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Emma Heaney

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“I am not a friend to men”: Embodiment and desire in Magnus Hirschfeld’s *Transvestites* case studies

Emma Heaney

William Paterson University

ABSTRACT

This article reads sexological case studies of the *fin-de siècle* that contain accounts of trans women’s lives in the period. It argues that these sources contradict the diagnostic criteria that doctors determine as the factors that define trans feminine identity in the period: desire for men, social isolation, and tortured bodily dissatisfaction. Chief among these contradictions is the prevalence of the expression of trans women’s desire for women and easy participation in women’s social and kinship networks. Therefore, this article considers these narratives to be a crucial and overlooked resource for considering the breadth of lesbian identity and sociality in the late nineteenth and early twentieth century.

KEYWORDS

Trans women; trans lesbian history; trans feminism

For Janice Raymond, Germaine Greer, and Elinor Burkett¹

Studying trans feminine life around the *fin-de-siècle* reveals two distinct realities, depending on the sources you consult. In this period, sexological experts refined the old model of “inversion” that had previously read femininity in people assigned as male at birth as a symptom of male same-sex desire. In this period, sexologists recognized the existence of masculine men who love men and so standardized a set of diagnostic criteria to distinguish trans feminine people as distinct from homosexual men. These experts offered terms such as “congenital androgynes” (Krafft-Ebing) and “transvestites” (Hirschfeld) to signal that distinction. Sexological texts define these trans women as effeminate men who are sadly trapped in the wrong body, desperately isolated and confused, and burdened by intense desire for bodily transformation.² By the 1920s, sexologists began to offer surgical sex change as a cure for this condition. Social histories, in contrast, tell a story of trans feminine people who are a visible part of the street economy, wild camaraderie, and daily violence that characterize working-class communities from 1900 through the 1920s. In this telling, trans women were not, as a group, isolated, unsure, and focused on the unlikely hope of medical bodily change. In fact, like the cis women sex workers whose conditions of life and labor they largely shared, trans women

CONTACT Emma Heaney  heaney@wpunj.edu

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had to be brash in attitude and focused on the exigencies of fulfilling their daily needs in order to survive.

After consulting these social histories, the sexological texts read differently. This article refocuses attention away from the doctors' diagnostic interpretations and toward the life narratives that the case subjects themselves offer. The sexologists publish these life stories alongside their observations and, in fact, present them as evidence for their diagnoses. These narratives reveal vital information about their authors' labors; bodily self-concepts; and emotional, social, and erotic lives that confirm the version of trans feminine life revealed in the social histories. This article begins with this simple observation that many case studies of trans women do not align with (and often very directly contradict) the diagnostic criteria that sexologists claim define trans womanhood. Read not as cases of aberration but as documents of life, these case studies provide an unacknowledged archive of lesbian and women's writing that, once consulted, contribute theoretical insights on the topics at the center of this special issue of the *Journal of Lesbian Studies*.

What are these contributions to lesbian studies found in life narratives of trans women from the late nineteenth and early twentieth century? The trans women in this archive describe their experiences of their bodies as female, freeing the notion of women's embodiment from its exclusively cis association. This is achieved not through a refusal of sexed specificity (by claiming that biology and embodiment are irrelevant to female experience) but through a trans feminist clarification of the operation of sex (by demonstrating that biology and embodiment don't operate according to the cis logic that penis ground male sex identity and vaginas ground female sex identity). Trans embodiment inflects relationships among women of cis and trans experience, including those of co-workers, friends, sexual partners, and domestic partners. In describing these relationships, these trans women theorize the interrelation between non-cis female bodies and desires between and among women. These bodies and relationships don't exist as theoretical objects extracted from the material conditions in which they dwell, and this is the central theoretical observation of this article. Evidence from the first-person narratives of trans women who were studied by sexologists suggest that they experienced biology, embodiment, and desire in the context of the work they do, familial support or lack thereof, access to gendered clothing, issues with attaining identification papers that reflect their lived gender, access to housing, experiences of interpersonal and sexual violence, policing and incarceration, and myriad other practicalities of daily life. Their experiences are the material basis for the diverse set of trans women's experiences.

It is the work of this article to read the trans women's life narratives collected in Magnus Hirschfeld's *Transvestites* (1910) to reveal that, on the level of bodily experience and of relationships between women, trans women's bodies and experience don't contradict, intervene in, or complicate feminist histories that assume cis experience. Rather, these accounts expand those histories and recommit them to their own theoretical provocations. Materialist feminists teach us that the social

category woman is produced through the assigning of reproductive labor to people who are assigned female.³ Black feminists and other women of color feminists teach us that racialization is often inflicted on women of color through critique of the domestic practices of women of color and the gendered economic structure that compels women of color to do domestic work for wage to the benefit of White women's families.⁴ This trans feminist archive teaches us that trans women have historically encountered barriers to doing gendered labor (both waged and unwaged) and that this foreclosure of trans women from feminized labor has served to police the cisness of womanhood. This observation contributes to our established feminist understanding that the feminization of reproductive labor is a basis for the gendering of all women and that the racialization of paid domestic labor sorts women by race.

