



# **“DISCOURSES OF TRANS SURGERY”: TRANSFEMINISTS, TERFS, AND MEDICAL TRANSNORMATIVITY IN SECOND WAVE AMERICAN FEMINISM**

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## **ABSTRACT**

This article explores how transfeminists and TERFs (Trans-Exclusionary Radical Feminists) understood the relationship between trans identity and trans medical procedures in the US Second Wave feminist movement of the 1970s. Building off of recent historical research on transfeminist’s involvement in the Second Wave, as well as the theoretical development of “transnormativity,” this article expands the conversation to explore how trans and anti-trans actors contributed to the creation of a transnormativity in which sex reassignment surgeries were central to trans identity itself. This is explored through a historical discourse analysis and close reading of various articles from 1970s feminist publications along with an analysis of Janice Raymond’s *The Transsexual Empire*. Through this I argue that both trans activists and TERFs of the Second Wave espoused a limiting view of trans identity and experience in which the binary trans subject is center around, and created by, medical procedures. This paper thus attempts to historicize and criticize medical transnormative formulations of transness.

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## **Keywords**

Transnormativity, transfeminism, TERF (Trans Exclusionary Radical Feminism), Second Wave feminism, transgender history.

## SUMMARY

Introduction / The Transfeminist 1970s and SRS/ TERFs, Cis Lesbian feminism and SRS / Janice Raymond and The Transsexual Empire / Conclusions / Bibliography

## INTRODUCTION

In 1979, Janice Raymond published her trans-exclusionary radical feminist (TERF) classic *The Transsexual Empire* (Raymond, 1979). The book's cover described the work as "a fascinating look at transsexual operations and the 'cures' they promise" (Raymond, 1979). The book itself was just that: a criticism of trans identity on the basis of surgery. Raymond understood transness as centered around Sex Reassignment Surgery (SRS) and medical intervention, or in other words, they relied on a medicalized view of transnormativity. Raymond's text was a cumulation of the 1970s trans debate within Second Wave feminism and in particular the lesbian feminist movement, which involved both TERFs and transfeminists.

In the last few decades there has been a growing body of revisionist scholarship on Second Wave Feminism, which has challenged the idea that it was solely a white, cis, middle class movement, and has worked to highlight the diversity in the movement (Cousens, 2023: 10). Coming out of this scholarship, there has been a growing corpus of work on trans-feminism in the 1970s (Enke, 2018). While once ignored by scholars, the role of trans people in the Second Wave is now more widely acknowledged. Separately from this, scholars and theorists in trans studies have recently published works dealing with transnormativity (the normative way of being trans), medicalization of transness, and critical works on SRS (Aizura, 2018; Vipond, 2015; Carvajal, 2018). In this paper, I wish to bridge these recent tendencies in the scholarship to ask how SRS was understood and discussed within Second Wave feminist discourse in the US context? I argue that SRS itself became a discursive object in 1970s feminist politics, in which surgery and medical transnormativity were the main ways in which trans rights and identity was understood by both transfeminists and TERFs. By medical transnormativity, I refer to an understanding of transness which is centered around medicalization, both as a source of transness (as a pathology in the form of gender dysphoria) and SRS/HRT (Hormone Replacement Therapy) as the primary way to fix this pathology. Feminist periodicals of the 1970s were laced with articles discussing trans identity with a focus on SRS, and it was this focus which was often the site of divisions between transfeminists and TERFs, despite both groups using a medical transnormative perspective.

Medicalization of gender non-conformity in the Western world began long before the 1970s. The first advocacy of trans rights and modern trans identity came out of the field of sexology in Weimer Germany (Sutton, 2012).

Transsexuality, transgender, transvestitism, or more creative terms all came from this movement of doctors and trans people who were positioned in a scientific and medicalized environment (Mancini, 2010). The first sex reassignment surgeries came out of Weimer Germany as well, and soon were attempted and refined by a global network of sexologists and surgeons. Later in the 1950s and 1960s, the highly influential work of John Money and Harry Benjamin in the US ushered in a new era of both trans visibility to the general public but also of SRS (Meyorowitz, 2002). In the 1960s, many so-called "gender clinics" opened in the US and globally, allowing for trans people to have access to HRT and SRS, but also reinforced the notion that transness was an issue mainly under the preview of the clinic (Fritz and Mulkey, 2021). The 1960s counterculture, New Left and rise of feminism and the gay liberation movement all fueled a new movement of trans activism and identity discourse (Stryker, 2008). The most vocal form of this activism came after the 1969 Stonewall uprising and continued into the 1970s, with trans activists forming trans liberation groups such as the famous Street Transvestite Action Revolutionaries (STAR) (Stryker, 2008: 86). This paper will focus on the period mostly associated with the Second Wave of feminism, the 1970s, while recognizing the problems of the wave metaphor (Hewitt, 2012).

