a reflection of genuine transsexualism" (20). While it is true that many trans* individuals would prefer to have a full operation so that their bodies will match their gender, it is equally true that other trans* individuals would want to keep their functioning reproductive organs, viewing them from a purely functional standpoint, so that they would be able to have biological children in the future. Why is it that trans* individuals who desire biological children must give up an explicitly wanted working reproductive body in exchange for gender authenticity? In answering this question, I return to the concept of fertility acting as proof of gender authenticity—in reality, this only applies to cisgender people. For trans* individuals, the opposite is true—the only proof of

gender authenticity is sterility. Sterility in cisgender individuals, whether chosen or not, is seen as a tragedy because society's reproductive mandate states that they are the "right people" to engage in the process of reproduction, but it does not weigh in on their gender authenticity—we do not require infertile cisgender people to undergo fertility treatments in order to consider their gender legitimate. However, for trans* individuals, there is an unspoken edict that in order for their gender to be accepted as legitimate, they must give up their right to reproduce using their original reproductive organs. This is because cisgender people are considered to be doing gender correctly and therefore do not need to prove the legitimacy of their gender. Society does not consider transgender people to be doing gender correctly, so it asks them to go to extreme measures to prove their gender authenticity. This is one example of the social sanctions against perceived gender noncompliance that Maura Ryan discusses in her study (122), which I mentioned in my first chapter. Because society sees trans* individuals as doing gender incorrectly, they are summarily punished. From both a gender and human rights perspective, this is unacceptable—removal of reproductive organs and elimination of fertility should be a choice, not a requirement in order to be seen as authentically male or female.

When we think about the reproduction of gender, gender norms, and heteronormative behaviors, we have to ask ourselves why the fertility/infertility requirement exists. In the past, "[d]octors who opposed any medical intervention enabling one to change sex did so in part because they believed that this transition would thwart the...(re)productive potential of the (presumed) female" (Irving 19). Irving then cites the 1950s sexologist David O. Cauldwell, who argued that "it would be criminal of a doctor to remove healthy organs" ("Questions and Answers on the Sex Life and Sexual Problems of Transsexuals") whereby "[t]he criminal nature of the surgical act is rooted in Cauldwell's belief that to operate on the transsexual body is to

destroy its capacity for a (hetero)sexual life by thwarting the individual's reproductive potential" ("Questions and Answers on the Sex Life and Sexual Problems of Transsexuals"). Here, we can clearly see how sexuality (particularly heterosexuality) and biological capacity for reproduction are closely linked, as well as how the refusal to operate on a transsexual/transgender body lies in the belief that a heterosexual, reproductive life is the norm and should be preserved by any means necessary. Nowadays, while many doctors are willing to operate on trans* individuals' bodies, the preservation of a working reproductive body is seen as abnormal in the context of transition. Judith Butler cites the example of David Reimer, who was born biologically male but whose "penis was accidentally burned and severed in the course of a surgical operation" (59).

Butler notes that David went through

two transsexual surgeries: the first based on a hypothetical argument about what gender should be, given the ablated nature of the penis; the second based on what the gender should be, based on the behavioral and verbal indications of the person in question. In both cases, certain inferences are made, ones that suggest that a body must be a certain way for a gender to work, another which says that a body must feel a certain way for a gender to work. (71)

In the first surgery, because David's penis had been injured so extremely, it was decided that he should live as a girl because, without a working penis, he could not be a man. In the second surgery, it was David's insistence that he was a man that allowed him the opportunity to "become" a man again. For those who are transitioning from male to female, or vice versa, they may not necessarily want to give up a working reproductive body in order for their gender to be seen as authentic. However, because biology and gender are so intricately linked in our society, there is a strict assertion that in order to be a woman or a man, you must have certain body parts, so many trans* individuals might feel that having all possible surgeries is necessary. Separating gender from reproduction will extend trans* individuals' freedom to reproduce biologically

related children, should they desire them, by taking away the feeling that it is absolutely necessary to remove one's reproductive organs in order to be considered a man or woman.