Trans femininity diagnosed

The sexological understanding of the trans feminine developed over the course of the late nineteenth century. Gender inversion enters medical understanding in the mid-century as a diagnostic indicator of desire for men. As more men assert both masculine gender identity and desire for men, this understanding shifts. Effeminacy becomes its own realm of experience and object of inquiry, which haunts male homosexuality but is not reducible to male homosexuality. Sexologists' diagnostic accounts begin with analyzes of possible psychiatric or physical abnormalities in the patient's family background. Some subjects report characteristics that are considered familial abnormalities, including gender inversion, but also factors that, to the modern understanding, don't seem related to gender like mental feebleness and alcoholism; others do not report the presence of these factors in their familial history. The accounts then survey their bodies for signs of physical anomalies with emphasis on the parts of the body used to establish sex. The sexological accounts then typically provide information about the subject's childhoods and their first experiences of gender difference or same sex desire. Such reporting often reveals very early and committal rejection of assigned sex and assertion of identified sex. The sexologists then query the subject's sexual interest in men and the affect of that desire on sex identity. This approach yields a diagnostic figure who is trapped in the wrong body and unsure of how to live this contradiction between body and identity.

A survey of the development of the sexological trans feminine from its origin in the 1860s to the full medicalization of trans life in the early twentieth century reveals a tradition of writers recasting the figure's meaning in order to meet conceptual or political goals, precisely at the intersection of biology, embodiment, and desire. In *The Riddle of Man-Manly Love* (1864), Karl Ulrichs offers the seed of the medical understanding of trans femininity: The Urning. This Urning, "born with the sexual drive of women and... [a] male [body]" (35) is marked by aesthetic, emotional, and civic genius and that his pursuit of "Dionings" (heterosexual men)

is the expression of a natural desire that results from a feminine sexual orientation that originates in embryonic development (36–7, 47). This argument relies on the pseudo-scientific claim that there is a biological origin of Urnings' sex feeling and this explanation of the origin of "man-manly love" provides the basis for Ulrichs's ethical claim that legal punishment of such "natural" feelings is illogical and unjust. Ulrichs attaches the metaphor of a woman trapped in a male body to the solidity of biological explanation for this phenomenon and, in so doing, folds men who desire men into heterosexuality and thus morality.

Richard von Krafft-Ebing and others working at the nexus of psychiatry and criminology in the 1870s and '80s take many of the essentials of Ulrich's formulation, but reinterpret inversion, not as grounds for acquittal for the crime of perversity, but rather the mark of either pathology or criminality. Krafft-Ebing's model formed around a spectrum of inversion that ran from the more gender normative to the more gender non-conforming. He considered it possible to develop inversion, either by being "seduced" into it as a youth, or by descending into it through participation of licentious urban cultures. In *Psychopathia Sexualis* (1886), Krafft-Ebing bifurcates the category of trans feminine invert into a congenital variant (a psychiatric pathology often stemming from a biological "hereditary taint") and an acquired variant (associated with the behavior of sex work and therefore rightly criminalized).⁵ The congenital invert, Krafft-Ebing observes, often reports "the delusion" that they have changed sex (200, 216). He claims that those who "feel themselves to be female" feel a jealous antipathy for others of similar gender identities and a strong desire for masculine homosexuals and "normal men" (253). Krafft-Ebing is particularly focused on the effeminate's desire to "always act like a woman" in sexual encounters. Trans feminine sex workers, who Krafft-Ebing considers more likely to have acquired their gender identity through degenerate living, use "the arts of coquetry" such as "ornaments, perfumes, feminine style of dress... to attract pederasts and homosexuals" (392). He (and he is not unique among doctors of his time) slides between forwarding an understanding of inversion as a biologically ingrained condition and an understanding that inversion develops in a person through a shift in embodiment precipitated by degenerate desirous acts. His attitude that gender non-conformity is a volitional behavior enabled the use of his text as a manual for courts and judges. Krafft-Ebing's analysis of the bodies and desires of trans feminine people thus had a direct impact on the real conditions of trans feminine life.⁶ *Psychopathia Sexualis* also enjoyed great popular readership and consequence for public understanding; 12 editions were published between 1886 and 1902.

In the first decades of the twentieth century, the physician and sexologist Magnus Hirschfeld was the first to definitively distinguish trans feminine people (who he calls transvestites) from homosexual men and to advocate for the specific needs of trans feminine people. A homosexual man himself, he founded the Institute of Sexual Science in Berlin in 1919 to advocate for gay and trans people and provide medical services, including gender-confirming surgeries beginning in the

late 1920s. The institute also contained a library of sexological material and served as a social center for queer and trans Weimar Republic Berliners.

