

# Trans knowledge

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Despite the growing popularity of television documentaries featuring transgender subjects, very little critical attention has been given to them. This article investigates 'trans visibility' and how visual narratives and the knowledge produced by them contribute to the ways in which trans subjects form themselves between knowledge products. Such documentaries form a notably 'popular' route to obtaining trans knowledge – what it means to be trans or what trans is.

**Keywords:** gender identity; transgender; trans; trans visibility; gender; media; culture; psychodynamics

## Trans visibility

What happens when we see trans? What trans do we see? And what does seeing trans do? These questions raise for me the political and aesthetic aspects of the visibility of trans subjectivities, and place the visual at the heart of my investigation – an epistemology of being trans or, rather, what I call 'trans knowledge'. The academic field of Visual Culture is then crucial to the production and productivity of trans knowledge, and I am specifically interested in how trans knowledge is produced as it utilizes visual means as part of its performance. In 'Studying Visual Culture', Rogoff writes of 'opening up the field of vision as an arena in which cultural meanings get constituted' (Rogoff, 2002, p. 24), and so bringing certain objects into view can offer different approaches to epistemological projects.

Indeed, the realm of the visual is integral to *being* trans. The photograph and the moving image are crucial media for exploring trans subjectivities and trans knowledge, and for contributing to the field of Transgender Studies. The stories that abound in an array of formats such as paperbacks, broadsheets and tabloid newspapers, magazines, grassroots and community projects, all routinely feature the photographed or pictured trans subject. We can typically think of the 'before and after' shots, which work to affectively draw in the reader and offer a visceral narrative of 'reality' which often foregrounds bodily adaptation, along with questions and notions of identity and selfhood.

Certainly, visual documenting through the use of photographs and video recording is a common practice of many trans people. Surgical procedures and the effects of hormones are large enough events in a trans person's life to warrant the same attention and memento-gathering as other life rituals. Similarly, experimenting with dress and personas is often captured by the camera and shared with online networks. Indeed,

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photographs and video diaries chart the change and the rite of passage which transitioning itself offers. This culture of image-based representations among trans communities appeals to those, artists and non-artists alike, who wish to go further with their stories and create thicker descriptions of their experiences. The growth of YouTube, tumblr, Facebook and a range of other social networking sites has created a global platform for trans people to share these stories and visual materials with a growing and interested audience. However, despite this vast array of visually produced trans knowledge, it is important perhaps to interrogate what Rogoff calls the 'psycho dynamics of spectatorship' and the 'power relations within culture', the values (aesthetic and other) as well as – and most importantly for me here – Roland Barthes' description of interdisciplinarity, which is not as surrounding a chosen object with numerous modes of scientific inquiry, but rather as a constitution of a new object of knowledge. Rogoff seizes a particular opportunity to think politically and critically through the realm of the visual, proposing that we must ask: 'Who is privileged within the regime of specularity?' As Rogoff makes clear, it is the questions that are integral to the knowledge production rather than the objects or materialities themselves.

Rogoff asks, 'In what political discourses can we understand looking and returning the gaze as an act of political resistance?' (Rogoff 2002, p. 16) As I wish to consider the visibility of trans knowledge, I do so within circuits of distribution that we can identify particularly as 'popular' and 'mainstream' – namely documentaries that are broadcast on television in the UK and feature trans people. And like Rogoff, here I ask: 'What political projects emerge as a result of a trans person, or a collective of trans people, viewing popular TV documentaries that feature trans people?' Consequently I ask: 'What kind of politics emerges when such viewing is not particularly taken into consideration in the making of such films?' That is to say, these films are not for 'us' and yet 'we' view them nonetheless. In order to offer some way in to the complexities of such viewership, I wish to offer an example of my own consumption of a TV documentary broadcast in the late 1990s.

### Oh no! I've only just realized I've gone and got the 'wrong body'

The Decision was a series of documentaries featuring various themes around medical and ethical dilemmas. Televised in 1996 for Channel 4 Television, one of the programmes featured was *The Wrong Body* (Oliver Morse, UK, 1996, Channel 4). The film follows a group of trans men living in England and undergoing or investigating gender reassignment. I, like many people across the nation, sat down to watch. I did this without any forethought or planning; it just happened to be on.<sup>2</sup> It was the first documentary featuring trans men (as opposed to trans women or non-binary people) to be broadcast on terrestrial television.<sup>3</sup> At this point in my life – I was 21 years old – I had no idea that I was (or would become) a trans man myself. I found the documentary compelling as the idea of female-bodied people undergoing gender reassignment and living as men was new to me. In particular it was the story and personality of 13-year-old Fred, who featured in *The Wrong Body*, that impressed me and resonated with me most. Although I had been mostly boyish growing up, I did not have the kind of conviction of being a boy that Fred seemed to display in this documentary. He presented as strong-minded and extremely certain of his gender – perhaps this was necessary in order to convince his family and doctors.

