

**Studies in
ETHNOMETHODOLOGY**

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TO ABRAHAM GARFINKEL

Passing and the managed achievement of sex status in an "intersexed" person part 1*

Every society exerts close controls over the transfers of persons from one status to another. Where transfers of sexual statuses are concerned, these controls are particularly restrictive and rigorously enforced. Only upon highly ceremonialized occasions are changes permitted and then such transfers are characteristically regarded as "temporary" and "playful" variations on what the person "after all," and "really" is. Thereby societies exercise close controls over the ways in which the sex composition of their own populations are constituted and changed.

From the standpoint of persons who regard themselves as normally sexed, their environment has a perceivedly normal sex composition. This composition is rigorously dichotomized into the "natural," *i.e.*, *moral*, entities of male and female. The dichotomy provides for persons who are "naturally," "originally," "in the first place," "in the beginning," "all along," and "forever" one or the other. Changes in the frequency of these moral entities can occur only through three legitimate paths: birth, death, and migration.

* In collaboration with Robert J. Stoller, M.D., *The Neuropsychiatric Institute, University of California, Los Angeles*. An appendix to this chapter is on p. 285.

Except for a legal change in birth certificate no legitimate path exists between the statuses of male and female. Even the legal change is regarded with considerable reservation by societal members who take their *bona fide* sex status for granted.

The normative, *i.e.*, legitimate sexual composition of the population as seen from the point of view of members who count themselves part of the perceivedly normally sexed population, can be described with the following table of transition probabilities:

		At time ₂	
		Male	Female
At time ₁	Male	1.0	0.0
	Female	0.0	1.0

This study reports one of a series of cases that fall into the normatively prohibited lower left and upper right cells. These persons are being studied in the Departments of Psychiatry, Urology, and Endocrinology in the Medical Center of the University of California, Los Angeles. These persons have severe anatomical irregularities. In each case the transfer occurred late in the developmental life cycle and was accomplished as a more or less clear matter of personal election. Severe anatomical anomalies—for example, the case to be reported here is that of a nineteen-year-old girl raised as a boy whose female measurements of 38-25-38 were accompanied by a fully developed penis and scrotum—were contradictory of the appearances that were otherwise appropriate to their claimed rights to live in culturally provided sexual statuses. The transfers were accompanied by the subscription, by each of these persons, to the cultural conception of a dichotomized sex composition in which, with vehement insistence, they included themselves. Such insistence was not accompanied by clinically interesting ego defects. These persons contrast in many interesting ways with transvestites, transsexualists, and homosexuals.

In each case the persons managed the achievement of their rights to live in the chosen sexual status while operating with the realistic conviction that disclosure of their secrets would bring swift and certain ruin in the form of status degradation, psycho-

logical trauma, and loss of material advantages. Each had as an enduring practical task to achieve rights to be treated and to treat others according to the obligated prerogatives of the elected sex status. They had as resources their remarkable awareness and uncommon sense knowledge of the organization and operation of social structures that were for those that are able to take their sexual status for granted routinized, "seen but unnoticed" backgrounds of their everyday affairs. They had, too, great skills in interpersonal manipulations. While their knowledge and interpersonal skills were markedly instrumental in character, by no means were they exclusively so.

The work of achieving and making secure their rights to live in the elected sex status while providing for the possibility of detection and ruin carried out within the socially structured conditions in which this work occurred I shall call "passing."

In the lives of these persons the work and the socially structured occasions of sexual passing were obstinately unyielding to their attempts to routinize the rounds of daily activities. This obstinacy points to the omnirelevance of sexual statuses to affairs of daily life as an invariant but unnoticed background in the texture of relevances that comprise the changing actual scenes of everyday life. The experiences of these intersexed persons permits an appreciation of these background relevances that are otherwise easily overlooked or difficult to grasp because of their routinized character and because they are so embedded in a background of relevances that are simply "there" and taken for granted.

I shall confine my attention in this paper to a discussion of one case. I should like to tell what this person had specifically to hide, the structural relevance of her secrets, the socially structured situations of crisis, the management strategies and justifications that she employed, and the relevance of these considerations for the task of treating practical circumstances as a sociological phenomenon.

Agnes

Agnes appeared at the Department of Psychiatry at U.C.L.A. in October, 1958 where she had been referred to Dr. Robert J. Stoller by a private physician in Los Angeles to whom Agnes had in turn been referred by her physician in her home town, Northwestern

City. Agnes was a nineteen-year-old, white, single girl, who was at the time self-supporting and working as a typist for a local insurance company. Her father was a machinist who died when Agnes was a child. Her mother supported a family of four children, of whom Agnes was the youngest, with occasional and semi-skilled work in an aircraft plant. Agnes said that she was raised as a Catholic but has not taken Communion for the past three years. She said of herself that she no longer believed in God.

Agnes' appearance was convincingly female. She was tall, slim, with a very female shape. Her measurements were 38-25-38. She had long, fine dark-blonde hair, a young face with pretty features, a peaches-and-cream complexion, no facial hair, subtly plucked eyebrows, and no makeup except for lipstick. At the time of her first appearance she was dressed in a tight sweater which marked off her thin shoulders, ample breasts, and narrow waist. Her feet and hands, though somewhat larger than usual for a woman, were in no way remarkable in this respect. Her usual manner of dress did not distinguish her from a typical girl of her age and class. There was nothing garish or exhibitionistic in her attire, nor was there any hint of poor taste or that she was ill at ease in her clothing, as is seen so frequently in transvestites and in women with disturbances in sexual identification. Her voice, pitched at an alto level, was soft, and her delivery had the occasional lisp similar to that affected by feminine appearing male homosexuals. Her manner was appropriately feminine with a slight awkwardness that is typical of middle adolescence.

Details of her medical, physical, and endocrinological characteristics have been reported elsewhere.¹ To summarize her medical, physical, and endocrinological characteristics, prior to any surgical procedures she appeared as a person with feminine body contours and hair pattern. She had large, well-developed breasts coexisting with the normal external genitalia of a male. An abdominal laparotomy and pelvic and adrenal exploration, performed two years before she was first seen at U.C.L.A., revealed no uterus or ovaries, no evidence of any vestigial female apparatus nor any

¹ A. D. Schwabe, David H. Solomon, Robert J. Stoller, and John P. Burnham, "Pubertal Feminization in a Genetic Male with Testicular Atrophy and Normal Urinary Gonadotropin," *Journal of Clinical Endocrinology and Metabolism*, 22, No. 8 (August, 1962), 839-845.

abnormal tissue mass in the abdomen, retroperitoneal area, or pelvis. Bilateral testicular biopsy showed some atrophy of the testes. A large number of laboratory tests on blood and urine as well as X-ray examinations of the chest and skull were all within normal limits. A buccal smear and skin biopsy revealed a negative (male) chromatin pattern. There was some evidence of a urethral smear showing cellular cornification suggestive of moderately high estrogenic (female hormone) activity.