Hirschfeld has entered history as the brave father of gay rights, a benevolent advocate for trans feminine people, and a solid ally for cis women in the area of reproductive choice. He was all of these things.⁷ He was a key figure in the fight to overturn the anti-sodomy law, paragraph 175 of the German penal code. The institute provided necessary medical services, including hormones and genital surgeries, as well as counseling to gender non-conforming people. His institute also helped to arrange for “transvestite passports” that could be presented to police to avoid arrest (Marhoefer 63). Hirschfeld’s theories were different from those that came before. He went farther than previous scientists had in arguing that homosexuality was, as Robert Beachy summarizes, “the inborn mental and physical condition of a small minority” and that homosexuals should be “tolerated, even accepted and embraced” (87).⁸

Hirschfeld’s theoretical writing on trans femininity also echoes the analysis of previous models on points that further entrench the understanding of trans feminine people as trapped and compromised. As in previous work, Hirschfeld seeks an explanation for the meaning of trans feminine people’s desires and identities. This search for a diagnostic abstraction of trans femininity extracts trans feminine people from the real circumstances of their lives. For instance, whereas making decisions about clothing and with consideration to the messages they send about gender and desire is a universal practice for all people, Hirschfeld’s text positions trans feminine people’s clothing choices as significant mysteries that require decoding. Likewise, whereas we all need to find means to support our lives, Hirschfeld’s diagnostic describes women’s work as a preference that expresses gender rather than a necessity of living as a woman. He noticed that many of his trans feminine patients partnered with women, but explained this by calling these relationships heterosexual, rather than theorizing lesbianism to include partnerships in which one or both partners is a trans woman. He spends time considering whether trans gender expression is the same as clothes fetishism, although he also mentions that most trans people reject this understanding. In these and other comments, Hirschfeld, like other sexologists, looks for symptoms of aberrant gender cross-identification and promises medical services to bring bodies in line with sex identity. In his most straightforward claim, Hirschfeld writes: “No matter how much transvestite men feel like women when dressed in women’s clothing... they still remain aware that in reality it is not so,” affirming Ulrichs’s metaphor of entrapment (182). This diagnostic then provided the medical justification for genital surgery and other medical services that the institute provides as the singular medical response to trans feminine life. Even as Hirschfeld cleaves gender from desire, he retains the generalizing of cis understanding of biology, embodiment, and desire. The case studies themselves offer a very different account of their authors’ experience and the theoretical implications of that experience. In *Transvestites*, Hirschfeld identifies gender nonconformity as its own experience rather

than an adjunct to or symptom of desire for people of the same sex, even as his subtitle reflects his sense, expressed throughout his analyses, that gender is an expression of erotic desire. Trans feminine existence remains a personal problem to be solved for Hirschfeld. That solution involved offering bodily change in order to reconcile trans life with cis understandings of sex. This medicalized understanding ignored the broad social reality of trans feminine life that did not hinge on transformation. It is to that history that we now turn.

Trans femininity in social histories of the period

By the publication of his definitive work *The Intermediate Sex* in 1908, the influential gay rights advocate and intellectual Edward Carpenter takes for granted that the trans feminine type (“extreme homogenic type” is his term) is widely known to his reader. He describes this personage as:

A distinctly effeminate type, sentimental, lackadaisical, mincing in gait and manners, something of a chatterbox, skillful at the needle and in woman’s work, sometimes taking pleasure in dressing in woman’s clothes; his figure not infrequently betraying a tendency towards the feminine, large at the hips, supple, not muscular, the face wanting in hair, the voice inclining to be high-pitched.... His affection, too, is often feminine in character, clinging, dependent and jealous, as of one desiring to be loved almost more than to love. (30)

He claims that: “[extreme homogenic types], on account of [their] salience, everyone will recognize more or less” (231). This popular familiarity was not primarily formed by sexological and political writing, but rather by the highly visible presence of trans feminine people in working class communities. In *Gay New York*, George Chauncey outlines the categories that ordered the social and sexual lives of men and trans feminine people in working-class New York from the turn of the twentieth century to World War II. Among these were trans feminine “fairies” and their cis male partners, who were called “wolves.” “Wolves” maintained a self-image and community identity as “normal” men. Fairies were viewed as interchangeable with cis women in sexual and domestic pairings, and their femininity established the contrasting “normalness” of their masculine partners. These social roles indicate, in Chauncey’s terms, the “plasticity of gender assignment in the rough working-class culture in which the fairies operated” (62).⁹ Chauncey’s ethnographic and archival sources demonstrate that sexual and social gender roles do not adhere to assigned sex or genital status during this period. Although individual working people might not have put it this way, the operation of their communities communicated the understanding that having a penis doesn’t necessarily make you a man.