Just moments into the documentary we see Fred's sister giving him a haircut using barber clippers. The sister shrieks with excitement, seemingly because the haircut is so short (and therefore extremely boyish). She calls him 'a nutter' and the voiceover begins: 'Many children have temporary fantasies about belonging to the opposite sex but one in 17,000 from first consciousness are certain that nature has played a cruel trick. They are trapped in the wrong body'.

Everyday yet pertinent acts, such as cutting hair, are performances of gender that contribute to visual narratives of subject production. Watching the scene, I remembered my own complex and emotional lived experience when it came to getting a haircut. As a child I always wanted it cut shorter and yet I knew that this would lead to a variety of negative interactions with other children and adults who would signal to me that *looking like* a boy while *being* a girl was not the done thing. In contrast to these everyday performances, the voiceover (with its authoritative tone) introduces to its viewers (including me) the phenomenon of 'transsexualism', the 'diagnosis' of 'Gender Dysphoria' and 'wrong body' discourse. From this point onward, the voiceover continued to distinguish the 'temporary fantasy' from the real, 'true' and 'genuine' transsexual. The question I asked while watching this documentary was, which one was I?

The Wrong Body became one among a host of other products (performances, films, articles, photographs, scholarly writings and medical literature) that at the time formed my knowledge and offered me reference points as I navigated and negotiated my own being trans. At that time I was living as a lesbian and studying art in East London. Feminism, Lesbian and Gay Studies, and Postcolonial Studies were becoming rich and exciting ways for me to explore the questions I had about gender, identity and selfhood. It would not be until eight years later that I would find myself discussing my own gender identity with doctors at Gender Identity Clinics and journeying towards living as a man. I began studying for a postgraduate degree in Visual Cultures, and I became interested in theories of performativity, Queer Theory and 'new Gender Politics'. While I was engaging with these academic fields and discourses at the turn of the twenty-first century, a growing number of documentaries featuring trans people were appearing on television and being watched by millions across the UK.

The scholarly writings and practices that were enabling me to form ideas and make sense of my own subjectivity on the whole spoke critically of 'wrong body' discourse. Nonetheless, the TV documentaries – along with (auto)biographies, newspaper and magazine articles and other items of popular culture – continued to churn out the trope of *being trapped in the wrong body*. In her article 'The Role of Medicine in the (Trans)Formation of "Wrong" Bodies', Nikki Sullivan considers how the rhetoric of being in or having the *wrong body* has 'worked' for transsexual sensibilities and subjectivities (Sullivan, 2008, p. 105). Indeed, she quotes Prosser (1998) and Wilton (2000) to explain that the 'wrong' body has 'become the crux of an authenticating transsexual rhetoric' (Prosser, 1998, p. 68) whose 'narrativization ... posits a distinction between mind and body, and presupposes a self which, while "invisible and unquantifiable is claimed as the authentic core of be-ing" (Wilton, 2000, p. 241)' (Sullivan, 2008, p. 107).

In the TV documentary *The Wrong Body*, and particularly through Fred's story, distinctions between sex and gender are presented as more historically contingent mind/body splits, where sex is an aspect of the body and gender is in the mind (Butler, 1991, 1993). Fred's mind (and therefore gender) presents itself as secure, authentic and fixed in order to differentiate itself from a 'fantastical whim in childhood'. Sullivan states, and quotes Jordan (2004):

As the work of writers such as Sandy Stone has made clear, such a distinction has led to the demand for transsexuals to prove that their gender 'outweighs' their sex. Those seeking surgery have been required to express the 'wrong body in the right way', that is, to articulate a 'wrong body in a right mind' (Jordan, 2004, 339). (Sullivan, 2008, p. 110)

Moreover, showing that Fred has the wrong body is brought about through the film-maker's presentation of Fred's gendered behaviour, interests and acts. That is, the documentary works to *show us* Fred's mind. We see Fred shooting cans with a rifle, playing basketball, drumming and attending to his animals, as well as negotiating school uniform policy, vehemently insisting that he wears trousers and not a skirt. Such gender performances are rather simply put, and these tropes, no matter how stereotypical, work to produce authentic essential subjectivities.