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While transnormativity is a relatively newly coined term, similar critical ideas about how trans identity has been constructed around medicalization are not. Sandy Stone's highly influential *The Empire Strikes Back: A Posttranssexual Manifesto* criticized the focus among many trans women on passing and binarism (Stone, 1992). The astute reader of this paper will notice a similarity in my analysis to that in Stone's work. I have attempted to expand beyond Stone's already impactful analysis, by fleshing out the historical particularities of the transnormative discourse in the 1970s feminist movement in a more complete manor than in Stone's text.

I will begin my analysis by highlighting the work of transfeminist theorists from the 1970s, and how their work discussed SRS. While still promoting trans rights, many of these transfeminists still relied on medical transnormativity as the primary way they understood transness. I will then discuss how the discourse of SRS and medical transnormativity influenced the works of cis feminists (including TERFs) in feminist journals. Finally, I will explore the ways in which Janice Raymond's transphobic works relied heavily on the medical transnormativity paradigm.

## THE TRANSFEMINIST 1970S AND SRS

As recent scholars have shown, transfeminism in the 1970s was much more prevalent than often acknowledged (Enke, 2018: 9-29). Transfeminists, inspired by both the growth of Second Wave feminism and the gay liberation

movement, wrote extensively in feminist, lesbian, and gay periodicals to theorize and discuss their epistemological, phenomenological, and political perspectives. A central point of trans phenomenology which these transfeminists discussed was their relationship to SRS, often for a non-trans audience or audience which was unfamiliar with the procedures.

A particularly early example of transfeminist discussion of SRS in a feminist journal was published in the 1971 edition of *Everywoman* (Douglas, 1971). The article titled "Letter from a Transsexual," was written by Angela Keyes Douglas (also went by Angela Lynn Douglas). Douglas was a well-known trans activist in the early 1970s and was a founder of the Transsexual Action Organization (Peña, 2010: 760). While at the time of this article she was a prominent leftist trans organizer, her legacy was later complicated by her shift towards the far right by the end of the 1970s, eventually becoming involved in neo-Nazism (Peña, 2010: 760). In the article, Douglas described her understanding of trans subjectivity for a presumably cis feminist audience. Douglas's trans phenomenology was defined by both dysphoria and euphoria. This was especially unique from many descriptions of transness of this era, which defined transness only in terms of dysphoria. She stated that "my joys may seem strange to you," addressing the cis feminist audience of the journal, and then went on to describe the euphoria of transitioning (Douglas, 1971: 13-14). She then described the "joy" of hearing about SRS operations which took place in the Soviet Union during the late 1960s. Douglas was at this point organizing in the New Left, which included both groups supportive of trans and gay issues, but also a heavy hypermasculine element especially from American Marxist-Leninist and anti-revisionist groups (Kissack, 1995). Douglas described how by showing evidence that the Soviet Union was engaged in SRS, it was a major rebuke of leftists in the US who "charged transsexuals with being products of bourgeois decadence" (Douglas, 1971: 13-14). She claimed, in her classic self-aggrandizing description that she was later known for, that she was the first person outside of the Soviet Block to learn that the Soviet Union had funded research into SRS. Douglas's notion of trans phenomenology in the text was more revolutionary than most, she stated "part of the reason transsexuals are oppressed is because we are the makers of new gods," describing in an almost post-humanist fashion the idea that the trans movement would usher in a new era where we are not restrained by the barriers of our bodies (Douglas, 1971: 13-14). Douglas also made references to "Apollo America" which she described as "a nation that worships Apollo" (Douglas, 1971: 13-14), presumably describing the Nietzschean understanding of the Apollonian element, representing masculine reason and order (Nietzsche, 1910). She stated that transness was in opposition to this "Apollo America." She claimed that the revolutionary element of transness and (thus transphobia's *raison d'être*) was that the transwoman did not worship "the Phallus and Manhood" (Douglas, 1971: 13-14). Douglas was unlike many transfeminists who appeared later, in that while SRS and HRT were still extremely prominent in their writing, she also described the trans experiences with more depth and nuance than just surgeries and dysphoria. Additionally, she seems to have understood SRS and HRT in a post-humanist way rather than an essential aspect of trans existence. For Douglas, SRS and HRT were tools to alter and go beyond the bodily morphology in which we are born, rather than the primary life event in the trans life-course.

