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Making of Trans Body: A Study of Trans Narratives

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Abstract

This paper focuses on male to female transsexuals (Trans women) and makes an attempt to interrogate the process of 'making of trans body'. What does it mean for transsexuals- 'making of a body'? Is it their resistance to the gender binary or the force to confirm to the gender roles? Or is it the desires that make them construct their bodies? And what are the ways through which they achieve the sense of 'complete body' are some of the seminal issues raised in the paper. Transsexuals believe that surgery is a dominant tool to alter and construct their bodies. But the paper argues that surgery can never be a tool in making of a 'complete' Trans body. The paper also examines how and what role does the surgery play in bringing the 'completeness' to the Trans bodies. This paper is limited to the discussion and problematization of the issue of castration and surgery. The study is done in Indian context and uses Trans theory and surgery as a theoretical framework. This proposed paper contributes to the existing body of knowledge by revealing the fact that more than their resistance to the gender binaries and their desire it is the force of the society that makes them to confirm to the gender roles. That is the reason why these gender deviant persons try to fit into the boxes of heteronormativity and mimic the gender binaries. The paper, at the end uncovers the fact that surgery is an 'incomplete' tool to bring 'completeness' to their minds and bodies.

Keywords- *Transgender, Transsexual, Trans woman, Trans person, Trans body, Surgery*

This paper problematizes the issues surrounding to the 'Trans body'. Most of the transsexuals believe that sex reassignment surgery helps them to construct their identities. But they achieve their 'desired gender identities' only through the 'construction of their bodies' as well as through the 'construction of their identities'. Is it the 'desire' or the 'surgery' that

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plays seminal role in making of Trans body is the major question the paper tries to address. Does this surgery succeed or fail in an attempt to make the transsexuals feel 'complete' is another question the paper raises. The paper argues that the surgery can never be a tool in making of the 'complete' Trans body. Since the transsexuals think that surgical process helps them to construct the bodies they wanted, it is important to examine how and what role does the surgery play in bringing 'completeness' to their bodies.

As it is penned in the title, the term 'Trans body' is referred as the 'transsexual body' and the 'Trans person' as the transgender and transsexual throughout the paper. Transgender refers to a person who does not conform to his/her gender roles assigned at birth. It consists of wide range of sub gender identities, such as transgender woman, transgender man, transsexual, female to male transsexual, male to female transsexual, *Jogti* or *Jogappa*¹ and *Koti*² etc. Transsexuals themselves claim different identities to get acquainted with their own community people. But categorizing, labeling or defining someone looks queer than the way a transgender and transsexual conduct him/herself in the appearance, behavior, performance and in the matter of identity. Hence, rather focusing on the terminology and identity crisis this paper interrogates the issues related to the castration or/and surgery. Concentrating only on male to female transsexuals (Trans women) who desire to undergo castration and/ or surgery would be the limitation of this paper.

The body transition through the removal of sexual organs of transgender by inexperienced nurse or elderly transgender was known as castration or nirvana. Though an outdated phenomenon, castration is practiced in Indian transgender community till today. Since most of the gender non confirming individuals desire to undergo surgery to match their comfort gender identity it has gained wide range of attention in the contemporary transgender studies. Dorchen Richter's case was the first in the history of United States which documented that he was a male assigned at birth but his intense desire to become a woman made him to be castrated in 1922 following the reconstruction of vagina in 1931 (Meyerowitz, 19). However, a case of Lily Albey, a male to female transsexual who underwent series of surgeries became more popular in 1920 in the history of United States.

Male born transsexuals feel uncomfortable with their bodies and express their desire to get rid of their male genital organs. Hence they undergo surgery but it is just an option for many of them. Sex reassignment surgery is a process of series of procedures in which many surgical techniques such as *breast surgery*,³ *facial feminization*⁴, *genital surgery*⁵ and voice surgery etc are used to alter the transsexuals' bodies. It has many alternative terms namely, transgender surgery, gender reassignment surgery, genital reconstruction surgery, sex affirmation surgery, gender confirmation surgery or sex change operation.

Transgender who undergoes this surgery are categorized as transsexuals. Transsexuals have again been categorized as male to female and female to male transsexuals. This

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categorization (Male to Female and Female to Male) within the category (Transsexual) is done based on what they desire the most in the process of surgery. For instance, if a male to female transsexual desires to take up only breast implant therapy she will be called as 'she male.' If one likes to undergo castration and surgery she is called as Trans woman. Thus, Surgery, which constructs their bodies, becomes a tool to an act of identity construction and formation as well to an act of identity actualization for most of the male to female transsexuals.

