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Passing and Stigma Management: The Case of the Transsexual

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The nature of the transsexual's stigma is such that she can pass as a natural female with little difficulty if she chooses to. At the same time, transsexuals do not once and for all become women after their conversion operation. Their ambiguous gender implies at least a double identity: some of the feminized transsexual's social circles remain associated with her former (male) gender, while some center around her new identity. Thus, it is more accurate to say that the transsexual is ongoingly passing than that she has passed. This led to the formulation of two hypotheses: (1) transsexuals compartmentalize their social circles to a greater extent than normals, and (2) transsexuals experience greater incompatibility of their social circles than normals. To operationalize social circles, the family and present friends were chosen. In terms of this operationalization, the findings support the first hypothesis but not the second. It is argued that transsexuals do not experience unusual incompatibility between family and friends because they either minimize contacts with the former, or do so with the latter, or segregate the two. In the final analysis, the transsexual's double identity is not simply a double gender identity, but also the product of participation in the radically different cultures and lifestyles of her rural background on the one hand and her present urban underworld environment on the other.

IN ITS MOST GENERAL sociological sense, the term stigma can be used to refer to any attribute that is deeply discrediting and incongruous with our stereotype of what a given type of individual should be (Goffman, 1963).[1] Goffman has categorized such discrediting attributes into three classes: physical deformities, blemishes of individual character inferred from a record (of, say, mental disorder or convictions), and tribal stigmas. Sociologists have studied each of these types with an eye on stigma management. For example, research has been done on the management of physical handicap (Davis, 1961), mental illness (Goffman, 1961), and race (Myrdal, 1962).

An exceedingly rare attribute that falls somewhere between the first and the second type of stigma is *sex change*.[2] Having one's sex changed[3] differentiates a person from nearly everyone else in a very simple and very fundamental way. Hence, that feature lends itself as a sociological independent variable with great potential.

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[1] There is a complex and overlapping relationship between the terms stigma and deviance. A widely used definition of deviance (Lemert, 1951) was borrowed by Davis (1961) to mean deviance *and* stigma, whereupon Goffman (1963) distilled the stigma concept.

[2] Since there are approximately two thousand sex changes in the United States, the probability that the next American one meets will be a sex change is one in one-hundred thousand.

[3] I have used the term sex change rather than transsexual thus far to emphasize the fact that this study compares normals with *feminized*, i.e., *surgically already converted* transsexuals, not transvestites who hope to undergo sex surgery in the future. With this in mind, sex change and transsexual will now be used interchangeably.

In the present study, transsexualism—operationally defined as having *de facto* undergone the surgical sex change—is examined in the context of stigma management. Transsexuals and "normals" are compared in terms of their management of interaction with a number of different groups. In this process, Goffman's typology becomes less important than the distinction between those stigmas that can hardly be concealed (e.g., race) and those than can (e.g., most non-physical stigmas). Transsexualism, while based on a physical operation, belongs to the latter type.

The data and the argument lead to the conclusion that transsexuals compartmentalize their social lives, thereby avoiding the potential role conflicts resulting from their stigmatized identity.

The findings presented in this paper are part of a larger study comparing males, females, and transsexuals along a large number of variables, and focusing also on the transsexual phenomenon.[4]

Theory

Goffman (1963) distinguishes not only between three types of stigma, but also between two ways in which the stigma may be carried: when an individual's stigma is (or is assumed to be) known by those present, he and his stigma are *discredited.* When the stigma is (or is assumed to be) neither known nor immediately perceivable, it is *discreditable.* It follows that stigma and stigma-bearer are more likely to be discreditable only when the stigma is of a concealable, non-physical nature. For example, in most face-to-face situations blindness will lead to discredited status, whereas homosexuality may be merely discreditable.

When stigma and stigma-bearer are discreditable, passing is in effect taking place. Passing is undertaken by light-skinned Negroes (Myrdal, 1962), homosexuals (Leznoff and Westley, 1956), and probably by some members of any category whose stigma is not immediately apparent. Transsexualism belongs to such a category. The clinical (Benjamin, 1966; Stoller, 1968), sociological (Driscoll, 1971; Garfinkel, 1967), and popular (Jorgensen, 1968; Vidal, 1968) literature on transsexuals documents the fact that surgically feminized transsexuals are oftentimes such feminine, attractive, and natural-looking women that identity detection is unlikely. Stoller and Garfinkel, for example, remained unaware during their entire five-year study of Agnes that she had been born a natural boy with no hermaphroditic or any other physiological deviation (Garfinkel, 1967).