Irving further argues in his essay "Normalized Transgressions," "[t]hat the organization of (re)production wields a significant influence on the social construction of sex and gender is a rudimentary point of feminist political economy. The construction of transsexual identities vis-à-vis capitalist productive relations serves to enrich our understanding of the ways that sex/gender are constructed as regulatory regimes" (17). It is a well-known concept that sex and gender are social constructs that act as regulatory factors in our lives, and the issue of reproductive organs being used for a purely functional purpose highlights this very clearly. When arguing the issue of trans* individuals using their reproductive organs from a purely functional perspective, rather than seeing those organs as signifiers of a specific gender/gender identity, we need to remember that there are plenty of cisgender individuals who also use their reproductive organs for a purely functional purpose—reproduction, whether it is through sexual intercourse, in-vitro fertilization (IVF), where the egg is fertilized outside of the womb and the resulting embryo is implanted into the uterus, or intra-uterine insemination (IUI), where the sperm is collected from the father and inserted into the uterus via a medical procedure. The gender identities of those cisgender individuals, to my knowledge, are not called into question. The only time that the functional use of reproductive organs becomes an issue from a gendered perspective is when trans* individuals attempt to do so, at which point the gendered nature of reproductive organs and processes suddenly becomes highly visible. We need to ask ourselves why it is so easy to ignore gender when it comes to the reproductive organs and processes of cisgender individuals, but not when it comes to those of trans* individuals. Of course, looking at

reproductive organs and reproduction itself as purely functional is not all that romantic, but it is practical, and certainly more inclusive, from a gendered perspective than the alternative.

Now, of course, we must also take into consideration what to do with the terminology when it comes to trans* individuals who have chosen to use their biological reproductive organs in order to reproduce. Up until this point, the assumption has been that if you are a man who reproduces, you are a father, and if you are a woman who reproduces, you are a mother. Does this labeling depend on the gender identity of the person involved in the reproduction of these children, or on the biological reproductive process which they are undergoing? If the former is true, then logic states that a trans* man who gives birth to his children, even though he is using what has traditionally been a “woman’s” reproductive organs, will still be considered a father, and a trans* woman who produces children using what has traditionally been a “man’s” reproductive organs will still be considered a mother. However, if the latter is true, then logic states that a trans* man who gives birth will be considered a mother, and a trans* woman who sires children will be considered a father. In Thomas Beatie’s case, in a 2012 interview with Oprah Winfrey, he stated that “I don’t see myself as both a mother and a father—I see myself as a father who gave birth” (“The Pregnant Man’s Life Today”). In this regard, Beatie does not view his ovaries, his uterus, his pregnancies, or the subsequent births of his children as being essentially female and resulting in motherhood; rather, he views them as simply another means of achieving fatherhood. It is interesting to note that he went on to have surgery to create a penis after the births of his children, so there was clearly a desire to have his physical body match his gender identity at some point, but the fact of the matter is that his reproductive organs in and of themselves, while they have been coded “female,” acted purely in a functional reproductive standpoint, as opposed to a functional *and* gendered reproductive standpoint. He went on to say

that “Susan, Austin, and Jensen [his children] call me Daddy, and that is my name. I’m not Thomas anymore, I’m Daddy,” (Winfrey) and towards the end of the interview, he states that “Through all of this I have determined that’s my meaning and purpose in life, is to usher these human beings into this world and make sure I’m always there for them” (Winfrey). What is fascinating about his assessment of his identity as a father is that it is all-consuming, which many would likely point out as being a stereotypically female way of viewing parenthood. In Beatie’s case, he acknowledges that, after becoming a father, he is no longer Thomas, but Daddy—his identity as a father has superseded all else. He takes that one step further in his declaration that the birth of his children is his *raison d’être*, which demonstrates his clear devotion to his children. However, this also plays into an extremely conservative model of family that erases all agency for the parent, in which the person’s children and their relationship to their children replaces the rest of the parent’s identity. In that regard, while it appears that Thomas Beatie’s identity as a trans* man does not necessarily destroy the artificial creation of “mother” and “father” or the changes that come with those labels, it does complicate the two in that it demonstrates clearly that it is not only cisgender individuals who take on the parenting role. Trans* individuals do so, as well, and they are equally capable of being dedicated to their children. Of course, there is another option that we can consider—simply referring to a parent as a parent. The words “mother” and “father” have specifically gendered connotations, and if our ultimate goal is to take the gender out of reproduction, then would it not make the most sense to take the gender out of parenthood, as well? Perhaps this would only make sense if we insisted on attaching the words “mother” and “father” to gender. What if we were to look at the words from a social perspective? As Judith Butler argues, while it is physically necessary for an egg and a sperm to meet in order for another human being to be produced, “are sperm donors or one-

