# A Review of Sheila Jeffreys's

## Gender Hurts: A Feminist Analysis of the Politics of Transgenderism

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Sheila Jeffreys's book, *Gender Hurts: A Feminist Analysis of the Politics of Transgenderism*, provides the history of the construction of the transgenderism narrative, a discussion of the political relationship of transgenderism and feminism, and details of the psychological and physical harm that transgenderism inflicts on transgender-identified individuals and those in relationship with them. Chapter 1 lays out the thesis of transgenderism as a social construct, and Chapter 2 evaluates the key interactions between transgenderism and feminism. Chapters 3–6 review the harm of transgenderism from different perspectives and for diverse populations. Chapters 7–8 close the book with a more detailed analysis of transgenderism from a feminist perspective. The book is accessible to a wide audience and should be of interest to all who want to broaden their understanding of the development of transgenderism within a sociopolitical context as well as learn of the psychological and physiological risks associated with its medicalization.

Throughout the book, Jeffreys uses scientifically accurate descriptors based upon genetics when referring to transgender-identified individuals. Specifically, she uses "male-bodied transgender" in place of the unscientific but commonplace acronym MTF (male to female) transgender, and "female-bodied transgender" in place of FTM (female to male) transgender. Similarly, she uses the biologically congruent pronoun when referring to individuals who claim a transgender identity. She argues that using the opposite sex pronoun supports the unscientific belief that individuals can change their sex, when in fact it is medically impossible to do so. Also consistent with a constructivist perspective, Jeffreys uses transgender as a verb (i.e., transgender, transgendered, transgendering). This review retains these language choices in order to effectively reflect the tone of the book.

### **Social Construction**

The premise of transgenderism as a social construction is an important theme of the book as it frames the examination of the impact transgenderism has had on individuals and society. The story of transgenderism, contends Jeffreys, began with transgenderism as a chosen role, then with the help of the psychiatric community, endocrinologists, surgeons, and other medical professionals, it developed into a

pathology, or a condition. The final, or at least the current version of the transgenderism narrative, is that it is an inborn identity, an essence. Perhaps surprisingly, as a self-identified lesbian, Jeffreys denies the dominant cultural belief that some people are born biologically hard-wired for immutable same-sex attraction as she demonstrates parallels between the development of the modern transgenderism narrative with that of homosexuality. Her arguments in support of the social construction perspective are compelling. They provide a necessary critique of a pharmacological and surgical response to a psychological and sociopolitical phenomenon.

#### **Feminism**

As promised by the title, the book reflects Jeffreys' political and philosophical perspective as a feminist. She explicitly discusses her view that transgenderism is a manifestation of a male-dominated gender hierarchy used by men to further subordinate women. Jeffreys discusses the impact of recently enacted laws that allow male-bodied transgenders to enter women's private and formerly protected spaces. Male-bodied transgenders, the majority of whom are attracted to women and many of whom have retained their penises, now have legal access to women's restrooms, showers, prisons, etc., violating women's psychological safety, and posing a threat to their physical safety.

The book includes a discussion of the trends and controversies in the transgender subcultures related to feminist issues to which the reader may not have access. For example, she discusses the cotton ceiling. The cotton ceiling is referring to women's underwear and the lack of access to women's vaginas by male-bodied transgenders. The cotton ceiling theory translates women's sexual self-determination into a form of discrimination (transphobia). Transgender activists compare the cotton ceiling to other barriers experienced by women (i.e., the glass ceiling).

Jeffreys describes the impact of transgenderism on the causes of feminism. For example, she notes a growing trend among lesbian feminists to pursue synthetic hormones and various surgeries to pass as men. While Jefferys reports that 75% of transgender-identified individuals are men, she also laments the increasing number of lesbian feminists who, in her assessment, have spent their lives attempting to

protect women from male domination but have now rejected womanhood and joined the ranks of their oppressors, as female-bodied transgenders.