My own data on feminized transsexuals corroborate this: their secondary

[4] In 1967, the University of Minnesota embarked on a project that would, during the following two years, involve the sex conversion of 26 transsexuals (all from male to female). Over 800 applications were received (90 percent male), mostly from the Minneapolis-Saint Paul area. A Gender Identity Committee headed by Drs. Donald Hastings and Starke R. Hathaway, of the University of Minnesota Department of Psychiatry, screened the applicants. On the basis of the results of projective tests (MMPI) and of known criminal and psychiatric records, the 26 applicants most likely to make a good post-operative adjustment were selected. The present study is based on post-operative interviews with 17 of these individuals. I am grateful to Drs. Hastings and Hathaway for enabling me to fit a sociological study into the transsexual project.

female sex characteristics are well developed, thanks to treatment with silicones, electrolysis, and estrogens and other hormones. Skillful application of make-up and attire finish the job. Several among these respondents operate *incognito* as prostitutes or as nightclub strippers. Most interesting of all, of the three who have become married since the sex conversion, one has not told her husband. Apparently not even the sex act betrays her former gender. A majority of the subjects reported that their newly created artificial vagina functions to the satisfaction of both sex participants. Thus, the transsexual's stigma does not have to lead to discredited status: it may be, and often is, merely discreditable. Since there are no physiological obstacles to passing, the transsexual can be expected to use status passage as a method of stigma management.

Sociologists have generally treated passing and status passage as a one-shot affair. That is, an individual's passage from one life stage to another (Erickson, 1954), from one ethnic status to another (Myrdal, 1962), or from one organizational or occupational position to another (Strauss, 1959) has generally been viewed as a distinct, one-time biographical occurrence, an occurrence, incidentally, whose ritual components have received much attention (Durkheim, 1954; Goffman, 1963; Strauss, 1959; Van Gennep, 1909). Whether the nature of the transsexual's status passage makes her unique in this respect or not (and it is doubtful that it does), the important realization is that her passage is not a one-shot event, occurring at and around the time of her operation, but it is a *continuing process.* As Garfinkel (1967) phrases it, the transsexual has not passed; she is, at any given time, ongoingly passing.

The ongoing nature of the transsexual's status passage implies that she preserves *both* male and female gender identity. However, she is not simultaneously a man and a woman: in one group she will be seen as a female, in another as a former male. It is possible to say that the transsexual's status passage remains an ongoing process because she continues to interact with essentially two types of groups: those who do not know her former gender and who therefore see her as a natural female, and those who do know and who see her as a former male.[5] The transsexual's groups of interaction will often also be her reference groups, and this may have important implications for her self-concept (Shibutani, 1955). In order for this type of status passage to be successful, the transsexual must compartmentalize her life, hermetically segregating those who know from those who do not.

These, then, were the theoretical considerations that led to the questions which this paper attempts to answer. These questions, essentially, are twofold: (1) does the transsexual indeed compartmentalize her life in the manner suggested above? and (2) do conflicts arise in the transsexual's life as a result of the incompatibility of her two categories of interaction groups?

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[5] It may be argued that many of us probably fall in a third category—those who see the feminized transsexual as a *new female.* However, such a conception of the transsexual is merely the tolerant, liberal version of viewing her as a (former) male. Since both these conceptions deny the transsexual *natural* femininity, they boil down to the same thing. I contend that acceptance of the transsexual as a non-stigmatized individual only takes place when she is granted the status of natural female, i.e., in the presence of those who do not know.

Method

The theoretical considerations just discussed led to the formulation of the following two hypotheses:

(1) Other things being equal, transsexuals are more likely to compartmentalize the different groups in which they interact than do normals. This hypothesis follows from the transsexual's apparent need to segregate those associated with her former gender identity from those associated with her new gender.

(2) Other things being equal, transsexuals are more likely to experience incompatibility of the various groups with which they interact than are normals. Again, the logical argument is that since some of the transsexuals' relations see her as a (former) male and some see her as a female, simultaneous interaction with both is problematic.