Furthermore, through the interweaving and textual framing of various authoritative voices and the stories of the trans subjects and their families, *The Wrong Body* constructs knowledge that is necessarily steeped in a scientific medical discourse. However, presentation of the details of such scientific findings within the documentary is not deemed palatable to the mainstream viewer. Abstract explanations of diseases, conditions and illnesses do not make for good television. As José Van Dijck asserts, 'Paramount to the success of these programs is their human interest angle' (Van Dijck, 2002, p. 549).

In the documentary, Fred's youthfulness adds to this human angle as it presents Gender Identity Disorder as a medical condition with which one is born, implying that transsexuals are innocent victims of their biological make-up. Sue Foley, Fred's mother, offers a powerful testimony:

I was tucking her [Fred] in one night and I tried to get her to talk about it but she really couldn't. It caused her enormous distress but I needed to know and she was crying and she said, 'But mum I don't want to live ...'. Now when you have a seven or eight-year-old saying that, whether it's your child or not, you are shaken to the core.

### She continues:

The connotation or the interpretation that you initially put on it, is that it's to do with sex and you think how can this involve a child? And the learning curve is that it has nothing to do with sexuality, or sex, it's actually gender, which is the brain.

Through this health documentary, the viewer comes to an understanding of what it means to be trans by witnessing the 'lay' knowledge that Foley has previously acquired (presumably from specialists within the medical profession) (see Hodgetts & Chamberlain, 1999). The viewer's own understanding comes from the relaying of such medical knowledge ('gender, which is the brain'), performed here through the subjectivities of 'Mother' and 'ordinary person', and held within the emotive scenario of a trans person's brush with death (and a child's at that), as he expresses a desire not to live.

It is then the lived experience of going through the medical processes that entices the viewer. Moreover, these lived experiences are not presented as critical of the medical knowledge that is laid out in this documentary and others. On the contrary, they endorse it. The trans subjects featured are not asked for, or at least do not speak of, their own reflections of their 'condition'. There is no reflection upon why the trans people believe they are trans. The trans subject simply describes to the

viewer how they feel, as they are called on to perform their gendered selves within their everyday lives. The patient or trans subject is cast as an ordinary person who embodies the diagnosis and medical knowledge, absorbs and relays it through personal testimony and locatable (perhaps stereotypical) gendered acts. At the same time, such documentaries, which re-inscribe being trans as a medical matter, legitimize medical institutes' and practitioners' intervention in and surveillance of the trans body (indeed, all bodies), and simultaneously justify the resources attributed to it.

TV documentaries that feature trans people often capture the process of psychiatric assessment, diagnosis and medical intervention. It is the psychiatrists and psychologists within Gender Identity Clinics and Gender Identity Development Services who are tasked with assessing and diagnosing Gender Identity Disorder, or what is now called Gender Dysphoria. In a scene at the Portman Clinic, Fred, his mother and his stepfather sit with consultant child and adolescent psychiatrist Dr Domenico di Ceglie and another psychiatrist from the clinic. In a discussion about how one perceives oneself, Di Ceglie uses an analogy of an English boy growing up in France who decides to call himself French. The suggestion is that despite all the French acts the boy may carry out, he will always be English. In response, Fred says: 'It's not the same because he wants to be, but isn't. But I am'. This strong and confident retort marks a distinction between a desire to be and being itself. The latter sees gender (his own gender identity and gender more broadly) as prior, fixed and already there – 'I am' – and thus negates a desire to be. It negates a model of becoming.

Fred's firmness of *being* comes from a persistent querying throughout his life around his gender identity as different to his assigned sex. In order *to really be a boy* he must perform a self that is authentically male and, moreover, his psychiatrists and psychologists must believe this authenticity. From this, Fred's opportunities open up to the various available procedures, such as hormone therapy and surgical intervention, as well as to the legitimacy in his self-identified gender. The documentary captures and frames the transsexual subjects as they are validated, having gone through the various procedures and rituals carried out by the medical practice of Gender Identity Clinics.