night stands, or indeed, rapists, really fathers in a ‘social’ sense” (10)? In other words, committing the physical act of reproduction does not necessarily make one a parent—it is the physical presence and emotional involvement that makes one a parent, and you do not have to be cisgender in order to be physically present and emotionally involved with your child. If we were to look at the roles of mother and father in this way, it creates a more inclusive definition of the two words. In other words, rather than arguing that a mother is simply a woman who gives birth and that a father is simply a man who sires a child, we could instead argue that a mother is someone who identifies as a woman who takes care of a child and a father is someone who identifies as a man who does the same. We have already established that definition when it comes to adoptive parents (often putting the distinction “adoptive” in front of the word mother or father), so why can we not do the same when it comes to parents who happen to be trans*?

Ultimately, when it comes to trans* individuals reproducing using their biological reproductive organs, society sees that action as a threat to its stability and its carefully crafted sex/gender/reproductive hierarchy. They see this as a threat because trans* fathers who give birth to their own children and trans* mothers who inseminate their partners complicate the supposedly natural order of man = father and woman = mother. The process of reproduction does not just produce more human beings—it also helps reproduce the sex/gender binary. From the moment we are born, from the moment we are placed in that blue or pink blanket (depending on our genitalia), we are socialized into performing gender in a certain way. As Judith Lorber notes in her essay “The Social Construction of Gender,” “[gender inequality] is produced and maintained by identifiable social processes and built into the general social structure and individual identities deliberately and purposefully...The paradox of human nature is that it is *always* a manifestation of cultural meanings, social relationships, and power politics” (101).

Society continually attempts to convince us that the sex/gender binary is the result of a natural impetus of males towards masculinity and of females towards femininity, but we know that this is not the case. If it really were the result of natural forces, then it would not be necessary for “[p]olitical power, control of scarce resources, and, if necessary, violence [to] uphold the gendered social order in the face of resistance and rebellion” (Lorber 101). Trans* reproduction is absolutely an act of rebellion against the sex/gender binary, which dictates not only that men and women occupy different reproductive roles in society, but also that these roles can never change and that men and women can never switch these roles. Lorber notes that

Gender is so pervasive that in our society we assume it is bred into our genes. Most people find it hard to believe that gender is constantly created and re-created out of human interaction, out of social life, and is the texture and order of that social life. Yet gender, like culture, is a human production that depends on everyone constantly ‘doing gender.’ (101)

Society depends on men and women occupying the gender roles that have been assigned to them, and it also depends on everyone accepting its “naturalness” as a given, despite the social sanctions and manipulations that are necessary to continually reproduce this naturalness. Trans* individuals who choose to reproduce using their biological reproductive organs force us to question the authenticity of natural gender roles, as well as the naturalness of the sex/gender binary itself, by proving that one does not necessarily have to be a woman in order to give birth, nor does one necessarily have to be a man in order to father children. The norm of cisgender women giving birth and cisgender men fathering children helps reproduce the norm that women are naturally feminine, passive, and nurturing, while men are naturally masculine and authoritative, and that is the crux of why trans* individuals who choose to keep their biological reproductive organs and have children using those organs are vilified by society—because they

prove that society's beliefs about sex and gender and their relationship to reproduction are wrong.

Conclusion

Throughout this paper, I have explored the existing social and cultural beliefs surrounding biology, gender, and reproduction, and I find that they are rabidly hetero- and cissexist. For everyone, but especially for those of us who have chosen not to reproduce and for those who have chosen to reproduce outside of the hetero- and cissexual norm, our ability and desire (or lack thereof) to reproduce being artificially tied to our gender identity (and vice versa) creates a violent ideology that is inherently sexist and transphobic. Even though society's reproductive mandate, at least on paper, simply dictates that everyone must reproduce, in a more subtle and sinister manner, it also dictates that only certain people with certain bodies, gender identities, and modes of reproduction are normal, and those of us who want to exist outside the norm have to go to excessive measures in order to be considered legitimate. For many trans* individuals, that means giving up an explicitly wanted functional reproductive body in exchange for socially recognized gender authenticity. This is deplorable from a gender equality, reproductive rights, and human rights perspective, and it is for this reason that it is imperative that we re-examine and redefine the relationships between biology, gender, and reproduction.