Another early case of transfeminist discussion of SRS was in a 1973 issue of the New York lesbian feminist journal *Echo of Sappho* (Curie, 1973: 15-17). This issue contained a selection of

transfeminists discussing SRS from both a trans masculine and feminine perspective. This included the piece "Why" by Mike Curie, a trans-masculine feminist who discussed the reasons why he underwent SRS procedures. "I am a male psychologically, trapped inside a female body" he wrote, echoing the common Cartesian dualistic understanding of transness introduced by Harry Benjamin (Curie 1973: 15-17; Meyorowitz, 2002: 113). Curie described his experience with dysphoria, and stated how he felt dysphoric about their breasts. Curie continued that another reason for having the surgeries along with the high level of dysphoria he felt was to advance their social standing. "I am changing my sex for many reasons. My status will be higher than females in regard to scholarship, employment, and higher salary" (Curie, 1973: 15). He then described his experiences and that of his friends of gender discrimination in employment and educational opportunities. Curie was well aware that with surgeries that made it easier for him to pass, society would give him privileges he would otherwise not have (Curie, 1973: 15). In the rest of the article he went on to explain in detail the operations he had had, including a mastectomy, hysterectomy, and hormone replacement therapy (Curie, 1973: 16-17). Another article in this issue was titled "Female Transsexual Seeking Sex Change" which described the experiences of another trans man ("Female Transsexual," 1973: 17). He claimed that he was working on Wall Street while passing as a man, but noted that he was frequently afraid of being outed as he felt he did not pass as much as he would have liked. This was why he wanted hormones and SRS ("Female Transsexual," 1973: 17).

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At the end of the section on SRS in this issue, two interviews were published; one with Harry Benjamin and another with Virginia, who was an employee of Benjamin, on the nature of SRS in relation to lesbianism (Virginia, 1973: 17-18). Harry Benjamin was the first doctor to popularize SRS in the US. He was incredibly influential, and described as the "father of transsexual operations" by the journal ("Interview," 1973: 18-19). His book *The Transsexual Phenomena* from 1966 was the classic medical text in the field for years. Benjamin, who was not trans, included many stereotypes and problematic elements in his work on trans identity, including the view of "being born in the wrong body" (Stone, 1992: 161-162). Benjamin's views are not especially of interest to this paper though, as he was not feminist, nor trans. However, what is of interest is that he was interviewed for a lesbian feminist journal to discuss SRS and trans identity which for him cannot be separated. Virginia, the aforementioned Benjamin's employee, described the relationship between trans men, described as "female transsexuals", and lesbians as one of hostility, but on the side of lesbians. "Lesbians worry that they are despised by female Transsexuals when actually it is the other way around. We find Lesbians despising Transsexuals" (Virginia, 1973: 18). They then went on to describe the central importance of the clinic. The clinic for them was the only safe way to medically transition, and they opposed what would now be called "DIY transitions" as they claimed they were dangerous (Virginia, 1973: 18). Even today the phenomena of DIY transitions, referring to usually to HRT and not surgery, typically by obtaining estrogen or testosterone without supervision of a doctor, is highly controversial in the trans community as it can be risky if done improperly, and certainly some of this fear is legitimate (Gill-Peterson, 2022). However for this analysis what is more interesting is that this anxiety reinforced the importance of the clinic as an institution. The gender clinic, as a particular way of organizing, providing, and restricting access to HRT and SRS, was a particular manifestation of medical transnormativity. For

not only was medical transitioning a certain part of transness in this framework but also doing it within the clinic was the only right way.

In the interview with Benjamin himself, he discussed the impact of his book which was at that point 20 years old ("Interview," 1973: 18-19). He then discussed his opinions on the relationship between transness and lesbianism:

the difference between the lesbian and the transsexual is, the lesbian accepts her anatomical sex, the transsexual does not. She [the transsexual] want to be a man, as much as medicine can give to her and [sic] to take care of the female ("Interview," 1973: 18-19).

Benjamin used a biological essentialist view of sex, in which transness is opposing your body, for which there is no difference between the body and the semiotic meaning-making of gender ideology.

Transfeminists often discussed surgery in these periodicals in ways that did not necessarily criticize the medical paradigm or the specifics of the surgeries. However, there were some. One of the few articles which provided a transfeminist critique on the way SRS was done was published in the *Gay Community News* in 1976. Titled the "Sexual Politics of Transsexual Surgery," it was written by a lesbian transfeminist by the name of Amalthea (Amalthea, 1976: 8-9). Amalthea criticized how many surgeons who performed SRS had a minimal understanding of female sexuality. Specifically they criticized that the medical community of mostly cis-men see the vagina as the center of sexual pleasure (Amalthea, 1976: 8-9). They stated that for many doctors the clitoris was a minor part of the surgery, to the point one was either not constructed or created to be purely aesthetic and not for sexual pleasure (Amalthea, 1976: 8-9). Amalthea's criticism of the heteronormative and androcentric way in which SRS was done was fairly unique in the print record but still shows how some transfeminists who criticized and engaged with the intricacies of SRS.