For the purpose of this study sixteen interviews have been conducted to male to female transsexuals. But as the representation only four (Monisha, Raji, Chandini and Devi) transsexuals' names have been mentioned to reveal the ways transsexuals understand castration and surgery. Since the area of transgender falls under interdisciplinary studies the study uses Trans theory and surgery as the theoretical framework. The paper is divided in two sections. The first section discusses the case studies of transsexuals, Monisha and Raaji who think that castration or/and surgery is the essence of their life. Both of them believe that they are women and they lived like women throughout their lives. The first section interrogates how they perceive castration/surgery individually and how it is continued in their community as a mandatory norm/ ritual. The last section discusses the case studies of Chandini and Devi who have undergone only breast implant therapy. They claim their dominant identities as *hijras*⁶. Through the different identities they claim and the lifestyle they embrace it is revealed that surgery can bring bodily changes and solace to their feelings but it cannot act as a tool for the 'completeness' of their body. Most of the transgender feel that they are women trapped in the male bodies. But what makes them to undergo this surgery is also an important point to be discussed. Some transgender do not desire to undergo complete body transition. So they choose only few phases/stages of surgery to make body transition. Hence these transsexual narratives reveal the fact that surgery makes them feel 'complete' psychologically but it cannot bring the 'completeness' to their body.

Most of the transsexuals think that they are women inside. So they choose castration to 'become women.' Castration is an outdated and incomplete act of body transition. But till today many transsexuals go for it. It might be for the lack of knowledge about modern developments in surgery or may be for the lack of money for surgery that costs lacks together for its various lengthy procedures. Many transsexuals, as they themselves say, undergo both castration and surgery to become 'complete women.' These acts and phrases like 'becoming women' or 'becoming complete women' indicate the fact that embracing womanhood is not an act of 'being' but 'becoming', a choice and an act of construction. Transsexuals think that surgery is an aesthetic component and a tool to reject and to get rid of their male body and male identity. It is clearly shown in the words of Monisha who says after undergoing the castration, "I felt that finally I became real woman and I am free from male body." (Monisha,

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interview, 2017). Though they consider the castration or surgery as a journey of pain they embrace it to feel the complete womanhood.

For them feelings and pain is one and the same in their post castration/surgery life. Their confusing desires, society's hatred towards them and the condition of in between-ness remains same till the end of their life. For instance, the life narratives of Monisha and Raaji reveal vivid and bitter descriptions of their childhood which demonstrates the typical and different life patterns of the girls and boys. What makes them to feel confused and complicated is not what they are (born male) and how they feel (feminine) but the institutionalized gender constructed notions of society and culture that set the unquestioned gender norms, mannerisms and behavior. When they fail to meet the expected gender roles they feel humiliated by being asked, "Aren't you a boy? Why do you walk like a girl? Why do you wear girls' cloths? Behave like girl." (Monisha, interview, 2017). Monisha who is born male has been attacked by such questions. But she, as a boy Ramesh managed to be in the closet by creating the private space in public. People's constant gaze made the boy, Ramesh to be aware of his girlish behavior and that makes him to realize that he is different from others. These institutionalized expectations impose the gender roles and force to stick to the gender binaries. This might be the reason which paves the ways for them to construct themselves as female/woman. For such mindsets Ramesh, responds to the society, "I feel it natural to do so. I don't know how to be like boy. I cannot stop drinking water if you say so. It is as natural as drinking water for me" (Monisha, interview, 2017). Chandini and Devi's cases are not different than these bitter experiences. These feminine feelings of childhood remain same till the end of their lives. But in the later childhood they feel and make their bodies to be fit into the box of hetero normativity by imitating the female gender roles. This is what Monisha says how castration would help her, "to become a woman what I should do is to get rid of male organs. Then only I will become a real woman." (Monisha, interview, 2017). These kinds of beliefs depict how castration/ surgery have been construed and presented in transgender communities. Many gender and Trans theorists have spoken about gender binaries positioning the deviant sexual category people as third gender. But why do these third gender persons reinforce the gender binaries, construct their bodies and imitate femininity is a seminal question needs to be addressed and discussed. Do they align their minds with their bodies after the transition or still their minds remain in the trapped bodies? Important point to be noticed here is we are witnessing these kinds of developments and terminology only in contemporary India.