This social operation of sex as not based on genitals, but rather on social role, does not lead to the breakdown of the social distinction between men and women. Rather, fairies simply occupied a female social role during this time. Trans femininity was not viewed as a derivation or parody of cis womanhood. A gay man who circulated in the working-class communities of downtown Manhattan in the

1920s explains that “the secret of a woman’s appeal to man is not so much her sex as her effeminacy... nine out of ten [men] take favorably to the homosexual... they seek the eternal feminine in the homosexual... [and] feminine homosexuals naturally have the greater number of admirers” (62). *Gay New York* also clarifies, however, that no single definition of femininity or masculinity existed in the period. Instead, there were particular iterations of male and female social roles that varied according to class and ethnic group. Chauncey writes, “the mixture of tolerance, desire, and contempt with which men regarded fairies... resulted from... the fairies’ style [which] was comparable not [to] some ideal category of womanhood [but] to that of a particular subgroup of women or cultural type: prostitutes and other so-called ‘tough girls’” (1994, 60–1). In this social sphere, in which there developed what Jeffrey Weeks describes as “vast homosexual argot, often international in character,” working-class cis women and trans feminine people had overlapping and mutually conditioning experiences of sociality, sexuality, dress and adornment, violence, and labor (41).

This vernacular operation of gender and sexuality came into contact with medical logic in the late nineteenth century that was a largely middle-class phenomenon until the post-World War II period. Medicalization occurred much earlier in the bourgeois homes and workplaces than in the “fairy resorts” of Manhattan’s Bowery and London’s “major cruising area,” Leicester Square (Chauncey 188). In the European context, David F. Greenberg writes that gender inversion, or in his words “transgenerational homosexuality”

was nothing new... doctors of the Old World could hardly have been unaware of it; it received too much publicity. It was new that patients were turning to doctors for advice on their condition. Their doing so reflects the belief not only that their condition was problematic, but also that doctors could help them with it. Neither the English mollies nor their doctors would have thought so. (386)

These social histories reveal that the new sexological response to trans femininity intervenes to subject to a logic of diagnosis and cure what had been a fairly simple social reality: trans feminine people had long lived as women.¹⁰

Magnus Hirschfeld’s case studies: Biology, embodiment, desire

The recognition of a vernacular trans feminine history provides context for examining the sexological case studies. First-person accounts of trans feminine life provide more detailed and various stories than the available social histories. They offer information that social histories that are primarily focused on gay men neglect: they reveal the personal identification as women that grounded these trans feminine lives. Their accounts allow, indeed oblige, their readers to consider the particularities of trans feminine history. Their accounts also, however, oblige us to recognize the long history of women of trans experience as a component of women’s history *tout court*. In other words, truly absorbing the accounts of trans

women's lives since 1860 obliges us to not assume cis experience when we talk about the history of women.

Magnus Hirschfeld's *Transvestites: The Erotic Drive to Cross-dress* offers trans women's interpretation of their bodies and relationships. These women highlight features of their lives that contrast with the "points of information," as Havelock Ellis put it, which sexological inquiry makes central to determining sex. Although these accounts include information about family medical history and whether the subject had success integrating into familial structures, they emphasize whether or not the subject's family accepted their gender nonconformity. This subtle difference is consequential: these women desire easy social and familial relationships, as do most people. By and large, they view others' prejudice and not their own identities as women as the impediment to such ease. Whereas some women seek male partners, many seek female partners. These relationships are often experienced as same-sex relationships between women. The female identity that grounds these relationships is not solely a personal identity. Rather, these women's social experiences, both good and bad, both experiences they seek and those that they cannot avoid, are shared with cis women. The trans women's experiences are not, however, reducible to those of cis women. Trans experience affects all gendered realms of life and these women present both overlap and the particularity clearly.

Subject One is a 30-year-old merchant. She recounts childhood interest in dolls and dresses and, as a youth, participated in her mother's and sister's embroidery work. As a young adolescent, she and her cis "girl playmates... showed each other [their] genitals" and despite the difference that they note between their bodies, these girls "treated [her] exactly as one of their own" (21). Here, Subject One reports in a straightforward way that recognition of the different forms that genitals take can coexist with a sense of a common sex identity. This easy recognition of Subject One's female identity extends to adulthood sexual partnerships with women who accepted her status as a trans woman and lent her clothes. She experiences some shame in her female identity and some difficulty in finding work, and worked as a clerk, which required presenting as a man. In young adulthood, she moves to a new city, where she sets her hair in a permanent wave and begins to wear dresses in private. She longs for a job as a ladies' maid and follows women, observing their habits and interests. She desires women for both sexual and domestic partners and also reports a trip to a hotel to experiment with presenting as a woman consistently. There she spends time with a group of women and "felt so comfortable in their midst, totally in keeping with [her] being" (xx).

Hirschfeld concludes this first case study by quoting Subject One's statement that wearing women's clothes doesn't provoke a sexual response and she isn't interested in any particular article of clothing. These observations must have come from being queried as to whether dressing in women's clothes is a sexual fetish. Moments such as these are crucial to understanding the logic through which trans (and queer) existence is medicalized. Whereas many people would not be able to produce an account of why they pick the clothing they do (or be inclined to

describe the sexual acts they enjoy) to a doctor, the logic of medicalization requires that patients produce answers to these questions. Case studies are thus the site for the interaction between diagnostic requirements and the narration of personal experience.