#### Harm

Jeffreys effectively shifts the readers view from the accepted narrative that transgenderism is a normal, natural variation of sexuality as she writes detailed, often graphic descriptions of surgical procedures and hormone interventions for both male-bodied and female-bodied transgender adults and children. She discusses the side effects of surgeries and hormone treatments, including accounts of progressive and permanent damage to the body's systems. These treatments, explains Jeffreys, also negatively impact the psychological health of individuals throughout the transition process. Further, she presents data demonstrating that changing the body does not improve social and psychological functioning, and disputes the notion that the disproportionate level of psychological problems of transgender-identified individuals are caused by minority stress. The book also features poignant personal accounts of individuals who have transitioned and now have regrets, including interviews with an individual who was administered hormones as a child.

An entire chapter titled "Gender Eugenics" (Chapter 6) is dedicated to the transgendering of children. As implied by the title, Jeffreys contends that the transgendering of children is a type of eugenics. She argues that the social engineering of transgendering is similar to historical eugenics practices as the procedures aim to cure behaviors and social problems by altering individuals' physical bodies in ways that result in infertility. The book includes a discussion of international trends in the practices of transgendering children and the associated laws allowing for these practices. For example, Australia allows physicians to administer puberty-delaying hormones to children as young as ten years old and cross-sex hormones at sixteen years of age. Amputation is allowed at age eighteen.

Jeffreys provides examples of unethical actions by the medical community in the treatment of children and highlights the seeming absurdity of projecting current gender norms onto young children, and then labeling them as transgender if they fail to conform. She describes a UK government-published

pamphlet intended as guidance for physicians and parents in which the pamphlet authors admit that there are no clear differences between transgendered and other children to inform diagnosis. In light of this lack of diagnostic criteria, the pamphlet states that parents and physicians should rely on the child's account of his or her feelings in order to make the diagnosis and to guide their decisions. Jeffreys effectively argues that if these children were born at a different time and place, a time and place where their preferences were within the current gender norms, they would not become victims of these eugenic-like practices.

As a relationship therapist, I particularly appreciate the book's discussion of the impact that transgenderism has in the lives of the women who are in relationships with transgender-identified individuals. Since male- and female-bodied transgenders are predominately attracted to females, their partners are typically females. The dominant challenges for these women include financial exploitation, changing roles, loss of community, and the pressure to attest to the narrative that their partners are now the opposite sex. The pressure for the partners to align with the current narrative about transgenderism often comes from therapists who specialize in working with these couples. Jeffreys reports that these therapists typically see the transgender-identified individuals as heroes and attempt to persuade their partners to set aside any dissenting thoughts and feelings.

Jeffreys argues that transgenderism is ultimately the result of the social construction of gender. She also insists that the very concept of gender necessitates a hierarchy, male over female—that without hierarchy, there would be no gender. Clearly, male over female oppression exists; however, Jeffreys' frequently interjected lesbian-feminist mantra that where there are male-female romantic/sexual relationships, there will be oppression and male domination is not convincing and sometimes seems out of context.

The mainstream transgenderism narrative teaches as fact that some people are born in the wrong-sexed body and that these individuals hold within them the very essence of the opposite sex. Sheila Jeffreys's book, *Gender Hurts: A Feminist Analysis of the Politics of Transgenderism*, provides a necessary critique of this mainstream and scientifically unsubstantiated narrative currently promulgated in the media, schools, churches, academe, and medical offices. Jeffreys challenges the laws that allow

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female-attracted, male-bodied transgenders to undress, penis and all, next to women in women's private spaces. She also challenges the medical community as they treat transgendered individuals, including children, with life-altering hormone treatments, amputation, and other forms of surgical mutilation. Perhaps more importantly, she challenges the reader, who is perhaps a participant in the telling and retelling of the current cultural narrative, to consider the significant physical and psychological harm they may be visiting upon themselves, loved ones, friends and society at large.