Another case of transfeminist theorization from the 1970s which did not challenge the medical paradigms despite being innovative was Margo Schulter's "Beyond two-Genderism: Notes of a Radical Transsexual" (Schulter, 1973: 40-41). Published in a 1973 issue of *Second Wave*, the text was an early attempt at theorizing the concept of cisnormativity (Cousens, 2023: 50). The text was critical of essentialism yet still centered around surgery as a gatekeeping mechanism for trans participation in the lesbian feminist movement (Schulter, 1973: 40-41). Emily Cousens, a historian of trans philosophy, has analyzed Margo's text as a case of trans epistemological philosophy in their recent monograph *Trans Feminist Epistemologist in the US Second Wave* (Cousens, 2023: 48-61). Cousens criticizes Margo's medical transnormativity, noting that it ignores the enormous costs of SRS, and by focusing on the gendered corporal element "reproduces a highly problematic, phallocentric association of the penis as the source and symbol of male power" (Cousens, 2023: 55). Indeed, phallocentrism was a central facet of medical transnormativity for both transfeminists and TERFs. For transwomen, the phallus was seen as central marker of masculinity, in opposition to their "feminine essence." For trans men, it was a symbol of the "normalized" cis masculinity that even with SRS was hard to achieve.

Margo later wrote pieces on the relationship between lesbianism and transfeminism, in which she expanded on her earlier, more medical transnormative views. In *Gay Community News*,

Margo wrote two pieces in 1975 on the "transsexual / lesbian misunderstanding." She began the first piece by firmly explaining her identity as both transsexual and lesbian (Schulter, 1975a: 6-7). She then went on to list and criticize examples of publicized trans woman espousing sexist and conservative views. For Margo, this seemed to explain some of the anger lesbian feminists had towards trans women. Margo then expanded on this to emphasize that while certainly there were anti-feminist trans women, there was also a case for transfeminism which cis lesbians should not ignore. They continued to criticize the idea that transfeminists were just men trying to divide the lesbian feminist movement (Schulter, 1975a: 6-7).

However, it is not until the second piece that Margo expanded on trans identity and its relation to SRS (Schulter, 1975b: 8-9). Margo claimed that an essential element of trans subjectivity was a sense of very early dysphoria in childhood. Margo's emphasis on the early onset of dysphoria was framed as a justification for rights, playing into the same political rhetoric which described sexuality as essential and fixed. This framing of essentialism as the pathway to gain rights in western society has been criticized by queer theory (Rahman, 1998: 80-89). Margo thus provided a somewhat distorted description of transness, as there are plenty of trans people who don't necessarily feel trans in childhood, in order to argue for more rights. Although problematic from a queer theory lens, it was slightly different from the typical medical transnormative view that places surgery at the center of trans experience, but also kept with the idea that gender dysphoria is the central element of trans experience.

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Interestingly, Margo seemed to reject her earlier proposals that argued that trans involvement in lesbian feminism should be gatekept on the basis of surgery (Schulter, 1975b: 8-9). Instead in this piece they argued explicitly against this, criticizing the "current of thought which holds that male-to-female transsexual may be acceptable *after* genital surgery but not before" (Schulter, 1975b: 8-9). Instead they argued that socially transitioning was the most important aspect which actually makes "a man into a woman" (Schulter, 1975b: 8-9). She also described the many issues that trans people face to get access to SRS or HRT, including it being extremely expensive and time consuming. Margo then criticized the way in which SRS was done by men, who as other transfeminist had criticized, had a distorted understanding of female sexuality. Additionally, they argued that since male doctors who did SRS assumed heterosexuality, the focus was not on creating a functioning clitoris but rather primarily focused on creating a "functional" vagina (Schulter, 1975b: 8-9). The phallogentric notion of the sexually "functional" vagina for the inserting of a penis was not necessarily the main thing a lesbian transwoman would be concerned about. Margo then argued for a more expansive understanding of lesbianism beyond "genital sexuality." They do not define exactly what "genital sexuality" was for them, but it can be assumed that they are referring to cis female genitalia as the primary lesbian sexual focus. This reiterates the idea that until the trans lesbian had genital surgery they could not engage in lesbian "genital sexuality" (Schulter, 1975b: 8-9). While close to developing a proposal of trans lesbianism which moved beyond gender essentialist views of genitalia and the idea that a penis was inherently a masculine phallus, she fell short of this by resorting to a level of medical transnormativity in which trans women cannot fully be lesbians until they had SRS.