Such documentaries themselves work as a legitimizing process as they call on similar criteria – namely, adherence to an essentialized, fixed and permanent identity that is authentically either 'male' or 'female'. In order to do this, they often draw on a performance of stereotypical codes of gendered behaviour. In *The Wrong Body*, for instance, Fred shows resolve, conviction and determination concerning his own maleness through interviews with him and his parents, as well as when appearing in front of the psychiatric team. Fred tells stories that demonstrate that he has *always felt this way*, and he looks to convince the psychiatrists (and the viewers at home) that he wishes to live permanently in his self-identified gender role. As the viewers witness such performances, they also collectively legitimize and make legible for themselves what it means to be trans.

Documentaries that are distributed to a mainstream audience via UK TV channels no doubt set out to achieve particular mainstream ends. Trans subjectivities and their visual narratives within mainstream documentaries reinforce hetero-gender norms and have, on the whole, assimilationist overtones. However, documentaries that feature trans people are also watched by trans people themselves, and consequently the impact of such visual narratives also has a bearing on how trans viewers come to know themselves. I have located my own subject formation, in the first instance at

least, in critical opposition to the knowledge presented in the documentary *The Wrong Body* (through its performances of fixed, essentialized, gendered selfhood) as regards *what it means to be trans*. In fact, it is with this criticality, achieved through viewing such TV documentaries, that I form my sense of being trans. In addition, alongside these TV documentaries, I continue to look for and consume contrasting knowledge products that together produce my own trans knowledge.

Trans knowledge is gained through a host of knowledge products – films, TV programmes, books, magazines and newspaper articles, scholarly works, government and medical documents – that a subject may encounter. To consider the plethora of knowledge products that feature trans subjects or that posit what it means to be trans requires them to be considered as multiple, contradictory and complex. This phenomenon maps more broadly on to the very make-up of Transgender Studies itself. To offer some context to this picture of subject production brought about through TV consumption, I will finish this article with a brief overview of the multiplicity and contradictory nature of Transgender Studies itself.

# **Transgender Studies**

In her book *Transgender History*, Susan Stryker notes the 'extensive medical and psychological literature that treats transgender phenomenon as a personal (pathological) deviation from social norms of healthy gender expressions' (Stryker, 2008, p. 2). What she attempts to do in this book is to pull together a 'collective political history of transgender social change activism in the United States' (2008, p. 2). Equally, this article captures the ways in which trans people can come to know themselves through cultural items and within a historical sociality and the publics that they occupy, rather than through any individual focus that the psychological encounter and the medical establishment allow for.

Interestingly, Stryker marks this historical point where trans people were themselves getting in on the discursive action. In 1994 the Queer Studies Conference at the University of Iowa allowed for international networking of emerging trans scholars, establishing new trans archives and the writing of trans histories. At the 1995 First International Conference on Cross-Dressing, Sex and Gender, at the California State University at Northridge, Stryker pictures the scene where 'an older generation of (primarily non-transgender) academic specialists who studied transgender phenomena was confronted by a significant number of academically trained specialists who also happened to be transgender themselves' (Stryker, 2006, p. 6). This provided a crunch point for Stryker, establishing these two 'types' of scholarly approaches to transgender lives and the 'rupture between modern and postmodern epistemic contexts for understanding' (2006, p. 12).

Also reflecting on the importance of conferences and large public platforms that were taking place in the UK and across Europe, Christine Burns acknowledges the efforts and perspectives from various professionals. At the 1993 colloquy 'Transsexualism, Medicine and the Law', hosted by the Free University in Amsterdam and chaired by endocrinologist Professor Louis Gooren, Burns states: 'The event was packed with a mix of international lawyers, doctors, civil servants and quite a few trans people ... these were people who had all thought very hard about the status of transsexual people from their own perspectives' (Burns, 2013, 9%).

There is a marking point in the epistemological trajectory when trans people themselves were playing a part in establishing and re-establishing concepts of gender identity. Whittle states:

As we move into a new world, trans academics and theorists are creating new discursive practices which are repositioning the power of gender(s) and allowing more of us to have a say in what gender means, and in what its powers should be. (Whittle, 2006, p. xiv)

Part of this new knowledge production draws on what Stryker tells us is 'the embodied experience of the speaking subject, who claims constative knowledge of the referent topic, to be a proper – indeed essential – component of the analysis of transgender phenomena' (Stryker, 2006, p. 12). She continues, 'experiential knowledge is as legitimate as other, supposedly more "objective" forms of knowledge, and is in fact necessary for understanding the political dynamics of the situation being analyzed' (2006, p. 12). As Transgender Studies are concerned with a body politic, biopower and the systemization of classifying and normalizing bodies, specifically in terms of sex and gender, Transgender Studies call 'into question that *entire epistemological framework*' of 'two supposedly natural, stable, and incommensurable social categories (man and woman)' (Stryker, 2006, p. 8, my italics). Given this, it therefore necessarily must concern itself with all, including its own, formations of epistemological systems, practices and indeed philosophies. Stryker continues:

Epistemological concerns lie at the heart of transgender critique, and motivate a great deal of the transgender struggle for social justice. Transgender phenomena, in short, point the way to a different understanding of how bodies mean, how representation works, and what counts as legitimate knowledge. These philosophical issues have material consequences for the quality of transgender lives. (2006, pp. 8–9)

Transgender Studies is a growing academic field, which not only examines transgender communities as 'minority' communities, but also engages in wider interrogations of how gender identities and subjectivities are produced (Stryker & Whittle, 2006). Transgender Studies are integral to the politics, activism and scholarly writing of feminism, gay and lesbian studies, queer theory and the Intersex Movement. Importantly, Transgender Studies, by their very interdisciplinary nature, wrestle with ideas and discourses held within the different fields and disciplines of sociology, history, cultural studies and other arts and humanities fields, as well as the sciences of biology, biochemistry, neurology, psychology and psychiatry. This multi-disciplinarity produces a rich, but often contradictory set of knowledge frameworks and knowledge products that do not easily cohere in any monolithic or 'general' idea of sex, gender and what it means to be trans. The different knowledge fields in which trans may be located study and conceptualize trans in particular ways pertaining to the various conventions and norms of the particular field or discipline. Moreover, depending on these knowledge 'framings', each discipline will achieve (as indeed it sets out to) certain end-points for the purposes of forwarding its own field. This results in knowing trans knowledge as multiple and diverse. For instance, as I have already pointed out, while in some knowledge fields trans has located itself as a postmodern subject – multiple in its narratives, fluid and socially constructed – in other knowledge fields, trans posits the sexes of 'male' and 'female' as natural and supports subjectivities as fixed and stable entities within discourses of the biological (Prosser, 1998).

As I consider TV documentaries that feature trans subjects, my aim is to think through how such mainstream products might situate themselves in, and contribute to, the multi-disciplinarity of Transgender Studies. I am interested in the space between popular culture and the minority collectives of trans people. I am interested in the discourse, knowledge products and 'sociability' generated here and, in drawing on the works of Warner (2005), I am interested in such public spheres produced here. Trans knowledge, then, is the space between definitions and knowledge products. It is a becoming knowledge achieved through and across subjects (which are also forming and becoming through a being *between* knowledge products). Trans knowledge is Hegelian in form, flowing and becoming, and it operates through a throughness. Trans knowledge is an epistemological approach that moves between (and is produced through) various fields, disciplines, arenas, platforms, publics and communities. It is a kind of 'conversation' between fields, disciplines, public spheres and knowledge products (Halberstam, 2011, p. 12). Added to this, Salamon states:

I seek to challenge the notion that the materiality of the body is something to which we have unlimited access, something of which we can have epistemological certainty, and contend that such epistemological uncertainty can have great use, both ethically and politically, in the lives of the non-normatively gendered. (Salamon, 2010, p. 1)

Trans knowledge is also about how 'certain' and 'uncertain' knowledge produces for itself feelings of certainty and uncertainty in the subject and, moreover, how these affects become productive through discourse. Trans knowledge forefronts how being trans often involves living with uncertainty in, through and because of the incommensurability of these knowledge paradigms. Trans knowledge is a living within and across opposing and conflicting discourses. This idea is not exclusive to trans discourse, but opens out to epistemological pursuits more broadly and can be mapped onto other subjectivities and discourses. <sup>10</sup>

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No potential conflict of interest was reported by the author.

### **Notes**

1. The BFI database offers the following synopsis:

Part one: 'The first of a two-part programme which examines the plight of five Britons who suffer from gender dysphoria, men who are convinced they should be female and women who feel they should be male. The five featured are female to male transsexuals who fly to Amsterdam and Utrecht as they prepare for the mental and physical upheaval of hormone treatment and surgery' (http://ftvdb.bfi.org.uk/sift/title/543351?view=synopsis).

Part two: 'The second of two programmes about female to male transsexuals following a party from Britain to the Netherlands to meet Europe's largest and most experienced gender reassignment team. A top plastic surgeon describes to them the surgical options available and demonstrates how successful the outcome can be. Once the group is home it is time to decide how to readjust their lives' (http://ftvdb.bfi.org.uk/sift/title/544273?view=synopsis).