Agnes was born a boy with normal-appearing male genitals. A birth certificate was issued for a male and she was appropriately named. Until the age of seventeen she was recognized by everyone to be a boy. In the biography furnished to us over many hours of conversations, the male role was both consistently and insistently described as a difficult one and poorly managed. Her accounts exaggerated the evidences of her natural femininity and suppressed evidences of masculinity. Secondary feminine sex characteristics developed at puberty. According to her account, grammar school years were at least tolerable whereas the three years of high school were stressful in the extreme. At the age of seventeen, at the end of her junior year of high school, she refused to return to complete the senior year. This was in June, 1956. After considerable planning, rehearsals, dieting to "make myself pretty," and similar preparations, she left her home town in August, 1956 for a month's visit with a grandmother in Midwest City. At the end of the month's visit, according to plan, she left her grandmother's house without leaving word of her whereabouts, and in a downtown hotel changed to feminine attire with the hope of finding a job in that city. For various reasons she felt unable to carry through with the plan of remaining in Midwest City and after phoning her mother returned home on the evening of the change. In the fall of 1956, she entered a hospital in her home town for examinations and the exploratory laparotomy which was done under the supervision of her private physician. During the fall of 1956 and following her hospitalization, she continued her schooling with the help of a tutor that had been provided under her mother's arrangement with the Public School system. She chafed under this as a resented confinement. In December, 1956 the tutor was dismissed and Agnes got a job as a typist in a small factory on the outskirts of town. She continued with this job until August, 1957 when, accom-

panied by girlfriends, she came to Los Angeles. She lived in Long Beach with a girlfriend and worked in downtown Los Angeles in a small insurance office. In December, 1957 she and her roommate moved into downtown Los Angeles "to be close to our work." In February 1958 she met her boyfriend Bill, and in April, 1958, to be closer to him, moved to the San Fernando Valley. She quit her job in March 1958 and was out of work at the time that she moved to the Valley. After a succession of crises with her boyfriend she returned to her home town in April, 1958 to see her previous physician for the purpose of obtaining a letter from him "explaining" Agnes' condition to her boyfriend. This letter was deliberately written by her physician in a general manner so as to mask the actual character of the difficulty. The boyfriend found this only temporarily satisfactory. His increasing insistence upon intercourse and plans for marriage, which Agnes frustrated, produced a series of increasingly severe quarrels. In June, 1958 Agnes disclosed her actual condition to her boyfriend and the affair continued on this basis. In November, 1958 Agnes was seen for the first time at U.C.L.A. Regular conversations at weekly intervals were held until August, 1959. In March, 1959 a castration operation was performed at U.C.L.A. in which the penis and scrotum were skinned, the penis and testes amputated, and the skin of the amputated penis used for a vagina while labia were constructed from the skin of the scrotum.

During this period Agnes was seen regularly by Dr. Robert J. Stoller, psychiatrist and psychoanalyst, Dr. Alexander Rosen, a psychologist, and by me. Approximately thirty-five hours of conversations that I had with her were tape recorded. My remarks in this paper are based upon transcriptions of these materials and upon materials collected by Stoller and Rosen with whom the work was done collaboratively.

Agnes, the natural, normal female

Agnes had an abiding practical preoccupation with competent female sexuality. The nature of her concerns, as well as the incongruity that such an abiding concern presents to "common sense," permits us to describe, preliminarily at least, the strange features that the population of legitimately sexed persons exhibit as *objec-*

tive features from the point of view of persons who are able to take their own normally sexed status for granted. For such members perceived environments of sexed persons are populated with natural males, natural females, and persons who stand in moral contrast with them, i.e., incompetent, criminal, sick, and sinful. *Agnes agreed with normals in her subscription to this definition of a real world of sexed persons, and treated it, as do they, as a matter of objective, institutionalized facts, i.e., moral facts.*

Agnes vehemently insisted that she was, and was to be treated as, a natural, normal female. The following is a preliminary list of properties of "natural, normally sexed persons" as cultural objects. Intended as an anthropological paraphrasing of members' beliefs, these properties are to be read with the use of the invariable prefix, "From the standpoint of an adult member of our society, . . ." Examples are furnished in the first two properties.

1. From the standpoint of an adult member of our society, the perceived environment of "normally sexed persons" is populated by two sexes and only two sexes, "male" and "female."
2. From the standpoint of an adult member of our society, the population of normal persons is a morally dichotomized population. The question of its existence is decided as a matter of motivated compliance with this population as a legitimate order. It is not decided as a matter of biological, medical, urological, sociological, psychiatric, or psychological fact. The question of its existence is instead decided by consulting both the likelihood that compliance to this legitimate order can be enforced and the conditions that determine this likelihood.
3. The adult member includes himself in this environment and counts himself as one or the other not only as a condition of his self-respect, but as a condition whereby the exercise of his rights to live without excessive risks and interference from others are routinely enforceable.
4. The members of the normal population, for him the *bona fide* members of that population, are essentially, originally, in the first place, always have been, and always will be, once and for all, in the final analysis, either "male" or "female."
5. Certain insignia are regarded by normals as essential in their

identifying function,² whereas other qualities, actions, relationships, and the like are treated as transient, temporary, accidental, circumstantial, and the rest. For normals the possession of a penis by a male and a vagina by a female are essential insignia. Appropriate feelings, activities, membership obligations, and the like are attributed to persons who possess penises and vaginas. (However the possession of a penis or a vagina as a biological event is to be distinguished from the possession of one or the other or both as a cultural event. The differences between biological and cultural penises and vaginas as socially employed evidences of "natural sexuality" will be commented on at greater length below.)

6. The recognition of either male or female is made by normals for new members not only at the point of their first appearance, e.g., the neonate, but even before. It extends as well to the entire ancestry and to posterity. The recognition is not changed by the death of the member.³

7. For normals, the presence in the environment of sexed objects has the feature of "a natural matter of fact." This naturalness carries along with it, as a constituent part of its meaning, the sense of its being right and correct, i.e., morally proper that it be that way. Because it is a natural matter of fact, for the members of our society there are only *natural* males and *natural* females. The good society for the member is composed only of persons who are either one sex or the other. Hence the *bona fide* member of the society, within what he subscribes to as well as what he expects others to subscribe to as committed beliefs about "natural matters of fact" regarding distributions of sexed persons in the society, finds the claims of the sciences like zoology, biology, and psychiatry strange. These sciences argue that decisions about sexuality are problematic matters. The normal finds it strange and difficult to lend credence to "scientific" distributions of both male and female characteristics among persons, or a procedure for deciding

² For example, the Board of Health officer in Midwest City where Agnes was born, when he refused to approve Agnes' application for a change of birth certificate, was supposed to have agreed that "in the final analysis" the capacity to perform the male reproductive function settled Agnes' sex.

³ These properties need to be reviewed by considering actual cases that vary them along one or another "parameter" of recognition: deities, for one example; and war combatants whose genitals were destroyed as part of heroic mortal wounds, etc.

sexuality which adds up lists of male and female characteristics and takes the excess as the criterion of the member's sex, or the practice of using the first three years of training to decide sexuality, or the provision for the presence in the familiar society of males who have vaginas and females who have penises.

This "common sense" characterization is in no way limited to nonprofessional opinion. For example, a leading member of a prominent Department of Psychiatry in this country commented after hearing about the case, "I don't see why one needs to pay that much interest to such cases. She is after all a very rare occurrence. These persons are after all freaks of nature." We could not have solicited a more common sense formula. A measure of the extent of the member's commitment to the moral order of sexual types would consist of the reluctance to lend credence to a characterization that departed from the "natural facts of life." As we shall see below, in many different ways Agnes taught us as well, though unwittingly, the institutionally motivated character of this reluctance.

I have stressed several times that for the *bona fide* member "normal" means "in accordance with the mores." Sexuality as a natural fact of life means therefore sexuality as a natural and moral fact of life. The member's willingness, therefore, to treat normal sexuality as an object of theoretical interest requires, in deciding for himself the real nature of sexed persons, that he suspend the relevance of his institutionally routinized practical circumstances. We find, however, that the normal member does not treat sexuality, his own or others', as a matter of mere theoretic interest, whereas this is in principle the limit of our investigative interest in the phenomenon of normal sexuality as it is in other sciences as well. The normal also treats the sexed character of persons populating his everyday environment as a quality that is "decided by nature." This quality, once the member's "nature" decides it, holds thereafter irrespective of time, occasion, circumstance, or considerations of practical advantage. The person's membership as a normally sexed member, male or female, has the characteristic of, and is treated by the normal as remaining invariant throughout that person's biography and throughout his future lifetime and beyond. His sexual membership remains unchanged through any imputed actual and potential lifetime. To use Parsons' phrasing, it is "invariant to all exigencies."