Some of the earliest feminist periodicals to discuss the issue of trans inclusion and surgery came out of the early 1970s lesbian feminist movement. An early tension point between trans-feminists and cis-lesbian feminists was in 1972, when the Daughters of Bilitis San Francisco chapter voted to restrict membership to cis-lesbians, after a contentious debate in the chapter over a single trans-lesbian member (Cordova, 1972: 21). This debate was discussed further in lesbian feminist periodicals, such as the 1972 edition of *The Lesbian Tide*. *Lesbian Tide* interviewed members of the chapter to discuss the issue and the interviewees revealed much about their ideas regarding trans women and surgery ("Collective Editorial," 1972: 21). One member stated that trans women were "only synthetic women", and that "even after surgery it would be hard to accept these people as lesbian woman" ("Collective Editorial," 1972: 21). For them, SRS did not change trans women's status as the surgery was a "synthetic" phenomenon incompatible with their gender essentialism. Another member of the chapter who supported trans-inclusion, described their reason as "a transsexual is a woman who is born in a man's body or a man who is born a woman's body, and who goes through reconstructive surgery to bring his or her body into harmony with her mind" ("Collective Editorial," 1972: 21). Presented as the ideological opposite to the first member who espoused gender essentialism, this member's understanding of what a 'transsexual' is, was based on the pretext of "reconstructive surgery" ("Collective Editorial," 1972: 21). Only with surgery could the transsexual be in "harmony" in the Cartesian sense. They continued that "the true transsexual wants not just to be a woman (or man) inside, but also to have the physical body of their true sex" ("Collective Editorial," 1972: 21). Thus "true transsexuality" for them was dependent on surgery, and that translesbians should be included in lesbian feminist community because they want to or have surgically changed their body to be in dualistic harmony.

The front cover of *The Lesbian Tide's* May 1977 edition listed an article titled "Transsexuals: The Women within or Women without?" (McDonald, 1977: 6-7). The article was written by a feminist named Sharon McDonald. They began by quoting Alix Dobkin (a TERF lesbian folk singer) who said "there is a profound difference between men and women that I don't think a doctor can change. An operation and hormones don't make it" (McDonald, 1977: 6-7). McDonald argued that transfeminists would "ironically" agree because (in their view) they made a similar essential identity claim to femininity despite their bodies being incongruent. McDonald kept within the feminine essence notion of transness and argued that surgery was the way to unite the body and mind into feminine congruence. Later in the article a sub-section was dedicated to SRS. The section attempted to be sympathetic to the trans perspective, but in a generalized and distorted way. McDonald stated



that "pre-operative male transsexuals" sought surgery to live a more wholistically feminine life (McDonald, 1977: 6-7). They then described the differences between gay men and trans women and quoted a Dr. Hooker who stated the trans woman must want their penis removed; something which was not true for gay men. They also noted the hurdles one had to go through to get the surgery in the first place (McDonald, 1977: 6-7).

The same issue of *The Lesbian Tide* included a letter to the editor over a transphobic piece published in an earlier edition titled "Women an Endangered Species" which described trans people as a tool of patriarchy (Darcy: 1977: 24-25). The letter attempted to refute the transphobic claims of these authors. The author was a transfeminist named Joanne Darcy. Darcy described being trans as having a "legitimate and painful medical problem" (Darcy: 1977: 24-25). This author argued for an extreme form of medicalization, in which not only was SRS the only way to be trans, but that transness itself was a pathology. By attempting to refute this transphobic article claiming that women would go extinct due to trans surgeries, Darcy stated that cis people would not want to alter their genitalia in the same way trans people would (something they seem to see as inherent in transness), and thus "there's no way the patriarchy could produce anywhere enough transsexuals to make physical normal women obsolete" (Darcy: 1977: 24-25). The statement that cis women were the "physically normal women" also speaks to level at which transness was pathologized for them (Darcy: 1977: 24-25). For Darcy, SRS was understood as a way to make oneself normal, and that the nonoperative trans body, if it could even exist, would be abnormal or wrong.

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Many feminist journals of the 1970s included both articles on SRS from a transfeminist perspective and a TERF perspective in the same issues. For instance, the March 1977 issue of *Chrysalis* included both a transphobic piece by Janice Raymond (which will be discussed later) and a transfeminist piece called "A Transexual Collage" which consisted of interviews of trans people often discussing SRS ("Transexual Collage," 1977: 25-31). While Raymond's work would become infamous, smaller articles like the "transexual collage" have been forgotten. "Transexual collage" included a more nuanced understanding of SRS and its significance from a trans perspective than many of the works I came across in my research. One interviewee was named Chris, who was referred to as "a pre-operative male-to-female transsexual. ("Transexual Collage," 1977: 25-31)" While the distinction between pre- and post-operation was still significant here, the terminology of "male-to-female" was certainly rather unique for the time ("Transexual Collage," 1977: 25-31). Another interviewee discussed their understanding of SRS, stating "you can't expect that because you have a sex change it will solve all of your problems. There has to be something else, and that is the unfolding of you" (Transexual Collage, 1977: 25). While the phrase "unfolding of you" is a bit abstruse, their phenomenological perspective in which SRS was not the primary element of their transition or life was unique among transfeminists of this period.