The sample on which the two hypotheses were tested consists of 51 individuals: 17 transsexuals (the "experimental" group), 17 males and 17 females (the control groups). Transsexuals, as stated, were defined simply as individuals who had undergone sex change surgery. These individuals were interviewed in 1969 at the University of Minnesota, between 1 and 18 months after their conversion operations.

The selection of the control groups, who were interviewed at about the same time, was as follows: a sample of about 150 males and females was selected randomly from the Minneapolis-Saint Paul city directories (most transsexuals came from the Twin Cities and surrounding area). From this group 17 males and 17 females were selected whose distributions along 7 control variables matched the transsexuals most closely. The control variables were education, age, socioeconomic status, marital status, religion, birthplace, and size of birthplace, i.e., the variables most likely to interfere with the relationships under investigation. This matching procedure was an effort to take care of the *ceteris paribus* clause in the two hypotheses.

For the operationalization of the two hypotheses, it was felt that the best example of a group that views the transsexual as a former male would be the family, while a good example of a group that does not necessarily do so would be a new circle of friends. Therefore the interviews with all respondents included two open-ended questions about family and friends. The respondents were asked, among other things, whether they mixed family with friends, and whether they experienced conflicting pressures and demands from these two directions.

Findings and Discussion

The answers to the two questions were codified, and it was possible to dichotomize them into (more or less) positive and negative answers. In Table 1, normals and transsexuals are compared in terms of their responses to the first question ("Does your family know any of your present friends?"). Table 2 compares the answers of normals and transsexuals to the second question ("Do you ever feel torn between the demands of your friends and those of your family?").

Statistically, the data lend significant support to the first hypothesis (Table 1) but not to the second (Table 2). A number of alternative statistical procedures were attempted, but none yielded higher statistical values than those of Tables

TABLE 1. "Does your family know any of your present friends?"

	Yes	No (or hardly)	Total
Normals	28	6	34
Transsexuals	6	11	17
Total	34	17	51

Chi Square = 11.1
df = 1
$p < .001$

TABLE 2. "Do you ever feel torn between the demands of your friends and those of your family?"

	Yes	No	Total
Normals	2	32	34
Transsexuals	2	15	17
Total	4	47	51

Chi Square = .6
df = 1
Not significant

1 and 2. For example, it was found that males and females do not differ significantly along these two variables (for the first one, a comparison of males and females produced a Chi Square of .8, which could occur by chance nearly half the time, and on the second variable males and females are identical), thus justifying lumping them together as "normals" and jointly contrasting them with transsexuals.

The first hypothesis may be interpreted to mean that transsexuals indeed segregate their social circles to a greater extent than normals. This is due to the fact that one circle—the family—is primarily associated with the transsexual's past whereas another—the present friends—centers around her new gender identity.

If it is true, as Table 1 suggests, that transsexuals see a need to segregate their new friends from their families because they are not the same person for both social circles, why then is the "incompatibility" hypothesis (Table 2) not supported?

The answer to this lies in the realization that it is precisely through compartmentalization (Table 1) that incompatibility and conflicting demands (Table 2) are avoided! The case material gathered during the interviews indicates that the transsexual's adjustment to her double identity and double social life can take one of three forms: she may minimize contacts with the outside world and retreat into her family; she may minimize contacts with the family and maximize those with her new friends; or finally she may have adequate but sharply segregated relationships with both family and new friends. Let me document each of these possibilities.

In the first case, the transsexual lives a fairly sheltered life among her family, seeing few outsiders. In such cases, conflicts between the demands of family and those of friends can hardly be an issue since there simply are no friends. Adelaide, when asked how she gets along with her family, typified this position:

My relationship with my family is much closer now. Before, I was alienated . . . My parents are very accepting of the situation. Just fine. They have a little trouble calling me by my first name (laughs), and pronouns are difficult. The new situation is hardest on my mother. She prefers men. Superficially everyone likes it, but they are partial towards boys in my family . . . my mother is uncomfortable with me. My father is fine . . . I have two sisters and one brother, they are all nice to me. The nicest thing my father said was when I told my parents of my plans to go through with it—my mother just sat silently—he said: So what's the big deal? You can always come home!