- 2. For discussions around the behaviours of TV consumption, see Couldry, Livingstone, and Markham (2010); Fiske (2011); and Glynn (2000).
- 3. 'Trans' is a term I use to mean those people whose assigned sex at birth does not sit easily or match their sense of self. It includes transsexual or transgender people and cross-dressers, as well as gender variant and gender queer people and anyone who challenges gender norms. Historically, transsexualism is a clinical word, coming from the German term

'Transsexualismus', which was coined by Magnus Hirschfeld in an article 'Die Intersexuelle Konstitution' in *Jarhbuch fuer sexuelle Zwischenstufen* (1923). 'Transgender' – a term stemming from the US trans community in the 1960s – initially described trans people who did not undergo medical intervention, but cross-dressed all of the time (Ekins & King, 2006; Kotula, 2002; Stryker, 2006). In the late 1990s, Leslie Feinberg used 'transgender' as an umbrella term to politicize all gender variant people and to offer a united political project against oppression (http://www.glbtq.com/social-sciences/transgender.html). Where transgender is used as an umbrella term, I use 'trans' as a more contemporary version. 'Gender queer' describes a person who identifies their gender as outside of, or other to, the gender binary of 'male' or 'female' and is aligned with a queer politics which looks to challenge gender- and hetero-normativity.

- 4. An interesting project, Open Barbers, is a hairdressing service for all genders and sexualities in the London area of England. They 'offer a personalised and warm haircutting experience with a queer and trans friendly attitude ... [and] seek to promote the diversity of identities in society and celebrate people's appearance in the way they wish to be seen' (http://openbarbers.co.uk/).
- 5. For the purposes of this article, I use 'being trans' to describe a trans subject. This does not mean that I am subscribing to a notion of 'being' in an essential sense, but rather that I intend to mean a being-ness of those people whose selfhood, subjectivity or identity formation is lived or experienced in relation to the term 'trans'.
- 6. Butler writes, 'My own thinking has been influenced by the "new Gender Politics" that has emerged in recent years, a combination of movements concerned with transgender, transsexuality, Intersex, and their complex relations to feminist and queer theory' (Butler, 2004, p. 4).
- 7. In the documentary it is referred to as 'The Portman Clinic, Tavistock', but the current Gender Identity Development Service is part of the Tavistock and Portman Clinic, NHS Trust.
- This performance of permanence is also required if anyone wishes to receive a Gender Recognition Certificate. The trans person must pledge to remain in his or her 'new gender until death'. See Gender Recognition Act 2004 (http://www.legislation.gov.uk/ukpga/2004/7/pdfs/ukpga\_20040007\_en.pdf).
- 9. Halberstam states: 'Conversation rather than mastery indeed seems to offer one very covert way of being in relation to another form of being and knowing without seeking to measure that life modality by the standards that are external to it' (Halberstam, 2011, p. 12).
- 10. We could certainly think, for instance, of the relevance for other 'minority' groups, such as the way race is articulated and studied through many different discourses and academic disciplines, in a manner that could be seen to be analogous to trans. For instance, race is established through varying discourses that set out to achieve particular ends. We might think of race as genetic or epidermal; as cultural, social or psychoanalytic. We can recall Fanon's noted 1967 text *Black Skins, White Mask*. Critical Race theory has been brought into the realm of the visual and the art world, particularly in the work of Adrian Piper, as well as race as performative, where we can also think of the works of E. Patrick Johnson. In addition, race as a category itself has been considered something to be resisted, transcended or even done away with. See Gilroy (1993, 2000).

### Notes on contributor



Jay Stewart is co-founder of Gendered Intelligence and Director of the organization. Jay carries out and oversees the main activities that take place across the organization. Recently Jay has lead on the projects: 'What makes your gender? Hacking into the Science Museum' – a £10,000 project funded by Heritage Lottery Fund with the Science Museum, London - and 'GI's Anatomy: a life drawing project for trans and intersex people' – a £30,000 project funded by the Welcome Trust carried out in collaboration with Central School of Speech & Drama, London Drawing and the Gender Identity Development Service, Tavistock Clinic, NHS Trust. Jay is also a mentor. Jay Stewart's own PhD was carried out in the department of Visual Cultures at Goldsmiths College. The thesis

is entitled "Trans on Telly: Popular Documentary and the Production of Transgender Knowledge" and explores understandings of trans identities through mainstream televisual documentaries.

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