While having conversation with some of the transsexuals they told that the intensity of their feelings and desires to become women make them to undergo body transition. Though they do not confirm to the assigned genders their mindsets have not been moved out of the patriarchal gender forces. Hence, according to the intensity level that differs from

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person to person they decide to bring changes in the body. The evidence supporting this fact lies in the findings of Harry Benjamin. He categorizes transsexual persons on the basis of three levels of intensity: 'Transsexual (nonsurgical),' 'Transsexual (moderate intensity)' and 'Transsexual (high intensity) (16).' There are many transsexuals who fit into such categories of varied levels of intensity. The first level of intensity according to Benjamin refers to a nonsurgical transsexual. Does he mean that it refers to those who do not undergo the surgery? But Transsexual is the one who seeks gender and sex transition through hormonal therapy or sex reassignment surgery. Or does he mean that they undergo hormonal therapies only? What does he mean by a non-surgical transsexual? His category of transsexuals, specially, 'Transsexual (non surgical)', based on intensity level is unclear and problematizes the identity of a transsexual person. Hence this category lacks the terminology for those types of transsexuals.

Further, he suggests that the second level of transsexuals who have moderate intensity may benefit from estrogen medication as a "substitute for or preliminary to operation." (19). Chandini, for instance, fits into such category because she rejects to undergo surgery but chooses to go for breast implant therapy. Undergoing surgery is a choice for some of them as it is not mandatory in some of the *gharanas*⁷. Even then, some transsexuals believe strongly that castration or sex reassignment surgery will only make them complete transsexuals. So, third level of intensity suggested by Benjamin refers to the transsexuals who have high intensity to undergo the sex reassignment surgery seeking transition. It is appropriate to mention Monisha and Raaji in this context. Because they say after their castration, "now we became a real women and the essence of our life is achieved." (Monisha and Raaji, interview, 2017). This is what Trans surgery does mean to the transsexuals who undergo it.

The intensity level might be the reason for some of them to take up only breast implant therapies or sex change operation. But can one define the 'completeness of trans body?' and a 'true/ real transsexual' in terms of constructing/ making their bodies? Benjamin looks contradictory in defining a 'true transsexual.' Speaking in terms of a male to female transsexual he states, "True transsexuals feel that they belong to the other sex, they want to be and function as members of the opposite sex, not only to appear as such. For them, their sex organs, the primary (testes) as well as the secondary (penis and others) are disgusting deformities that must be changed by the surgeon's knife." (11).

This definition of 'true transsexual' suits to the exact feelings of Monisha who intensely feel to undergo sex reassignment surgery (even after the castration) believing that it can only make her 'true transsexual.' She lives like a typical woman throughout her life after undergoing both castration and surgery. But some other male to female transsexuals like Raaji and Sana who have undergone castration do not meet the above definition of 'true transsexual'. Some other transsexuals like Chandini do not desire surgery but they meet some

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elements of Benjamin's definition of a 'true transsexual.' At this context it is important to ask how can Benjamin define 'true transsexuals' in case of those who have not undergone complete surgery and in case of female to male transsexuals (Trans men) to whom the term 'true transsexual' does not apply at all? Hence, his work which focuses on male to female transsexuals remains beyond the concept of female to male transsexuals for whom surgery is not a practical matter.

It is worthy to mention here the other queer theorist, Colette Chiland who contradicts the concept of 'transsexualism.' In his book, *Transsexualism: Illusion and Reality* he refers a French psychiatrist and professor of Forensic Medicine, Jacques Breton's definition of transsexualism, "two contradictory ones are advanced: The classical definition: a male transsexual is a man with the mind of a woman. The modernistic definition: a male transsexual is a woman with the body of a man." (16).

This statement supports the traditional notion that every male to female transsexual is a woman. But both the definitions do not define a transsexual. Hence they look contradictory and fail in defining a 'male transsexual' by showing the absence of surgery/ castration. The definitions also show the pre conceived notion about a male transsexual by making him to fit into the box of a 'woman' which looks like an illusion. Because surgery intervenes the male transsexual body by altering it with complete transition. Hence, since a male transsexual changes his complete body from male to female he cannot be a woman 'with the body of a man' as Benjamin states. At the same time, the reality is, all the male to female transsexuals do not undergo the surgery but take up hormonal therapies to make slight body alterations by embracing the new identities. Some of them call themselves 'she males' and others call themselves 'hijras'. Hence, though they have the mind of women they cannot be called as men and at the same time they cannot be called as women too. Transsexuals Chandini and Devi are the best instances in this case who have undergone just breast implant therapy but not the 'bottom surgery'. They say they think themselves as women but they are not.