Many of the characteristics of the first case study resurface in the story of Subject Two, a 35-year-old who is married to a woman. As a youth, Subject Two attends dances in women's clothes with her female partners. She reports that her desire hinged on the idea that "[she] too, like the beloved girl, wore girls' clothing, long hair, and earrings, and we both would be mutually enthusiastic about all these pretty things" (xx). She also reports that she "never had an inclination toward men" (27). Subject Two's wife, as part of their commitment to one another: "promised me she would not be opposed to my individuality in marriage, but would rather promote it as much as possible" (27). Subject Two's wife "promotes" her partner's femininity by lending her "a woman's nightshirt, bedjacket, and earrings" (27).¹¹ As was the case with Subject One, in Subject Two's experience cis women recognize, understand, and promote the womanhood of their trans feminine friend and partner. This case study details the ways that intimate partnerships supported trans women in living their daily lives. These are not organized advocacy aims, as are the activities of Hirschfeld's institute, but rather quotidian care practices that the organs of official politics and medical services don't include in their plans for how to better the lives of trans women.

Subject Three identifies social recognition of her female identity and not bodily change as her primary goal. She "considers his (sic) condition inborn, is totally satisfied with it, wishes only a corresponding milieu for it," indicating that it is social change and not personal transformation that she seeks.¹² "My greatest desire," she writes, is "to be able to live untroubled and undistinguished as a woman" (29). Rather than hoping to change into a woman, she reports: "my thoughts of *being* a woman are very persistent" (31; emphasis mine). The reality of her female identity is confirmed in her daily life. She writes that, "[Her] wife daily confirms [her feminine tendencies] and indeed it is also clearly visible in our household, when [she] ... relax[es] in the kitchen and perform[s] housekeeping" (29). Domestic labor is shared between female spouses—one cis and one trans—and this shared labor is viewed by both as gender confirming. Subject Three makes the clearest claim that, although she desires social recognition, she doesn't require it to establish her sex. She states: "I have never looked for verification of the same condition in persons or in books; I never gave it a thought, because everything appeared in me by itself, even if deviating from the rule" (30). Her particular expression of disinterest in "book" verification rejects medicalization or otherwise expert confirmation in the clearest terms. These vignettes demonstrate the daily life of trans feminine people outside of the logic of illness or the necessity of diagnosis or cure.

For Subject Four, gender confirmation does come from others, not from doctors but from an experience of hearing about another trans feminine person. She overhears a story at a family party about a friend of her mother's whose college student

son “arrived home one day in women’s clothing and was so unrecognizable that for the longest time she and her husband had no idea they were talking to him” (32). Subject Four is inspired by this story to express her own female identity. Here again is evidence of the way that women (both cis and trans) confirm each other’s female identity and capacitate each other’s expression of that identity. Recognition of these observations from the trans feminine archive reveals not the subjection of women to the prison of identity and to gendered labor expectations based on that identity. Rather, these observations reveal identification with the social category woman and the performance of social practices that affirm that identification.

This expression of identity and affinity in these texts does not preclude or dull analysis of the enforced binarization of gender. Subject Five offers a very clear analysis of the effects for trans women of the gendered division of two areas of society. The first of these effects is the gendering of paid sectors of employment, the fact that women did certain jobs and men others. The second is the use of gender as a category of identity in bureaucratic forms. These two areas are related since proper identification is necessary to get a job. The exclusion from papers and work affects Subject Five’s sense that she is not present in the world:

[I]t lay heavy on my mind that I was getting older and older and was getting nowhere.... As a woman I was totally without papers, and so, in order not to be totally erased from the ranks of the living, every three months I sent the rent to my landlady because there at my apartment I was officially registered. (48)

Despite the difficulty, she “endeavoured to find every possibility to prolong my life as a woman” and took practical steps to allow her to continue. She “went to a woman’s employment agency, paid my fee, and wanted the position of a female companion. Her questions about where I had been I answered truthfully, but I could produce no references” (49). She points to the bureaucratic realities that form the actual contours of trans women’s lives. She “realized that there was no possibility of achieving an existence as a woman” because, “on account of lacking a social security card,” she could never attain employment (49). She consults a friend who suggests transitioning back to male social identity and men’s work. The next day:

with great lament and sorrow, I had my beautiful brown hair dressed for the last time.... The next morning at my friend’s apartment the barber cut off my hair after I stopped resisting. Each cut hurt me. Then, for the first time in twenty months I again put on men’s clothing and felt very unhappy in them (51).

This narrative outlines, in the simplest terms, the relationship between the bureaucratic use of sex as an identifying category, the sex segregation of labor spheres, trans women’s life chances, trans women’s identity, and trans women’s emotional well-being. This woman makes choices about how to wear her hair at the nexus of factors of aesthetic affinity, gender expression, and economic necessity organized by the socially enforced gendered division of wage work.