8. From the standpoint of the normal member, if one examines the population of sexed persons at one time counting the presence of males and females, and at a later time examines the population again, no transfers will have occurred from one sex status to the other except for those transfers that are ceremonially permitted.

Our society prohibits willful or random movements from one sex status to the other. It insists that such transfers be accompanied by the well-known controls that accompany masquerading, play-acting, party behavior, convention behavior, spying, and the like. Such changes are treated both by those making the changes as well as those observing them in others as limited both by the clock as well as by occasions and practical circumstances. The person is expected "after the play" to "stop acting." On the way home from the party the person may be reminded that the party "is over," and that he should conduct himself like the person he "really is." Such admonitions as a "first line of social control" make up commonly encountered sanctions whereby persons are reminded to act in accordance with expected attitudes, appearances, affiliations, dress, style of life, round of life, and the like that are assigned by the major institutions. In our society these consist prominently of occupational and kinship arrangements with their intended obligatory statuses. Their importance is this: that persons are held to compliance with them regardless of their desires, i.e., "whether they like it or not." From the standpoint of the normal, changes of the population's composition can be accomplished by the paths only of birth, death, and migration.

Agnes was all too aware that an alternative path had been traveled, that it was traveled with negligible frequency, and that the transfer was harshly punishable. Like Agnes, the normal knows that there are persons who make the change but he, as did she, counts such persons as freaks, unusual, or bizarre. Characteristically he finds the change itself difficult to "understand" and urges either punishment or medical remedy. Agnes did not depart from this point of view⁴ even though her sex was for her a matter of willful election between available alternatives. This knowledge

⁴ Nevertheless, further information is needed comparing Agnes with normals with respect to the possibility that normals are more accepting of willful election than she was. For example, several lay persons who were told about her case expressed considerable sympathy. They found as the thing to be sympathetic about that she should have had to have been confronted with the election in the first place.

was accompanied by a burdensome necessity for justifying the election. The election consisted of choosing to live as the normally sexed person that she had always been.

Agnes subscribed to this description of a real world even though there were for her in that world persons, among whom she included herself, who had made the change from one sex to the other. Her early history stood in contrast for her to what she was nevertheless convinced about as to her normal sexuality. In seeking a change of birth certificate Agnes treated the change as the correction of an original error committed by persons who were ignorant of the "true facts."

Agnes held the conviction that there are not many people who could be told what she had done and who "will really understand." Hence, for Agnes an otherwise important common understanding with others had the troublesome feature that does not occur for normals, particularly where the dichotomy of sex types is concerned, namely, Agnes was unable to exercise the assumption that her circumstances, as they appeared to her would appear in a more or less identical way to her interactional partners, were they to exchange places. We might refer to this as the existence of a problematic "community of understandings" by and about sexed persons treating each other's sex as known in common and taken for granted by them.

9. In the cultural environments of normally sexed persons males have penises and females have vaginas. From the point of view of a normal member, wherever there are cases of males with vaginas and females with penises there are persons who, though they may be difficult to classify, must nevertheless be in principle classifiable and must be counted as members of one camp or the other. Agnes subscribed to this view too as a natural fact of life, even though this same population included at least one female with a penis, *i.e.*, herself, and following the operation included a female with a man-made vagina. It included others as well that she had learned of through her readings and contacts with physicians both in her home town and in Los Angeles. According to her account all others besides herself were personally unknown to her.

10. That Agnes could insist on her membership in the natural population of sexed persons even though she was, prior to the operation, a female with a penis and, following the operation, a

female with a man-made vagina, suggests another important property of a naturally sexed person. When we compare Agnes' beliefs not only with those of normals but with what normals believe about persons whose genitals for one reason or another change in appearance, or suffer damage or loss, through aging, disease, injuries, or surgery we observe that it is not that normals and Agnes insist upon the possession of a vagina by females (we consider now only the case of the normal female; the identical argument holds for males). They insist upon the possession of *either* a vagina that nature made *or* a vagina that *should have been there all along, i.e.*, the *legitimate* possession. The legitimately possessed vagina is the object of interest. *It is the vagina the person is entitled to.* Although "nature" is a preferred and *bona-fide* source of entitlement, surgeons are as well if they repair a natural error, *i.e.*, if they serve as nature's agents to provide "what nature meant to be there." Not *just this* vagina but *just this* vagina as the case of the *real thing*. In the identical way that for a member of a language community a linguistic utterance is a case of a word-in-the-language, or for a game player a move is a move-in-the-game, the genitals that serve the normal member as insignia of normally sexed membership consists of penises-and-vaginas-in-the-moral-order-of-sexed-persons. (I am speaking descriptively. I propose these "essences" as attributions that members find in their environments. To avoid any misunderstandings, I would like to stress that I am talking data. I am not arguing platonic realism as a philosophy of social sciences.)

Agnes' experiences with a female cousin, sister-in-law, and aunt may illuminate this property. In the course of commenting on what she characterized as her cousin's "jealousy" when a male visitor to her brother's home who had not met either one clearly preferred Agnes to her cousin who was approximately the same age, Agnes commented on her cousin's change in attitude from one in which she was favorable to Agnes before the trip to Midwest City but showed strong disapproval afterwards. According to Agnes' comments, Agnes felt that her cousin thought of Agnes as a fake, not a real woman. Agnes said of her cousin that the cousin felt that Agnes was a rival. (The portrayed rivalry was reciprocally felt, for Agnes said that she found it hard to "get her out of my mind.") Similarly for Agnes' sister-in-law, a mild disapproval on

the sister-in-law's part prior to the Midwest City trip changed to open hostility upon Agnes' return. Agnes attributed this to the sister-in-law's resentment that Agnes was hardly the person to compare herself to the sister-in-law in affairs of proper domestic and marital conduct. By comparison with these rivals, Agnes commented on the dramatic change on the part of the elderly aunt who accompanied her mother to Los Angeles to care for Agnes during her convalescence from the castration operation. Agnes characterized the aunt as a natural female with no questions about it. The aunt, said Agnes, reflected the attitude of other family members. This attitude, said Agnes, was one of general acceptance prior to the trip to Midwest City, consternation and severe disapproval after the return, and relieved acceptance and treatment of her as a "real female after all" (Agnes' quotation of the aunt's remark) following the operation and during our conversations while the aunt was in Los Angeles. The point: in each case the object of interest was not the possession of the penis or of the man-made vagina, but, in the case of the cousin and sister-in-law, Agnes' penis was *prima facie* contradictory of Agnes' claims, by her other appearances, to possess the real thing. In the case of the aunt, although the vagina was man-made it *was* a case of the real thing since it was what she was now seen to have been entitled to all along. Both the aunt and the mother were strongly impressed by the fact that the operation had been done at all "in this country." That the physicians at the U.C.L.A. Medical Center by their actions reconstructed and validated Agnes' claim to her status as a natural female needs, of course, to be stressed.

Some additional features of Agnes as the natural female require mention.