As the 1970s went on, the lesbian feminist movement became more focused on the trans "issue." While journal articles often provide a good way to see what type of topics were discussed by feminists, sometimes the journals also included summaries of in-person meetings which are particularly useful to see what the climate was like on the trans issue in the lesbian feminist community. One example of this was from 1978, in an issue of *The Amazon*, a Milwaukee based feminist journal. Titled "Transsexuality: Rap Response," this article included a collection of responses to a "rap" (a type of discussion meeting), which in this case focused on trans issues in relation to lesbian

feminism ("Transsexuality: Rap," 1978: 12-13). The article claimed about 50 participants were present for the rap, with about five trans women, and the whole event lasting for four hours ("Transsexuality: Rap," 1978: 12-13). The responses were mixed, with both transfeminist and TERF responses. Beyond this, the rap response showed that medical transnormativity was the dominant way these feminists thought of transness. One participant described their view that "if a male can go to a male physician and decide that removal of this organ and addition of that hormone will produce a womyn - I'm angry," and followed that by stating that trans women, instead of transitioning, should try to challenge patriarchy as a man first, since by transitioning they do not actually challenge patriarchy ("Transsexuality: Rap," 1978: 12-13). They also expressed annoyance at transmen, who they said were just women with "constructed male genitals" ("Transsexuality: Rap," 1978: 12-13). Another participant argued similarly that trans people (which they understood as people who went through SRS) did not challenge patriarchy and instead "reinforce[d] the rigid sex roles" ("Transsexuality: Rap," 1978: 12-13). Another stated that "I will never accept a surgically transformed woman as my sister" ("Transsexuality: Rap," 1978: 12-13). The writers' transphobic understanding of transness's relationship to patriarchy was based heavily on the centrality of surgery, as well as a high level of phallocentrism. Indeed, almost all of the responses were based on the idea of the "sex change" and that was the primary focus of criticism. These feminists echoed the frequently repeated view of 1970s TERFs; of simultaneously espousing medical transnormativity while also embracing a gender essentialism which meant no matter the number of surgeries, the trans subject was just artificial and damaging to the feminist movement. Most of the longer responses from the rap were from TERFs, many of which ultimately made the same arguments. However, signs of dissent came from the "graffiti sheet" where participants put slogans or small phrases, and which were copied in the rap response. These included transfeminist statements such as "all women are beautiful no matter how they got that way," "it's only when women love all people and all living things – can we truly love ourselves", and "we say down with men, up with women, NOT down with anybody!!!" ("Transsexuality: Rap," 1978: 12-13). This sheet gives a small insight to the transfeminist voices who seemed to have been present at this rap yet were not included in the larger discussion report.

By the late 1970s, the so-called "transsexual issue" was commonly discussed in feminist and lesbian circles. The Sandy Stone controversy led to new levels of transphobia and TERF rhetoric in the feminist movement (Enke, 2018: 22). Coming out of this wave, was one of the most prominent early

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TERF scholars, Jancie Raymond. Raymond received their PhD in ethics and society from Boston College in 1977 (Raymond, "About"). Their dissertation research was later used for what became a TERF classic, *The Transsexual Empire: The Making of the She-Male*. Raymond was also a common contributor to feminist periodicals in the years before publishing *Transsexual Empire*, often writing transphobic pieces which would echo her later book. In this section of the paper, I will show how Raymond took the rhetoric of medical transnormativity to a more extreme but also academically palatable form.

Raymond published an early transphobic work in the May 1977 issue of *Chrysalis* titled "Transsexualism: The Ultimate Homage to Sex Role Power" (Raymond 1977, 11-24). The editors described the text as "the first feminist analysis that seek with clarity the overall implications of this phenomenon [transsexuality] for us as women in a patriarchal society" (Raymond, 1977: 1). Raymond's text began by framing transgender identity as a new identity existing only as a by-product of SRS. As Raymond saw transness as men using surgery to enter into women's spaces, they discussed how trans men (which they call "transsexed women") essentially do not exist in any great numbers, as if they did it would challenge their argument of trans people as patriarchal tools attempting to gain access to women's spaces (Raymond, 1977: 11-24). Raymond used her favorite phrase "male-to-constructed-female transsexual" to describe trans women, sacrificing brevity to bring the surgical understanding of transness to the center (Raymond, 1977: 11-24). She then argued that SRS/trans identity was "the creation of men, initially developed for men [trans women]," and that every aspect of trans identity is androcentric (Raymond, 1977: 11-24). This text appeared to be the first time Raymond used her idea of the "transsexual empire" (Raymond, 1977: 11-24). She also claimed that trans women were experiencing "womb envy," and merely had fetishized and objectified the "female body" (Raymond, 1977: 11-24). Raymond then continued with arguing that "transsexualism" was itself just a surgery (not a real social identity) on par with female genital mutilation and lobotomies (Raymond, 1977: 11-24). This work foreshadowed *The Transsexual Empire* in many ways, and shows Raymond doing what she was best at: espousing transphobic rhetoric based on an academically palatable discussion of power in medicine and the dominance of scientism and technology in modern society. However, her relative restraint in rhetoric and utilization of academically sophisticated frameworks (compared to many other TERFs of the 70s) occasionally slipped into rather incoherent comparisons and selective use of data.