And so, when asked whether she ever felt torn between the demands of her friends and those of her family, she replied: "No, my family always comes first, my friends second."

The incompatibility between the transsexual's family and her circle of friends is solved more frequently through the second possibility, i.e., in favor of the friends. Many transsexuals have had to minimize their contacts with their families since the conversion operation. In some cases contacts have been severed altogether, not infrequently because the family has (allegedly) repudiated the transsexual. Monique, who claims to have been told by her parents that her home town is now off-limits, refers to them as "just plain ignorant people." Therefore, when asked about possible conflicting demands by friends and family, she explains that this is no problem since she is no longer in contact with her family.

Elizabeth, another transsexual, gives a similar reply to that question: "No, I just don't associate with my family anymore. There are no demands from my family."

Sylvia provides yet another example: "Everyone in the family accepts it," she says sadly, "except my father. He doesn't at all. He doesn't want to have anything to do with me at all."

Sylvia has not been back home to South Dakota since her conversion operation in March, 1968. I asked her whether she had seen any of her relatives. Her reply: "No, I haven't seen them, not even my mother."

"How about your brothers and sisters?" I continued.

Sylvia: "I am in contact with my sisters. Letters, telephone. But the family doesn't want me to come back."

Prof. K: "Does that bother you much?"

Sylvia: "Oh, yes . . ."

But even when there are residual contacts with the family, friends—particularly sex partners—take precedence. Lois, for example, when asked whether she feels conflict between the demands of friends and family, replies forcefully: "Yes, all the time. I don't get along with my parents, and yet I want to. I want to make a better life for myself so they'll accept me, but my boyfriend and them never get along. I pay more attention to my boyfriend than to them . . ."

The third approach—the total segregation of friends from family—is illus-

trated by Maryjo. In answer to still the same question, she says: "No problem. Probably because of the type of life I lead, because I'm in show business and the type of people, I don't mix my family with them."

Adelaide's reply is even more to the point: "This is never a problem," she says, "because I keep them quite separate."

Thus the incompatibility between family and circle of friends is solved in one of three ways: by opting for the family, by choosing friends only, or by segregating the two. In any event, transsexuals rarely experience continuing conflicting demands from these two directions.

Concluding Comments

I have argued in this paper that transsexuals compartmentalize their social circles to a greater extent than normals (hypothesis 1) and that by doing so they seem to avoid some of the conflicting pressures that might otherwise arise from their double identity (hypothesis 2). This was found to be the case at least in the transsexual's relationships with her family and her friends.

But what is the exact nature of the transsexual's double identity? In the theoretical considerations discussed earlier it was assumed that this double identity was simply a double *gender* identity, and that the transsexual's ongoing status passage was sort of a stepping back and forth from situations in which she is known as a (natural) female to situations in which she is known as a (former) male.

This is not realistic. While it is true that many people who meet the transsexual after her conversion operation do not know of it (including, sometimes, her new employer, new peers, new clients, and in one case even her new husband), a majority of the friends frequented by the transsexual *do* know of it. Indeed, several transsexuals admitted purposely choosing to associate with people who know rather than moving out into new circles and passing altogether. As Maryjo said:

> I realize this sounds funny, I should be around more people who don't know, but I guess it's a fear right now, maybe because it's still too new to be around people who don't know . . . I have to disclose it when someone really puts it on me, like if they find out from someone else and keep questioning me.

The following statement, by Sylvia, shows why transsexuals are often reluctant to pass altogether: ". . . if I'm going with somebody, I feel that I should tell rather than have him hear it from someone else!"

Thus, it seems that transsexuals opt, at least for the time being,[6] for stigma management and the ensuing risks of ostracism and rejection, rather than the constant anxiety that would come from, as one of them phrased it, "being fraudulent and later on being found out." But it is important to keep in mind

[6] The data indicate that the longer ago a transsexual has been feminized, the fewer people in her environment who know about it. The sample was divided into two groups: those with many friends who know, and those with few friends who know. The average length of time since the conversion operation for the first group was 8 months; for the second group, it was 11 months. Passing, then, is more likely with time.

that this is an option, for there is no doubt that several transsexuals *could* pass as natural females without difficulty.[7]