Not only did Agnes directly express the claim "I have always been a girl," but it was advanced by the device of a remarkably idealized biography in which evidences of her original femininity were exaggerated while evidences of a mixture of characteristics, let alone clear-cut evidences of a male upbringing, were rigorously suppressed. The child Agnes of Agnes' accounts did not like to play rough games like baseball; her "biggest" problem was having to play boys' games; Agnes was more or less considered a sissy; Agnes was always the littlest one; Agnes played with dolls and

cooked mud patty cakes for her brother; Agnes helped her mother with the household duties; Agnes doesn't remember what kinds of gifts she received from her father when she was a child. I once asked Agnes if she had lined up with the boys in public school. Her startled and angry reply was, "Lining up with the boys for what!" When I told her I was thinking of lining up in dancing class or lining up for physical examinations at school Agnes said, "Lining up never came up." I asked her if medical examinations with boys never happened. She agreed "That's right, they never happened." We came to refer to her presentation of the 120 per cent female. Not only in her accounts, but at times in her conversations with me, Agnes was the coy, sexually innocent, fun-loving, passive, receptive, "young thing." As a kind of dialectical counterpart to the 120 per cent female Agnes portrayed her boyfriend as a 120 per cent male who, she said, when we first started to talk, and repeated through eight stressful weeks following the operation when post-operative complications had subsided and the recalcitrant vagina was finally turning out to be the thing the physicians had promised, "wouldn't have been interested in me at all if I was abnormal." The penis that was possessed by the natural female was, repeatedly and under recurrent questioning, an accidental appendage used for the sole purpose of passing urine. The penis of Agnes' accounts had never been erect; she was never curious about it; it was never scrutinized by her or by others; it never entered into games with other children; it never moved "voluntarily"; it was never a source of pleasurable feelings; it had always been an accidental appendage stuck on by a cruel trick of fate. When it was amputated and Agnes was asked now that her penis and scrotum were gone what did she think of the penis and scrotum that were gone, her answer was that she did not feel it was necessary to give it any more thought than one would give to having had a painful wart that had been removed.

Agnes frequently called my attention to her lack of a biography that was appropriate to the fact that she was accepted by others and most particularly by her boyfriend as a girl. Agnes talked of the seventeen year gap in her life and indicated that her present female character was assigned by others a continuous history as a female that extended to the time of her birth. She pointed out that only since the time that she made the change had she been

able to establish a female biography of experiences which she and others could draw on as a precedent in managing present appearances and circumstances. She lacked a proper biography to serve as a historico-prospective context for managing current situations. For others, and most particularly with her boyfriend, an all-along female corresponded to the anticipations that she encouraged with her boyfriend. Two years of accumulating memories presented her a chronic source for a series of crises about which more will be spoken below when I discuss her passing occasions and her management devices.

Another feature of the normal natural female was found in Agnes' portrayal of and insistence upon her life-long desire to be the thing that she had always known she was. Within her portrayals, her desires came essentially from mysterious and unknown sources, and withstood all vicissitudes posed by an ignorant environment that attempted to force, though unsuccessfully, an arbitrary line of departure from a normal course of development. Agnes stressed repeatedly, "I've always wanted to be a girl; I have always felt like a girl; and I have always been a girl but a mistaken environment forced the other thing on me." On many occasions of our conversations she was asked how she accounted for the desire that withstood environmental exigencies. Her replies invariably elaborated the theme, "There's no explaining it."

Given Agnes' subscription to the normal's distinction between the normal natural male and the normal natural female, there was less ambiguity for Agnes in distinguishing between herself as either a male or a female than there was in distinguishing between herself as a natural female and a male homosexual. The very extensiveness of the exaggerations of her feminine biography, of the masculinity of her boyfriend, of her anaesthetized penis, and the like, furnish the feature continually insisted upon: an identification which is consistently feminine. Much of the instrumental realism that she directed to the management of her chosen sexual status was concerned with so managing her circumstances as to avoid what she treated as a mistaken and degrading identity. Confounding the two were matters of objectively assessable error, ignorance, and injustice on the parts of others. Those of her defenses which cost her dearly in effectiveness and reality orientation were directed to keeping the distances between her natural normal femi-

ninity and male homosexuals in repair. Time after time in the course of our meetings when I directed the conversation to homosexuals and transvestites Agnes had a great deal of difficulty, simultaneously managing her fascination for the topic and the great anxiety that the conversation seemed to generate. The picture she would present then was that of a mild depression. Her answers would become impoverished. Occasionally her voice would break as she denied knowledge of this or that. There was a repeated insistence that she was in no way comparable. "I'm not like them," she would continually insist. "In high school I steered clear of boys that acted like sissies . . . anyone with an abnormal problem . . . I would completely shy away from them and go to the point of being insulting just enough to get around them . . . I didn't want to feel noticed talking to them because somebody might relate them to me. I didn't want to be classified with them."

Just as normals frequently will be at a loss to understand "why a person would do that," *i.e.*, engage in homosexual activities or dress as a member of the opposite sex, so did Agnes display the same lack of "understanding" for such behavior, although her accounts characteristically were delivered with flattened affect and never with indignation. When she was invited by me to compare herself with homosexuals and transvestites she found the comparison repulsive. Although she wanted to know more, when I proposed that a transvestite who was being seen by another researcher was interested in talking with her she refused to have any contact with him. Nor would she consider talking with any of the other patients that I mentioned to her who we were seeing who had experiences similar to hers. When I told her that a group of about seventeen persons in San Francisco who had either received or were planning to have a castration operation were interested in meeting and exchanging experiences with persons with similar problems, Agnes said that she could not imagine what they would have to talk with her about and insisted that she was in no way any concern of theirs.

As we have seen, she insisted that her male genitals were a trick of fate, a personal misfortune, an accident, above all "it was beyond my control" whose presence she never accepted. She treated her genitals as an abnormal growth. Occasionally she would speak of them as a tumor. With genitals ruled out as essential signs of her

femininity, and needing essential and natural signs of female sexuality, she counted instead the life-long desire to be a female and her prominent breasts. Her self-described feminine feelings, behavior, choices of companions, and the like were never portrayed as matters of decision or choice but were treated as given as a natural fact. As they were displayed in her accounts, their natural exercise would have been displayed from the beginning, she insisted, were it not for a misdirecting, frustrating, misunderstanding environment.

Before all she counted her breasts as essential insignia. On several occasions in our conversations she expressed the relief and joy she felt when she noticed at the age of twelve that her breasts were starting to develop. She said that she kept this discovery from her mother and siblings because "it was none of their business." It was clear from her later remarks that she meant by this that she feared that they would regard the development of the breasts as a medical abnormality and because of her age and incompetence might decide, regardless of and contrary to her wishes and to what she felt that she could have enforced upon them, that she receive medical attention and thereby risk their loss. She took particular pride in the size of her breasts, as she did in her measurements. Prior to the operation she was fearful that "the doctors at U.C.L.A." would decide among themselves, and without consulting her, and at the time of the operation, that the remedy for her condition consisted in amputating her breasts instead of her penis and scrotum. Following the operation, because of endocrinological changes and for other reasons, she lost weight. Her breasts became smaller; her chest measurement dropped from 38 to 35. The distress that she showed was sufficiently apparent to have been considered by us as one of the factors making up a short-lived but severe postoperative depression. When the Departments of Endocrinology and Urology had finished their medical work, but before the operation, she permitted herself a mild optimism which she kept under heavy check by the continual reminder that the decision was no longer in her hands, and by reminding herself, me, Stoller and Rosen that on prior occasions, most particularly after examinations in her home town, after permitting herself great optimism, she had been left with "nothing but encouragement. Just words." When she was told to report to the U.C.L.A.