Letters exchanged between Hirschfeld and a trans woman compose Case Study 13, a long and detailed account of this trans women's life from birth to middle age. Hirschfeld began the correspondence after reading her plea, in a German magazine, that mothers raise their girlish sons as girls so that they will be "more stable in their girlishness" and "will never want to become men" (83). At the time that she and Hirschfeld trade letters, the woman is 47 years old. She was born in Tyrol (present-day Austria) to parents who conceded to the "fuss" she made about putting on trousers and so allowed her to wear dresses as a child (83). After her parents' deaths, she went to live with aunts and uncles who forced her to wear boy's clothes. She fled to Switzerland in her early teens in "the clothes of a young woman and her certificate of domicile," because her family would not allow her to pursue a career as a teacher. In Switzerland, she supported herself as a nanny and by doing housework and embroidery (88). While thus employed, her mistress discovers her trans status but "did not make a big fuss about it because she had never had such a good woman worker" (88). This mistress also encourages her trans feminine employee to go dancing and enjoy herself in her female identity.

At age 16, she experienced an attempted rape followed by her attacker spreading the news that she was a "hermaphrodite." These experiences motivated her to move to France, where she found work as a domestic and "came together with women who lived with other women like married people, which in France is a rather widespread custom" (88–89).¹³ Her trans status is again revealed against her wishes when one of these young women examines her body in the night. In the morning, the cis woman comforts Subject 13 by reporting that she "need not be ashamed" because "there really were other girls like [her]" (89). As with Subject Four's response to hearing about a trans feminine family friend, this moment documents the importance of trans women's knowledge of other trans women. This refutes the sexological and popular emphasis on isolation. She became very attached to this girl who, to her dismay, married shortly after to a man who began to show sexual interest in the young trans woman. His interest is unwelcome and this is another indication of trans women's vulnerability to sexual shame and sexual precarity. This experience motivated her to leave Europe for the United States.

From France she moved to New York and then Milwaukee, working as a maid and cook when possible and in men's sectors when necessary. Her migrations were motivated by similar sexual assaults and revelations of her genital status. In New York, she was assaulted by a male fellow embroiderer, who then used the threat of calling the police and revealing her trans status to keep her "as a coquette" and coerce her into sex. In this experience, Case 13 reports, "[He] treated me totally as a woman," revealing her intimate knowledge of the misogynist violence that shapes that social category, even as the threat to reveal her trans feminine status represents a trans misogyny that targets trans feminine people alone (90). Finally, she settled in San Francisco, where she ran a boarding house for showgirls, worked as a bookseller (specializing in "trashy literature and socialist writings"), and "took part in

the worker's movement" (91). Her domestic situation among the other women was stable, although neighbors suspect her of being a prostitute (91).¹⁴

These letters demonstrate the immersion of the trans woman writer in the feminized concerns, anxieties, socialities, and labors of cis working-class women in each city in which she lives. The letter writer's vulnerability to sexual assault and its ruinous social effects rest on the pre-existing femininity that is then reinforced by these experiences. These details reveal a trans feminine life that does not conform to the sexological diagnostic narrative. These details show that her insecurity in the world is born of social factors that affect her as a trans woman, not personal confusion, psychic disconnect, or rejection of her body. She describes the experience of being a woman and among women. Cis women affirm her. During this time, Subject 13 reports that, "The dancers... accepted me just as nature made me" (91). In contrast, she feels distant from men: "I am not a friend to men. Conversations with women satisfy me more, and I am always envious of educated women, because I always look up to them.... For that reason I always have been an activist for equal rights" (93). Hirschfeld's text provides space for this narrative of trans femininity as an experience that grounds a relation to women and refuses connections with men, but such experiences never made their way into the sexological abstraction or the expert models of trans women that came after.

Her correspondence with Hirschfeld goes further to predict and affirm a trans sociality possible if "total freedom of dress" could allow "the effeminate people [to] connect with female society, just as the man-woman will befriend the so-called stronger sex" (85). Trans feminine and trans masculine people compose an ideal couple: "the woman-man will grow into the feminine and be attracted by the man-woman, because by nature both feel right for each other, he as a woman and she as a man" (85). Later, she "fell very much in love with a young woman of a manly type; however, she did not understand me and I could not fully accept her... she married another and is supposed to have never become happy" (91). In 1904, she advertised in a marriage magazine identifying as an "effeminate man" in search of "a manly woman" (92). Her ad states that she can "cook, sew, wash, [and] iron" and desires a partner to fulfill the opposite gendered tasks (92). She never found a long-term partner of the type she wanted: a "manly woman" who would wear men's clothes and affirm her role as the woman. She confirms the appeal of partnerships among trans people, an appeal based on the capacity of trans partners to affirm trans sex identities.