*The Transsexual Empire* built on Raymond's writings published in feminist journals. Raymond heavily cited medical literature on transness, primarily from Benjamin and Money, while also having interviewed 15 trans people (Raymond, 1979: 15). Raymond's book included a variety of apparent main arguments, including the idea that "medicine and psychology. . .function as a secular religions in the area of transsexualism" (Raymond, 1979: 2). Raymond was the doctoral student of Mary Daly, a radical feminist theologian, and used some concepts from religious studies to frame her work (Kelly, 2018: 9-10). Raymond argued that the category of trans was a theodicy and required the "surrender of selfhood" to "transsexual therapists and technicians" (Raymond, 1979: 2). For Raymond, the trans subject, while still an autonomous threat to women, had no agency at the hands of the medical "empire." She argued it was only through medicalization that transness existed. Thus, there was no trans subject before medicalization. In this sense, transness to Raymond was not really medicalized at all, for that would require its existence beforehand; transness was only a condition produced by medicine/surgery. In order to justify why trans people would

go to the medical “empire” (the clinic) in the first place, she claimed that transness was a “social problem whose cause cannot be explained except in relation to the sex roles and identities that a patriarchal society generates” (Raymond, 1979: 17-18). Raymond seemed to argue that while the “transsexual” was a result of the clinic, dissatisfaction with gender roles was what brought people into the clinic in order to become trans. Raymond further claimed that SRS had “replaced ethical values of choice, freedom, and autonomy,” while simultaneously arguing against trans people’s bodily autonomy (Raymond, 1979: 2).

Unlike many TERFs who adhered to a gender essentialist ideology, Raymond claimed she was a social constructionist TERF (Raymond, 1979: 2). While the idea that transness and gender itself was socially constructed within a patriarchal gender system would be something that would usually imply trans acceptance, she instead saw this as a reason for transness to be opposed. Raymond justified this by claiming SRS violated “the integrity or harmony of the whole” (Raymond, 1979: 17-18). She explained further by stating that SRS “violates a dynamic process of be-ing and becoming that includes the integrity of the body, the total person, and the society” (Raymond, 1979: 17-18). Raymond, while attempting to not be an essentialist, just used a different and more philosophically abstruse version of essentialism. Thus, Raymond still opposed SRS and trans identity on the basis that it violated an essentialist-ethical conception of humanity. She just replaced the term essentialism with “bodily integrity” (Raymond, 1979: 13).

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The book itself was not exclusively on the issue of trans women in lesbianism. However the arguably most openly transphobic chapter was the one on lesbianism (Raymond, 1979: 99). Titled “Sappho by Surgery,” Raymond built on her essentialism of “bodily integrity” to make the claim that transness was a form of rape (Raymond, 1979: 104). Raymond defined rape as not just sexual violence, but as “a masculinist violation of bodily integrity” (Raymond, 1979: 103-104). Thus she claimed that “all transsexuals rape women’s bodies by reducing the real female form to an artifact, appropriating the body for themselves” (Raymond, 1979: 104). Raymond slipped a bit on their claim of non-essentialism by using phrase “real female form,” a deeply essentialist claim. She continued “transsexuals have lost their physical “members” does not mean that they have lost their ability to penetrate women – women’s mind, women’s spaces, women’s sexuality. Transsexuals merely cut off the most obvious means of invading women so that they seem noninvasive” (Raymond, 1979: 104). Raymond’s argument of transwomen as rapists via their violation of bodily integrity relied heavily on rhetoric of medical trans-normativity, describing transwomen simply as being men with “cut off” penises. Raymond’s phallogocentric understanding of trans femininity meant that even with the phallus’s non-being via surgery, the power embodied in the phallus still existed in a non-corporeal, social form.