Medical Center and that the decision had been made to amputate the penis and make an artificial vagina for her, she spoke of the decision with great relief. She spoke of the medical decision as an authoritative vindication of her claims to her natural femininity. Even the complications following the operation furnished episodes of pleasurable vindication. For example, following the operation she developed a mild urethral drip for which she had been advised by the physician to wear a Kotex pad. When I observed rather pleasantly that this was certainly a new experience for her, she laughed and was obviously pleased and flattered.

There were many occasions when my attentions flattered her with respect to her femininity; for example, holding her arm while I guided her across the street; having lunch with her at the Medical Center; offering to hang up her coat; relieving her of her handbag; holding the automobile door for her while she entered; being solicitous for her comfort before I closed the auto door and took my own seat behind the wheel. At times like this her behavior reminded me that being female for her was like having been given a wonderful gift. It was on such occasions that she most clearly displayed the characteristics of the "120 per cent female." At such times she acted like a recent and enthusiastic initiate into the sorority of her heart's desire.

Achieving the ascribed properties of the natural, normal female

The natural, normal female was for Agnes an ascribed object.⁵ In common with normals, she treated her femininity as independent of the conditions of its occurrence and invariant to the vicissitudes of desires, agreements, random or willful election, accident, considerations of advantage, available resources, and opportunities. It remained for her the temporally identical thing over all historical and prospective circumstances and possible experiences. It remained the self-same thing in essence under all

⁵ Parsons treats "ascription" as a "relation concept." Any feature of an object may be treated by the actor according to the rule of its invariance to considerations of adaptation and goal attainment. This property of any feature's treatment Parsons speaks of as "ascription." A person's sex is a common illustration, but not because of the properties of a person's sex but because and only because a person's sex is frequently treated this way.

imaginable transformations of actual appearances, time, and circumstances. It withstood all exigencies.

The ascribed, normal natural female was the object that Agnes sought to achieve for herself.

Two meanings of "achievement" are meant in speaking of Agnes' having achieved her status as a female. (1) Having become female represented for her a status up-grading from that of a male which was for her of lesser value than the status of a female. For her to be female made her a more desirable object by far in her own eyes and, as she was realistically convinced, in the eyes of others as well. Prior to the change and afterwards as well, the change to female not only represented an elevation of herself as a worthwhile person, but was a status to which she literally aspired. (2) The second sense of achievement refers to the tasks of securing and guaranteeing for herself the ascribed rights and obligations of an adult female by the acquisition and use of skills and capacities, the efficacious display of female appearances and performances, and the mobilizing of appropriate feelings and purposes. As in the normal case, the tests of such management work occurred under the gaze of and in the presence of normal male and female others.

While her claims to her natural femininity could be advanced they could not be taken for granted. Many matters served as obstinate reminders that her femininity, though claimed, could be claimed only at the cost of vigilance and work. Prior to the operation she was a female with a penis. The operation itself substituted one set of difficulties for another. Thus, after the operation she was a female with a "man-made" vagina. In her anxious words, "Nothing that is made by man can ever be as good as something that nature makes." She and her boyfriend were agreed on this. In fact, her boyfriend who, in her accounts of him, prided himself as a harsh realist, insisted on this and taught it to her to her dismayed agreement. In addition, her brand new vagina proved to be recalcitrant and tricky. Shortly after the operation an infection developed from the mold. When the mold was removed adhesions formed and the canal would no longer receive a penis-sized mold. Manual manipulations to keep the canal open had to be done out of the sight of others and with care that the nature of this private work remain concealed. These manipulations caused pain. For many weeks after the operation she suffered discomfort and was

exasperated and humiliated by fecal and urethral dripping. This was followed by further hospitalization. There were mood changes and feelings that she had lost the sharpness, alertness, and definiteness of her thoughts. Unpredictable mood changes produced severe quarrels with her boyfriend who threatened to leave her if she showed any further anger with him. In addition there was the reminder that while she now had the vagina that she had with it a male biography. She would say, "There is a big gap in my life." In addition there was the fact that the change to a public feminine appearance had been made only three years before. Most of her prior rehearsals had been those in imagination. Thus she was still learning to act and feel like a woman. She was learning this new role only as a function of actually playing it out. There were risks and uncertainties involved. The job of securing and guaranteeing the rights of female by coming to deserve such attributions through her accomplishments—through her success in acting out the female role—thereby involved her in circumstances whose omnirelevant feature was that she knew something vitally relevant to the accepted terms of the interaction that the others did not know and that she was in fact engaged in the uncertain tasks of passing.

What were some matters that after and/or before the operation Agnes was required to hide?

1. Prior to the operation the contradictory insignnia of her feminine appearance; the masked male genitals.
2. That she was raised as a boy and thus did not have a history to correspond to her appearance as an attractive female.
3. That she made the change only three years before and was still learning to act like the thing that she wanted to be taken for.
4. That she was unable and would be unable to fulfill the things expected of her by males who were attracted to her precisely to the extent that she succeeded in putting herself over as a sexually attractive female.
5. There was a man-made vagina.
6. That she wanted the penis and scrotum removed and a vagina constructed in its place. After the operation that she had a vagina that had been constructed from the skin of an amputated penis, and labia from the skin of the lost scrotum.

7. There were the matters to mask about the sexual services that her boyfriend demanded that she somehow satisfied.
8. There was what she did, and with whose help, to alter her appearance.
9. There were the activities of active management of persons around her in order to achieve the operation, most particularly the physicians and research personnel at U.C.L.A., and of course the medical personnel during the years when she sought medical help.

Agnes sought to be treated and to treat others according to a legitimate sexual status, while there accompanied this a deep dark secret which was concerned not with the skills and adequacy with which she acted out the status but with the legitimacy of her occupancy. For Agnes, acting out the new status was accompanied by the feelings that she knew something that the other person did not know, the disclosure of which, she was convinced and feared, would ruin her. The sex status transfer involved the assumption of a legitimate status the disclosure of which involved great risks, status degradation, psychological trauma, and loss of material advantages. This kind of passing is entirely comparable to passing found in political undergrounds, secret societies, refugees from political persecution, or Negroes who become whites. In Agnes' case it is of particular interest because the change of sexual status was accompanied by her paying marked and deliberate attention to making the new identity secure against some known and many unknown contingencies. This was done via active and deliberate management of her appearances before others as an object. She placed great stress on manners and proprieties and manipulation of personal relationships. The work had to be done in situations known with the most faltering knowledge, having marked uncertainty about its rules of practice, with severe risks and important prizes simultaneously involved, one not being available without the other. Punishment, degradation, loss of reputation, and loss of material advantages were the matters at risk should the change be detected. In almost every situation of interaction the relevance of the secret operation as background knowledge. Her concern to escape detection had a value of highest priority. Almost every situation had the feature therefore of an actual or potential "character and fitness" test. It would be less accurate to say of her that

she has passed than that she was continually engaged in the work of passing.

Passing

The work of achieving and making secure her rights to live as a normal, natural female while having continually to provide for the possibility of detection and ruin carried on within socially structured conditions I call Agnes' "passing." Her situations of activity—a very large number of them—were chronically ones of "structured strain." We may think of them as socially structured situations of potential and actual crisis. Sociologically speaking, the stress is a "normal stress" in the sense that the stress occurred precisely because of her active attempts to comply with a *legitimate order* of sex roles. Each of a great variety of structurally different instances required vigilance, resourcefulness, stamina, sustained motivation, preplanning that was accompanied continually by improvisation, and, continually, sharpness, wit, knowledge, and very importantly her willingness to deal in "good reasons"—i.e., to either furnish or be ready to furnish reasonable justifications (explanations) or to avoid situations where explanations would be required.