Considering the number of individuals who identify as trans* and the likelihood that these individuals will reproduce, it seems that the "natural" order of man as father and woman as mother will shortly be coming to an end. However, in order to achieve that goal, we must deconstruct these harmful connections between sex, gender, and reproduction. We must also ask many "who, what, when, where, why, and how" type questions: why do these connections exist?

Whom do these connections benefit, and whom do they harm? What can be done to complicate these connections and interrupt their supposedly natural and normal existence? This paper seeks to attempt to answer some of those questions, although it has far from answered all of them. It is relatively simple to answer the first question and, in answering it, I also answer the second—these connections between sex, gender, and reproduction exist because they benefit those whose bodies conform to society's expectations and because they directly and indirectly harm those whose bodies do not fit into the socially constructed gender binary. The last question, unfortunately, is a little harder to answer. Some would argue that increased visibility of LGBTQ+ pregnancies and families could help in this regard, and it might. However, we need to avoid perpetuating a heteronormative standard of family structure—not all families have two parents, for example. Some families have only one parent, or multiple parents. Instead of promoting only two-parent families in our quest for visibility, we need to show families of all kinds—along with the usual image of a gay or lesbian couple adopting children, we also need to show single trans* men having children through artificial insemination with the intention of being a single parent, poly* families of all sexual orientations and genders raising their children all together, a couple made up of a cisgender man and a trans* woman adopting children, just to name a few. We need to show that there is no single definition of what makes a family, and in turn show that there is no single definition of what makes a parent.

One of the shortcomings of this paper is that it is purely theoretical—unfortunately, I fell out of contact with my friend Natalie, who is a trans* woman and who inspired me to write this paper in the first place, shortly after I began writing. I would have loved to have her perspective on this issue, since she is co-parenting her biological child from a previous relationship (when she was still presenting as male) with her current cisgender female partner and, when I last spoke

to her, was planning to inseminate her partner “the old fashioned way,” as she put it, in order to have another biological child. I would have also liked to get in contact with Thomas Beatie himself and ask him a few questions concerning his thoughts on transgender reproduction, since he continues to be a public figure on the subject. My thoughts and theories on this subject can only do so much, and I hope that someone will be inspired by my work to take it one step further and conduct a sociological study of trans* individuals who have chosen to reproduce using their biological reproductive organs that further explores the connections between biological sex and gender identity and how they relate to reproduction and the choices related to it.

Our society’s reproductive mandate is harmful to everyone in that it forces individuals who may or may not want to reproduce to do so anyway. However, there is a specific harm done to those whose bodies, genders, and reproductive choices do not fit into the binary that society insists is normal and natural. The reproductive mandate clearly focuses on heterosexual couples made up of one cisgender, conventionally masculine man and one cisgender, conventionally feminine woman, and society depends on the repetition of this reproductive pairing in order to prove to society’s members (and possibly even itself) that this is the natural order of things. Any reproductive act that occurs outside of this is deemed abnormal and suspect because it interrupts and complicates the message that society is attempting to convey and gives real-life examples proving that the natural order of things is kept in place through very unnatural means—social sanctions, censure, and violence. Trans* individuals who choose to reproduce using the reproductive organs with which they were born summarily destroy the belief that only women can give birth and only men can father children, thereby destroying the image of the natural order of gender in relationship to biology and reproduction. Forcing trans* individuals to give up a wanted functional reproductive body in exchange for gender authenticity is punishment for

daring to question the perceived sex/gender binary in relationship to reproduction and a feeble attempt to preserve the naturalness of said binary. If we were to start viewing reproductive organs from a purely functional perspective instead of as proof of gender authenticity, it would be much more inclusive from both a gender and reproductive standpoint. It is entirely possible that it would also help erode the sex/gender binary and expand the relationship between sex/gender and the reproductive process, thereby opening up our society to different reproductive possibilities.

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