Thus, the life experiences of these transsexuals reveal the fact that for every transsexual the two phases of life seem very significant: The life before transition and the life after trans (ition) formation. But where do they stand the most at the end? Do they stuck in between or remain as a bit of two? These are highly difficult questions to be answered by the interviewed transsexuals. Even though the consciousness of fe/maleness and wo/manhood is deep seated in the minds of all the transsexuals some transsexuals like Monisha who has undergone castration become women and live like women. Whereas the other transsexual like Chandini who has taken hormonal therapy says that she stays as the beloved son for her parents at home but identifies herself as a hijra for the outer world. This fact has even been revealed in claiming the authorship in some of the male to female trans autobiographies. For instance, a transsexual, A. Revati rejects her male name (Doreswamy) and uses her female

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name (Revati) in her autobiography, *Truth about Me: A Hijra Life Story* (2010). But Laxmi in her autobiography, *Me Hijra, Me Laxmi* (2015) uses both her male (Narayan) and female names (Laxmi) while claiming the authorship. She even writes her surname, Thripati. These instances show different ideas and notions they have about their bodies and genders. In this context I quote her to depict her understanding and notion about the castration and/or surgery. She says, “Though the world believes that a castrated hijra alone is a ‘real hijra’, we don’t endorse this.” (Laxmi Narayan Thripati, 156). She says further, “many of us have had breast implants. The surgery is expensive, but without it, our transformation is incomplete. However, unlike many other hijras I haven’t gone for hormonal therapy in my desire to look feminine.” (Laxmi Narayan Thripati, 157). Broad devalues this idea of surgery or transition stating that, “Gender categories were destabilized not only through assertions of not fitting either gender, but also through claims to actually being a bit of both. It is the notion of transgender meaning both man and woman that drives many in the community to hold up intersexuality as perhaps the best way to transgender existence. The idea is that by being transgender one really embodies an intersexual identity of being both man and woman.” (256-257). Thus, these supporting statements uncover the fact that womanhood, femaleness and transsexuality is a construction that lacks proper terminology not only in India even in the west. Whatsoever role does the castration and/or surgery may play, they fail in the attempts to bring completeness to the Trans bodies. The most important fact narratives reveal is that, male to female transsexuals cannot be complete women (as they claim themselves) but a bit of both a man and a woman.

To conclude, as it is mentioned earlier transsexual is also one who cares less about the surgical intervention. Hence, ‘trans’ would be more inclusive term than the transgender or transsexual. This view is quite supportive to the below mentioned statements in which Susan Stryker argues that in trans theory there is an inherent recognition that the trans position is problematic. The labels “man” and “woman” are inadequate to describe the Trans experience, as the transgender and transsexuals’ history and knowledge of the world is so different from that of “men born men” or “women born women. Yet the responsibility to recognize and articulate that position is no one else’s but the self’s.” (XIV). This argument takes the support of an idea of Katrina Roen who states that “both/ neither” and “either/or” (505) are politically conceptualized positions which stand against each other, one completely rejecting the gender binaries and the latter trying to fit into it. It is true that transgender and their communities play seminal role in shaping up how the trans surgery is practiced and intervened in making of Trans body. But the findings of the paper reveal that surgery as a tool helped as well as limited the Trans persons and scholars in understanding Trans identities and bodies. Though all male to female transsexuals identify themselves as women and hijras, their identities seem beyond the frames of castration, surgery and medical therapies they took up in shaping/

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making up/ constructing their bodies. Since this paper is limited only to the present issues of Indian transgender surgery it can be extended to further research raising several questions like, where is the future of trans surgery headed? How will doctors and patients shape this trajectory? How their differing conceptualizations of surgical goal, limits and possibilities shape the surgical future?

Endnotes

1. The term Jogti refers to a biological female who dedicates herself to serve the Goddess Yellamma (North Karnataka, India) as the tradition of her family. She is also called as Devadasi. But it also refers to a male who dedicates himself in the service of same goddess as a part of his family tradition. The difference between both of them is a male servant who lives like a woman identifies himself with the transgender and their community. But he is not an integral part of the tradition of hijra community. Jogappa and Jogya are other names for male to female transgender Jogti.
2. The term is commonly used in India, refers to an effeminate man who prefers feminine gender roles in same sex relationships. Some of them are bi-sexual too. They do not undergo any surgeries to construct their identities.
3. Inserting implants to make breast larger (breast augmentation).
4. Surgical changes to the nose, forehead, chin, jaws, cheeks, ears or eyes.
5. Removing the testis and penis and constructing the vagina, labia and clitoris.
6. A person who does not confirm to his/her gender roles is called as a hijra. It is a cultural term used derogatively for transgender in few countries of South Asia such as India, Pakistan, Nepal and Bangladesh.
7. A community of transgender is called gharana in many parts of India. Each community has different rules, regulations and rituals. All the gharanas have their own structure and relationships within the communities such as nayak, guru, chela, nathi etc. All the transgender are recognized by different gharanas.

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