Passing was not a matter of Agnes' desire. It was necessary for her. Agnes had to be a female. Whether she liked it or not she had to pass. She enjoyed her successes and feared and hated her failures. When I asked her to tell me the "real good things" that had happened to her she talked about her first job after her return to her home town; fun on group dates in her home town after the change; living with her roommate in Los Angeles; her skill as a stenographer; a succession of increasingly better jobs; the operation eight weeks afterwards when the new vagina looked good, was finally healing without pain, and to the surprise of the surgeons was responding to her efforts to achieve five inches of depth. "Of course the best thing that ever happened to me was Bill."

When I asked Agnes if there were any "real bad things" that had happened to her, the strain in her attempt to reply was so evident that I found it necessary to modify the question and asked instead for some things that were "bad things but not such bad things." To this she replied, "Being noticed (in grammar and especially

high school) and being noticed that I didn't have any friends or companions or anything." (After pausing). "I didn't have friends because I didn't react normally under any kind of a relationship like that. I couldn't have a boyfriend. I didn't want a boyfriend. Because of the way I was I couldn't have girlfriends either, so there I was . . . I didn't have friends because I couldn't react normally under any kind of a relationship like that." I asked why she couldn't have friends. "How could I have girlfriends? How could I have pals?" My question: why not? "I probably felt it would be impossible. At school I didn't joke around with the girls or pal around or do anything like that because then I was being very conspicuous." From her other descriptions, particularly difficult times can be briefly, but of course not exhaustively, enumerated as follows: growing up; the three years of high school; life at home immediately after the change; the attitudes of family, neighbors, and former friends after she returned from Midwest City; the acute disappointment when she was told that no action could be taken after her examinations and exploratory laparotomy in her home town; managing her boyfriend Bill's demands for intercourse; the episode with Bill when she finally disclosed to him that she had a penis between her legs; managing her conversations with us at U.C.L.A. in the hope that the decision would be favorable and that the operation would be done soon; her fear that the doctors would decide to amputate her breasts instead of her penis and that she was committed to an operation the decision being no longer within her control; following the operation her convalescence which lasted approximately six weeks and which was marked by a moderate depression, quickly changing moods which she was unable either to control or to justify to herself or to her boyfriend, and a succession of severe quarrels with her boyfriend; a recalcitrant vagina that would not heal properly and had a fraction of the depth she had hoped for; a severe bladder infection that required rehospitalization; the reduction in the size of her breasts from 38 inches to 35 and her attendant fear that the penis was after all necessary to keep her feminine appearance; her changed relationship with Bill for three months following the operation; and finally, anticipatorily, Los Angeles, if her marriage plans did not materialize.

The "real good situations" were those in which the work of

passing permitted her the feelings of, and permitted her to treat others and to be treated by others as, a "normal, natural girl." The "real bad things" were the situations in which the management work, for various reasons, failed or promised to fail. Only in retrospect did they acquire the dramatic features of successes or failures. For our interests the critical cases were those that had to be handled in *their course*. What kinds of situations were they? How did she manage over their course to come to terms with them? In many of these situations and somehow, despite the socially structured character of the crises, she achieved some approximation to routinized management and "life as usual."

An illustrative instance may be used to introduce our discussion of these questions.

Before reporting for a physical examination for a job that she later obtained with a large insurance company, and because she had had similar previous physical examinations, Agnes decided that she would allow the physician's examination to proceed as far as her lower abdomen. If the physician then proceeded or gave any indication of examining the genital area she had decided to protest modestly and if this wasn't enough to put the physician off she would simply leave, perhaps feigning modesty, or if necessary giving no excuse. It was much to be preferred to forego the job than to risk disclosure, with one condition being dependent of course upon the other.

In instance after instance the situation to be managed can be described in general as one in which the attainment of commonplace goals and attendant satisfactions involved with it a risk of exposure. She employed a strategy by which she was prepared to get out from under if exposure seemed likely though at the cost of sacrificing these advantages. Her characteristic situation in passing was one in which she had to be prepared to choose, and frequently chose, between securing the feminine identity and accomplishing *ordinary* goals. Her chronic situation was one in which both conditions had to be simultaneously satisfied by her active deliberate management. The thing that she knew that others did not know was that the two conditions—managing to obtain opportunities for institutionalized and commonplace satisfaction, while minimizing the risk of disclosure—were ranked in a fixed priority: security was to be protected first. The common satisfac-

tions were to be obtained only if the prior conditions of the secured identity could be satisfied. Risks in this direction entailed the sacrifice of the other satisfactions.

A variety of situations furnish us with the variations on this essential theme.

Passing occasions

To help collect my thoughts about the various occasions on which Agnes had to pass, I tried to think of these situations as a game. When I did so only a comparatively small amount of the material that was collected from Agnes can be handled without encountering severe structural incongruities. In addition the materials that *can* be conceived under the auspices of a game, while they facilitate comparisons between the passing occasions, also seem not to be particular to Agnes' experiences in sexual passing. The materials that *are* particular to sexual passing are difficult to clarify with the notion of a game because of the structural incongruities that are motivated by applying the model.

The following formal properties of games facilitate the analysis of one set of these materials but interfere with it for the other set.

(1) There is the peculiar time structure of games and events in games. For the players, as of any present state of the game, there is potentially available to each the knowledge that by a time the game will have been completed. (2) If things go badly it is possible for a player to "leave" the game or to change it to another one and the like. (3) To be "in the game" involves, by definition, the suspension of the presuppositions and procedures of "serious" life. Many commentators on games have taken notice of this feature by speaking of the game as an "artificial world in microcosm." (4) The mutual biographies that are established for players as a function of their actual play together, furnish precedents that are particular to that game's interactions. (5) An accomplished play of a game consists of an encapsulated episode. The rules and actual accomplished course of play furnish the episode its entire character as a texture of relevances. (6) Characteristically, success and failure are clearly decidable and one or the other outcome is ordinarily very little subject to reinterpretation. Players need not await developments outside of the play of the game in order to permit

decisions as to what the episode was all about. (7) Insofar as the players are committed to compliance with the basic rules that define the game, the basic rules provide for players the definitions of consistency, effectiveness, efficiency, *i.e.*, of rational, realistic action in that setting. Indeed, actions in compliance with these basic rules define in games "fair play" and "justice." (8) Although strategies may be highly improvised and although the conditions of success and failure may, over the course of play, be unclear to the players, the basic rules of play are known and are independent of the changing present states of the game and of the selection of strategies. The basic rules are available for use by players and presumed by players to be available as required knowledge that players have prior to the occasions under which these rules might be consulted to decide among legal alternatives. (9) Within the basic rules, procedures of strict instrumental efficacy are, in principle, adoptable by either player, and each player can assume this for himself or for his opponent or insist upon them for himself and his opponent without impoverishing his grasp of the game.

The game illuminates several of Agnes' passing occasions both as a texture of relevant environmental possibilities and in its operational structure. The game applies, for example, to her management of beach attire. The problematic situation was one of simultaneously accompanying friends, males and females, to the local Santa Monica beach without risking disclosure. Instrumental devices provided adequate solutions to the problem. Agnes wore tight-fitting underpants and a bathing suit with a skirt. In her words "I don't know why, it's a miracle, but it doesn't show." She would go along with the crowd, reciprocating their enthusiasm for bathing, if or until it was clear that a bathroom or the bedroom of a private home would be available in which to change to her bathing suit. Public baths and automobiles were to be avoided. If the necessary facilities were not available excuses were easy to make. As she pointed out, one is permitted not to be "in the mood" to go bathing, though to like very much to sit on the beach.

Similarly, Agnes talked about the desirability of having a job that was comparatively close and preferably within walking distance of her residence, and in any case one that permitted the use of public transportation. Although Agnes drove an automobile she did not own one. She feared an accident, being rendered unconscious, and thereby risking exposure.