Hirschfeld learned from these stories. Many of the institute's priorities reflect the needs that the case studies articulate. Hirschfeld offered employment to trans women, agitated to overturn sodomy laws, and provided identity documents that allowed trans women to go out in public in clothes that reflected their sex identities with protection from police harassment.¹⁵ The institute was a vital center of trans sociality that provided space to foster the kind of relationships that the subjects of the case studies reported finding valuable. His writing, however, stays in the sexological mode. In Hirschfeld's analysis that follows these case studies, he writes that:

No matter how much transvestite men feel like women when dressed in women's clothing... they remain aware that in reality it is not so. To be sure, some do imagine—and if so, then the wish is the originator of the thought—that their skin is softer, their forms rounder, and their movements more gracious than are usual for men, but they know full well, and often are depressed by the fact that they do not physically belong to the desired sex.... (182)

Hirschfeld insists that the wish to be a woman is primary to the sense that one is a woman. In his analysis, “the wish is the originator of the thought” that one has a female body. This framing is not supported by many of the case studies that precede these observations, including those that this article has surveyed. Did Hirschfeld believe this or was such a framing a necessary pretext for offering genital surgeries and other gender-confirming health care? Was a debility or illness necessary in order for a doctor to make a case that his profession should offer a cure? In either case, this move from the case study reports to Hirschfeld's diagnostic conclusions is the historical locus of the folding in of trans women into medical logics that insist that they don't mean what they say. Trans women report a variety of accounts of their sex and identity. Hirschfeld cites these accounts as boiling down to the desire to change sex. The expert model offers services and legibility. However, it also requires that women concede to the story that science tells about their experience. In a parenthetical author's note in Case Three, Hirschfeld writes that “when [the subject's] observations are reproduced, they are given only as illustrations of the psychology of the person expressing them, whether or not the overall critical results agree with these statements” (28). This is the sexological method. It begins with an expert's idea of the concerns that trans life raises, and this understanding forms the questions that are directed at subjects. Their responses are then sorted through this original understanding, and points of information that contradict or depart from the original understanding are either assimilated via interpretation or ignored.

What do the case study subjects say about bodies, embodiment, and desire? They say that sex identity arises in a variety of ways that are not determined by assigned sex. They say affinities with others that develop based on a sense of shared sex experience are often a locus of sex identity. They say that labor is divided by gender and is therefore gendering; gendered labor both affirms gender identities that people may hold and is a means of enforcing gender identities that people do not hold. They say that vulnerability to sexual assault likewise hinges on perceived or enforced femininity and so is likewise gendering.

Popular understanding, medical providers, and many works of scholarship seek the meaning of trans feminine existence through taking for granted that trans people *cross-identify* or seek to *change* sex. This article has approached trans femininity historically so as to suggest that the figure at the center of this understanding has its origin in texts that efface the understanding of embodiment that trans women themselves provide. The women who reported their experiences don't report feeling trapped in their bodies, nor do they report feeling that their bodies,

as bodies, are irrelevant to their female sex experience. The case study subjects attend to the role that embodiment plays in the experience of being a woman. These bodies that experience work, desire, kinship, and sexualization are material bodies. These trans women's lives and words insist that, on the level of sensation, attraction, pain, and other bodily sensations, female embodiment is a significant affecting experience and it is not the experience only of women who were assigned female at birth. Likewise, as a document of lesbian feminist history, we observe that relationships between and among women have not always assumed cisness or recognized some unknowable gap between trans and cis experience. This is so far from Ulrich's invert as the explanation for desire between men. Indeed, Case Thirteen expresses not only lack of sexual desire for men, but an antipathy for men based not on a rejection of her own body or even her assigned sex, but rather based on her experience of being a trans woman under the conditions of heteropatriarchy. The men to whom she is "no friend" have nothing to do with her.

Notes

1. Each of these people has written with an assumption of authority about trans women. They argue that trans women are not real women, have not had the gendered and gendering experiences that distinguish cis women's experiences from those of cis men, and that trans women's gender expression capitulates to misogynist ideas about women. Janice Raymond's *The Transsexual Empire* (1979) and Germaine Greer's *The Female Eunuch* (1970) are foundational instances of this framework. Both writers have repeated these transmisogynist claims in public appearances in recent years. Elinor Burkett's June 6, 2015, *New York Times* article, "What Makes a Woman," which focuses these claims on Caitlin Jenner, shows us that this transmisogyny has permeated popular understanding of trans women. The peculiar thing about this lineage is that these writers don't know anything about trans women or trans feminine experience. They don't cite historical, experiential, or anthropological evidence to back up their claims about how trans women feel, experience the world, or affect other people's understanding of gender or womanhood. Each writer can make categorical claims about trans women because they approach trans women as a concept, a phenomenon, or a theoretical figure derived from the medical diagnostic for sex change. They position trans feminine life as something that one can be either for or against, that cis women can affirm or critique. This article contributes to efforts that have long been underway in the work of Emi Koyama, Susan Stryker, Reina Gossett, Edxie Betts, Janet Mock, and others to refuse the fetters placed on thought when the question of trans feminine life is posited as a question of whether or not trans women exist or deserve to exist. One of the most damaging myths that transmisogyny has propped itself on is the myth that this is a generational conflict, pitting elder lesbian feminists whose frameworks took shape through Women's Liberation after 1970 with younger queer and lesbian feminists who came of age in thought and politics after 1990. This article, which focuses on the experiences of lesbian trans women from the late nineteenth and early twentieth century, refuses to erase elder and ancestress trans women and the cis women who have seen, loved, desired, and supported their trans sisters and siblings. It refuses any categorical distinction between trans womanhood and lesbianism by simply noticing an archive of trans lesbian life and writing that we have access to, despite every historical force that occludes trans lesbianism and de incentivizes trans women from expressing and preserving the truth of their lives.