If most of the transsexuals' present friends do know, what then is the nature of the status passage documented in this paper? It seems that the transsexual's family and friends are incompatible, not necessarily because to the family she is still a (former) male[8] and to the friends she is a (natural) female, but because of the entirely different cultures and lifestyles that the two represent: a majority of transsexuals in this study come from rural, Protestant, (lower) middle-class, upper-Midwestern families. A majority among them now belong to an urban subculture that centers around gay bars, strip joints, and prositution. Thus the transsexual's status passage does indeed imply a double identity, but not necessarily simply a double gender identity. Rather, it represents a transition from adolescent life in a smalltown family to night life in the urban underworld. At the same time, it is true that the family remains associated with the transsexual's former male identity, while in the city she increasingly interacts as a female.

[7] In this respect, transsexuals divide into two categories: a majority are familiar with Christine Jorgensen's success story and see advantage in the commercial exploitation of the newly acquired femininity. These are the individuals who operate as prostitutes or as strippers, sometimes advertising themselves as sex changes. They may be said to follow the Jorgensen model, in the sense that their sex change, and often *publicity about it*, are seen as the key to success. A minority, however, seem to make an all-out effort to do precisely the opposite, i.e., to conceal the sex change, to pass, hopefully to marry, and to establish middle-class respectability. This group may be said to follow the housewife model.

[8] It is clear that the family often has difficulty adjusting to the transsexual's new gender. Reference has already been made to cases in which the transsexual was allegedly "disowned" by her parents subsequent to the operation. In addition, some transsexuals' parents were interviewed personally. Connie's father, for example, referred to her as "that no good punk." Another irate father accused "the people down at the University" of having turned his son into a "freak." For these parents, the "child" is discredited. Thus the parental circle has generally remained associated with the transsexual's original gender identity.

REFERENCES

Benjamin, Harry
1966 The Transsexual Phenomenon. New York: Julian Press.
1964 "Nature and management of transsexualism, with a report on 31 operated cases." Western Journal of Surgery, Obstetrics and Gynecology 72 (March-April) :105-111.
Davis, F.
1961 "Deviance disavowal: the management of strained interaction by the visibly handicapped." Social Problems 9 (Fall) :120-132.
Driscoll, J. P.
1971 "Transsexuals." Transaction 8 (March-April). Special Supplement:28-37, 66, 68.
Durkheim, Emile
1954 The Elementary Forms of the Religious Life. Glencoe, Ill.: The Free Press.
Erikson, Erik H.
1954 "Identity and totality: psychoanalytic observations on the problem of youth." Human Development Bulletin (Fifth Annual Symposium, Committee on Human Development of the University of Chicago).
Garfinkel, Harold
1967 Studies in Ethnomethodology. Englewood Cliffs, N.J.: Prentice Hall.
Goffman, Erving
1963 Stigma: Notes on the Management of Spoiled Identity. Englewood Cliffs, N.J.: Prentice Hall.
1961 Asylums. Garden City, N.Y.: Doubleday Anchor.
Jorgensen, Christine
1968 A Personal Autobiography. New York: Bantam Books.
Lemert, Edwin M.
1951 Social Pathology, New York: McGraw-Hill.
Leznoff, M and W. A. Westley
1956 "The homosexual community." Social Problems 3 (April) :257-263.
Myrdal, Gunnar
1962 An American Dilemma. New York: Harper and Row.
Pauly, I. B.
1965 "Male psychosexual inversion: transsexualism." Archives of General Psychiatry 13 (February) :172-181.
Shibutani, T.
1955 "Reference groups as perspectives." American Journal of Sociology 60 (July) :562-569.
Stoller, Robert J.
1968 Sex and Gender: On the Development of Masculinity and Femininity. New York: Science House.
Strauss, Anselm L.
1959 Mirrors and Masks. Glencoe, Ill.: The Free Press.
Van Gennep, Arnold
1909 Les Rites de Passage. Paris: E. Nourry.
Vidal, Gore
1968 Myra Breckenridge. New York: Bantam Books.
Walinder, J.
1967 Transsexualism: A Study of Forty-Three Cases. Goteborg: Scandinavian University Books.
Worden, F. G. and J. T. Marsh
1955 "Psychological factors in men seeking sex transformation." Journal of the American Medical Association 157 (April 9) :1292-1298.