Another example. After she arrived in Los Angeles she roomed with a girlfriend. The situation was managed by a general understanding with her roommate to respect each other's privacy and to avoid nudity in each other's presence. On one occasion a problem arose for Agnes. While taking off her dress she exposed the scar from the exploratory laparotomy. A friendly question from her roommate was met by the explanation that it was an operation for appendicitis. Agnes told me that it occurred to her when she told this to her roommate that the question might remain for the roommate of why an appendicitis operation should leave such a long and ugly scar. She offered, therefore, the uninvited explanation that "there had been complications" and counted on the fact that the roommate did not have enough medical knowledge to know the difference.

A more complicated game but nevertheless one in which game resources were employed, occurred on the occasion that her brother's boyfriend visited his home after the brother was married. Agnes, her brother, her sister-in-law, and her cousin Alice, for whom Agnes had intense feelings of rivalry, were in the living room when the brother's boyfriend entered. Later the brother left the room with the boyfriend to see him to his car. When the brother re-entered the room he said that the boyfriend had asked him, "Who is that good-looking chick?" Agnes said that her cousin Alice assumed that the boyfriend meant Alice. When the brother pointed out ironically that Agnes had been meant, Alice became angry. Agnes here depended upon family discipline to protect her against humiliation. But this very family discipline, while it permitted the victory, soured the victory as well. Agnes described a structurally similar incident when she was shopping with her brother and was taken by the clerk as his wife. Agnes was flattered and amused. Her brother was not amused at all. She could rely on her brother to respect the family secret but she could rely upon him as well to remind her later of how disapproving he was of the change.

Dating, both in her home town and in Los Angeles before she started going with Bill, furnishes other occasions that exhibited the game properties of episodic character, preplanning, and a reliance upon instrumental knowledge of rules that she could assume were known and binding upon the various parties in a more or less

similar way. Despite an interest in pickups she refused any pickups. Prior introductions were the order of the day, most particularly because they permitted her to postpone the date until she and her girlfriends had consulted with each other on a character checkup for the new prospect. Necking was handled according to the rule: no necking on the first date; maybe on the second. As Agnes said, "If you neck with a boy on the first date and say no on the second date, then you have trouble." Some petting was permitted but under no circumstances below the waist. She delighted in the thought that some boy was a "wolf" but would not go out with a wolf. In any case there was safety in numbers so multiple dating and house and church parties were preferred. Agnes did not drink. She said she had never been drunk and said she would never permit herself to be drunk.

One of the more intricately worked out game-structured episodes occurred when Agnes had to furnish a urine specimen when she was examined as part of a physical examination for a job with an insurance company. On the day she applied for the job and at the time of the personal interview, a physical examination was scheduled for the same day. She had little time to prepare. To manage the risks involved in having to expose her body she found it necessary to improvise. She was asked to furnish a urine specimen and was invited by the physician to use a urinal in his office. She had expected a toilet with a door. A threat resided in the fact that the nurse, because she was entitled to enter the office, would come in while Agnes was manipulating her genitals. Agnes made the excuse to the physician after sitting on the urinal but deliberately doing nothing that she was unable to urinate but that she would be happy to return the specimen later in the day. When he agreed she returned to her apartment where she had a female roommate. It then occurred to her that it might be possible from an examination of the urine to determine the sex of the person. Not knowing whether or not this was so and not knowing how thorough the urinalysis would be, but being unwilling to run any risks on either score, she told her roommate that she had a mild kidney infection and was afraid that if the infection showed up in the urine she would be turned down for the job. The roommate did her the favor of furnishing her the bottle of urine which Agnes submitted as her own.

On another occasion she had just obtained a job as a legal secretary as the only girl in the office for a small firm of two lawyers who had just started their practice. Agnes was delighted with the job, most particularly because she was unqualified for it at the time that she was hired. Her employers, not being able to afford more, were willing to buy a lesser skilled employee for less pay. This arrangement couldn't have suited Agnes more since it was both an opportunity for more interesting work and a chance to upgrade her stenographic skills. Several months after the work began, the castration operation was scheduled at U.C.L.A. It was necessary then to arrange time out from the job in order to have the operation, but to arrange it as well so as to ensure that her employers would hire only a temporary replacement. It was her secondary goal that she be given a letter of recommendation by them in the event that she was not able to return in time, and that the letter say that she had worked there for six months instead of the actual two months in order that she not be required later to explain her absence to another employer given that she already had a work history with several short intervals, and of course in order to continue working as a legal secretary. This was managed by having the urological surgeons at U.C.L.A. call her employers and tell them, in league with Agnes, that she would be temporarily hospitalized for a severe bladder infection.

One of the most dramatic game-like passing occasions consisted in the series of events that terminated in the trip to Midwest City, her change, and her return home. Agnes made the trip in August, 1958. For several months prior to the trip she prepared for the change. She said that in about two months time she lost twenty-five pounds. This produced the attractive shape that she later turned up with at U.C.L.A. The diet was self-imposed. None of the family, said Agnes, had any knowledge of her intent and of the place that the developing attractive female shape had in her plans. She managed the inquiries from various family members by pro-testing. "All kinds of people go on diets, don't they?" She spent considerable time in her room rehearsing the actions that would be appropriate to the new appearance. Her family understood that the trip to Midwest City would consist of a month's vacation which she was to spend with her grandmother. Agnes had many relatives in Midwest City who had not seen her for many years. She planned

minimum contacts with them during her stay by staying with her grandmother. While she had relatives in many other cities, Midwest City was chosen because it was a large city. According to plan, at the end of August she left her grandmother's home early one morning leaving no note or any other indication as to her reason for leaving or her whereabouts. Taking a room in a downtown hotel she changed into female clothes and went to a local beauty shop where her hair, which was short, was cropped and rearranged in the Italian cut that Sophia Loren had made popular. She had planned to remain in Midwest City and to obtain work having picked the city, she said, because it was large enough to provide work opportunities and necessary anonymity, but was also large enough to permit her to avoid relatives. If they did meet, she reasoned, the relatives would not recognize her because they had not seen her for many years. Further, if she did meet them, and they asked, she would deny who she was. She counted for a fact, "Most people wouldn't insist that they knew you anyway." As it turned out, "I had not planned carefully enough." Confronted with the necessity of having to earn her own way, having no prior job experience to speak of, not knowing how to proceed to find the job that she needed, having only low-grade skills as a typist, and still being uncertain about her skills as a female, she became frightened of the risks of failure. When I asked why she was unable to go back to her grandmother she replied, "How could I? She wouldn't even know who I was. She was seventy-two. How could I ever tell her something like *that*?" Finally, she had very little money; as she said, "just enough to get home." On the evening of the day that she made the change she telephoned her mother, told her what she had done, and, according to Agnes' story, upon her mother's urging returned home that evening by bus in her new female attire. The trip was made pleasant, she said, by the attentions of several soldiers.

Passing occasions that the game model does not analyze properly

There are many occasions which fail to satisfy various game properties. When the game is used to analyze them, the analysis contains structural incongruities.

One type of such an occasion occurred very frequently: Agnes, by acting in the manner of a "secret apprentice" would learn, as she told it, "to act like a lady." Its feature was something like this: Agnes and her interaction partners would be directed to a valuable mutually understood goal while at the same time another goal of equivalent value, to which the other person contributed, remained known to Agnes alone and was carefully concealed. In contrast to the episodic character of the occasions that were described previously, such an occasion was characterized by its continuing and developmental character. Further, its "rules" are learned only over the course of the actual interaction, as a function of actual participation, and by accepting the risks involved.