*The Transsexual Empire* became incredibly popular after its release, becoming a common point of discussion between TERFs and transfeminists. Just after its release, a review of *The Transsexual Empire* was published in *New Women’s Times* (Hagberg, 1979: 10-11). *New Women’s Times* was a feminist periodical from Rochester, New York, a medium size city in Upstate New York. The review was titled “Transsexualism: Is Gender Absolute?” and was written by Karen A. Hagberg, a cis lesbian feminist (Indovino, 2012). Hagberg was largely critical of Raymond’s work, and although they were by no means a transfeminist in their review, they were more accepting of trans identity than Raymond. However, they still relied on a narrow and inaccurate understanding of transness. Hagberg understood transness as a surgical response to dysphoria. They defined transsexuals as “people who

are repulsed by the genitalia with which they were born ... things which can be surgically altered" (Hagberg, 1979: 10-11). This narrow and phallocentric/genitalia-focused understanding of trans phenomenology stayed within the standard medical transnormative rhetoric of the period. Hagberg went on to provide a rather grim picture of trans phenomenology based on dysphoria and devoid of euphoria, stating "transsexual surgery, bizarre and radical as it may seem, appears to be the only alternative to self-destruction" (Hagberg, 1979: 10-11). Thus for Hagberg, transness was centered on dysphoria (to the point of suicide) and thus the only way out was with the relieving power of surgery. While as problematic as Hagberg's conceptualization was, they did challenge Raymond on several points. Hagberg argued that trans people may attempt to fit into gender-roles in ways which may be un-feminist for the same reasons that cis people do, recognizing that trans people were still bound by social expectations and that if those patriarchal expectations could be abolished, then trans people could also move beyond them (Hagberg, 1979: 10-11). They also criticized Raymond for dismissing the existence of trans masculinity, and argued that any feminist analysis of transness must recognize the existence of trans masculinity or female-to-male (FTM) transsexuals. They also criticized Raymond for the small number of trans people they talked to and the overreliance of feminist studies on medical literature instead of actual trans voices (Hagberg, 1979: 10-11). Hagberg also relied on a rather paternal view of how trans medicine should have gone forward, still advocating heavy counseling before any surgeries and claimed (falsely) that HRT caused cancer (Hagberg, 1979: 10-11). Despite Hagberg criticizing some aspects of Raymond's book, they still embraced a medical understanding of trans experience, and in this respect continued to repeat the dominant trans paradigm of the 1970s.

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## CONCLUSIONS

This paper has attempted to show how, despite the diversity of sides in the "trans debate" within Second Wave American feminism, transfeminists and TERFs all stuck to a paradigm of medical transnormativity. Advocacy and opposition to the rights of trans people focused mostly on surgeries and hormones. TERFs and transfeminists focused on SRS more than other aspects of trans experience, and thus to understand the context in which they made their arguments, we must analyze SRS and trans medicalization as discursive objects in their own right.

While doing this research, I am not advocating an opposition to what would now be termed gender affirming care. Many trans people today continue to benefit from a wide variety of medical procedures (including HRT and SRS) to help alleviate gender dysphoria or gain greater acceptance in

society, and certainly trans people of the past did so as well. However, by doing this research, I do wish to challenge the idea that transness is itself pathological or medical, rather than merely the logical consequence of having an arbitrary binary system of assigning gender at birth.

Transfeminism and the trans community have in many ways expanded beyond the transnormativity of the 1970s. The transfeminist Sandy Stone, whose existence in the 1970s lesbian feminist music scene resulted in arguably the first real wave of TERF discourse, went on to write in the late 1980s *The Empire Strikes Back: A Posttranssexual Manifesto*, which critiqued the emphasis on “passing” in both Raymond’s work and within the trans community itself (Stone, 1992). Stone noted a similar parallel of limiting discourse between the trans community and TERF which I point out in my research. *The Empire Strikes Back* became a classic of trans studies, and in academia at least, became much more influential than all of Janice Raymond’s work combined.

150 The explicit transnormativity which dominated the extremely marginalized world of trans thought in the 1970s, is not as prevalent in the much larger discursive space of today’s trans world. This is partially a result of the growth of trans activism, trans scholarship, and especially non-binary identity and queer discourse, which has challenged much of the logics behind medical transnormativity. However, I think it is fair to say that less explicit transnormativity still haunts our communities. It is still expected that trans people take hormones or have surgeries, and there remains little space for people who do not want to or cannot.

Part of trans experience is deeply imaginative. We try to imagine ourselves outside of the restrictions of society, outside of the confines of what our bodies can and cannot be, outside of the normative. So, can we imagine a transness which is affirmed and celebrated without medical intervention being central? By challenging transnormative ways of thinking, we can try to imagine an understanding of transness more free, accepting, and diverse than the activists of the 1970s could.

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