2. Throughout this article, I use both the term *trans woman* and the term *trans feminine*. There are two ways that these words work together. First, simply, trans woman is a noun that names people who are assigned male at birth but assert a female identity through direct identification as women. The latter is an adjective that refers to the social, cultural, political, and aesthetic practices that trans women have communally created. The use of the term trans feminine also acknowledges the fact that there are people who identify with that social, cultural, political, and aesthetic tradition without precisely or always identifying as women. This concept allows us to name a sisterhood and/or siblinghood between and among femme, feminine, and effeminate people who do not identify as women and trans women who do identify as women. This term also allows us to talk about historical accounts in terms that both acknowledge the practices of dress, speech, sociality, kinship, and labor that are common to trans feminine people, without having to assume that each of these historical actors identified as women at all times in their lives. So while many of the subjects of sexological case studies examined in this article identify quite clearly as women, the trans feminine fairies that George Chauncey describes in his social history of pre-WWII New York included those who did identify as women and those who did not use the term woman to describe their gender or experience.
3. See dalla Costa and James, Federici, and James.
4. See Davis, Glenn, and Roberts.
5. Krafft-Ebing uses a variety of terms that all contribute to the aggregate figure of trans femininity which the reader gleans from his text. These terms include “antipathic sexual instinct,” “psychical hermaphroditism,” and “inversion of the sexual instinct.” Krafft-Ebing also posits an essential link between sexual role and gender. So, his use of the “passive pederast” also contributes to his presentation of trans femininity. *Psychopathia Sexualis* also names the most extreme degree of sexual inversion as involving a measure of physical hermaphroditism (258).
6. This is a brief survey of the most influential sexological sources. The 1880s–1910s saw the blossoming of sexology and the proliferation of medical sources that detailed trans feminine life and attempted to account for the meaning of trans people’s existence vis-à-vis the boundaries of sexuality and sex.
7. Two recent books that focus on Hirschfeld are Ralf Doer’s *Magnus Hirschfeld: Origins of the Gay Liberation Movement* (NYU, 2014) and Elena Mancini’s *Magnus Hirschfeld and the Quest for Sexual Freedom: A History of the First International Sexual Freedom Movement* (Palgrave Macmillan 2010). These titles reflect his historical status as a trailblazer and a freedom fighter. His appearance in the Weimar flashback scenes of Episodes 8 and 9 of the Amazon Original show *Transparent* presents him as a supportive ally to the trans women characters.
8. A similar theory was forwarded by Hirschfeld’s supporter Havelock Ellis, the British sexologist (Beachy 170).
9. In the 1910s and ’20s, men begin to use a third term, “queer,” to signal their male object choice and to distinguish themselves from the fairies, who were primarily defined by female gender presentation. This project of distinguishing gay men from trans feminine people involved a class-based trans misogyny: “middle-class queers blamed anti-gay hostility on the failure of fairies to abide by straight middle-class conventions of decorum in their dress and style” (105).
10. See Faderman and Timmons (30–31) for reporting from Los Angeles; Chapter One of Chauncey for New York; and Houlbrook (Chapter 1) for London. For a geographically broader and less detailed account of female impersonation in the period, see Bullough and Bullough (232–245). For a wonderful account of sissy men and other trans feminine and queer gender expression in blues, vaudeville, and gay club culture in Chicago and other

cities, see De La Croix (97–160). For a succinct and wide-ranging account of trans history, see Stryker.

11. Such unions should be understood as part of the lesbian history that Sharon Marcus documents among cis women in the nineteenth century.
12. I use the term “personal” here to highlight the point that Subject Three, like many trans people, foregrounded a desire for a change in the way that they were perceived and treated and did not emphasize a desire for bodily and psychological change in themselves. This perspective operated in opposition to the sexological narrative that insisted that the feeling of being “trapped in the wrong body” was the universal and defining self-concept of all trans people.
13. See Sautman for more on working-class lesbian culture in France in the late nineteenth and early twentieth century.
14. Subject 13’s experience confirms the association that cis society makes between trans women and sex work. She also demonstrates that trans status is used as a tool to coerce trans women into sexual relationships. Subject 13 offers information that reveals the structural role that sexual violence plays in the lives of all, who suffer ruined reputations when they are sexually assaulted, while acknowledging that trans status makes women more vulnerable to sexual violence.
15. See Meyerowitz, 20–30.

Notes on contributor

Emma Heaney is an Assistant Professor of English at William Paterson University. Her first book is *The New Woman: Literary Modernism, Queer Theory, and the Trans Feminine Allegory* (Northwestern University Press, 2017).

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