Several persons were prominent in her accounts with whom she not only acted like a lady but learned, from them, how to act like a lady. An important partner-instructor was Bill's mother in whose home she spent a great deal of time as a prospective daughter-in-law. Bill's mother was of Dutch-Indonesian ancestry and supported herself as a dressmaker. While teaching Agnes how to cook Dutch dishes to please Bill, she also taught Agnes how to cook in the first place. Agnes said that Bill's mother taught her dressmaking and materials; she taught her which clothes she should wear; they discussed dress shops, shopping, styles that were appropriate for Agnes, and the skills of home management.

Agnes spoke of the "long lectures" that she would receive from Bill upon occasions that she did something which he disapproved. One evening he returned from work at around five in the afternoon to find her sunbathing on the lawn in front of her apartment. She learned a great deal from his detailed and angry arguments of the ways in which this "display in front of all those men coming home from work" was offensive to him, but attractive to other men.

On another occasion she received a lecture from Bill on how a lady should conduct herself on a picnic. This he did by angrily analyzing the failings of a companion's date who had insisted, in his angry account, on wanting things her own way, of offering her opinions when she should have been sweet, of complaining in her manner when she should have been retiring, of being sharp instead of taking things as they were, of professing her sophistication instead of being innocent, of acting bawdy instead of abjuring any claims of equality with men, of demanding services instead of

looking to give the man she was with pleasure and comfort. Agnes quoted Bill with approval: "Don't think the others are taking your part when you act like that. They're feeling sorry for the guy who has to be with her. They're thinking, where did he ever pick her up!"

With her roommates and wider circles of girlfriends Agnes exchanged gossip, and analyses of men, parties, and dating post-mortems. Not only did she adopt the pose of passive acceptance of instructions, but she learned as well the value of passive acceptance as a desirable feminine character trait. The rivalry with her female cousin, for all its hurtfulness, furnished her instruction by forcing a reflection upon the things that were wrong with her cousin, while claiming for herself qualities that contrasted with those that she found to criticize in the cousin.

On these occasions Agnes was required to live up to the standards of conduct, appearance, skills, feelings, motives, and aspirations while simultaneously learning what these standards were. To learn them was for her a continuous project of self-improvement. They had to be learned in situations in which she was treated by others as knowing them in the first place as a matter of course. They had to be learned in situations in which she was not able to indicate that she was learning them. They had to be learned by participating in situations where she was expected to know the very things that she was simultaneously being taught.

An occasion that was very much like that of the secret apprenticeship was one in which she permitted the environment to furnish her the answers to its own questions. I came to think of it as the practice of "anticipatory following." This occurred, I regret to say, with disconcerting frequency in my conversations with her. When I read over the transcripts, and listened again to the taped interviews while preparing this paper, I was appalled by the number of occasions on which I was unable to decide whether Agnes was answering my questions or whether she had learned from my questions, and more importantly from more subtle cues both prior to and after the questions, what answers would do. For another example, on the occasion of the physical examination for the insurance company job the examining physician palpated her abdomen. Agnes was uncertain as to what he was "feeling for." "Maybe he was feeling for my 'female organs'" (of course she has none),

"or for something hard." To all his questions about pain or discomfort she answered that there was none. "When he didn't say anything I figured he hadn't found anything unusual."

Another common set of occasions arose when she engaged in friendly conversation without having biographical and group affiliation data to swap off with her conversational partner. As Agnes said, "Can you imagine all the blank years I have to fill in? Sixteen or seventeen years of my life that I have to make up for. I have to be careful of the things that I say, just natural things that could slip out . . . I just never say anything at all about my past that in any way would make a person ask what my past life was like. I say general things. I don't say anything that could be misconstrued." Agnes said that with men she was able to pass as an interesting conversationalist by encouraging her male partners to talk about themselves. Women partners, she said, explained the general and indefinite character of her biographical remarks, which she delivered with a friendly manner, by a combination of her niceness and modesty. "They probably figure that I just don't like to talk about myself."

There were many occasions whose structure was such as not to contain any criteria whereby a goal could be said to have been achieved, a feature intrinsic to game activities. Instead, success in managing the present interaction consisted in having established or sustained a valuable and attractive character, of acting in a present situation that was consistent with the precedents and prospects that the presented character formulated, and for which present appearances were documentary evidences. For example, Agnes said that it was soon clear to her after she started working for the insurance company that she would have to quit the job. The duties were dull and unskilled and there was little chance for advancement. The little innovations that she made in order to make the job more interesting gave only temporary relief. She wished very much to up-grade her skills and to establish a more impressive job history. For these reasons she wished to quit the job for a better one but would have had to quit in the face of Bill's opposition. She was convinced that he would credit none of these reasons but would instead use the reasons she gave as evidences of deficiencies in her attitude toward work. He had admonished her that for him, quitting for such reasons was not acceptable and that if she quit it would only reflect again on her immaturity and irresponsibility.

When she quit nevertheless she justified it by saying that it was entirely out of her hands. She had been fired because of a work lay-off. This was not true.

A further set of passing occasions are particularly resistant to analysis as games. These occasions have the features of being continuous and developmental; of a retrospective-prospective significance of present appearances; of every present state of the action being identical in meaning with the situation-as-it-has-developed-thus-far; in which commonplace goals could neither be abandoned, postponed, or redefined; in which Agnes' commitment to compliance with the natural, normal female was under chronic threat or open contradiction; and in which remedies were not only out of her hands but were beyond the control of those with whom she had to deal. All of these situations, both by her reports as well as by our observations, were stressful in the extreme.

One such "occasion" consisted of the continuing tasks that Agnes referred to as "remaining inconspicuous." Agnes said that this was very much a problem in high school. She insisted, "to set you right," that this was no longer her concern, and that it had been replaced by a fear of being exposed. The fact is, nonetheless, that it remained very much a matter of concern. My impression is that Agnes said this because of the way in which the problem had been brought up in our conversation. I had introduced it to her by relating to her comments by E.P., a male patient, about his pre-occupation with remaining inconspicuous. I described E.P. to her as a person who was much older than she, had been raised as a female and at eighteen had had a castration operation which removed a vestigial penis. I told her that E.P. had continued to dress as a female but wanted to be treated as a male; and that the change for E.P. had occurred only several years before. I described E.P.'s appearance and illustrated his preoccupation with remaining inconspicuous with E.P.'s account of "this kind of nasty thing is always happening to me." *i.e.*, of being approached in a bar by a man who would say, "Excuse me, my friend and I over there have a bet. Are you a man or a woman?" Agnes immediately detected E.P.'s "abnormality" and denied flatly that she and E.P. were in any way comparable. In this context she said that she did not recognize that the problem of remaining inconspicuous was any longer a problem for her.

Agnes described the problem of remaining inconspicuous in

high school by talking about the way she avoided being conspicuous: by never eating in the high school lunch room; by joining no clubs; by restricting her physical movements; by generally avoiding conversations; by avoiding at any cost "those boys who had something queer about them"; by wearing a loose shirt somewhat larger than her size and sitting with her arms folded in front of her, leaning forward on the desk so that her breasts did not show; by avoiding choices of either male or female companions; by sitting in the far rear corner of every classroom and not responding to classroom discussions so that, as Agnes said, "whole days would pass and I wouldn't say a word"; and by following a rigid schedule of time and movements around the high school building so that, as her account of it runs, she always entered the same gate to the schoolyard entering the same door to the schoolroom, following the same path to her room, arriving at the same time, leaving by the same exit, following the same path home, and the like. This account had come up in reply to my question, "Was there any particular bad situation that occurred?" to which she replied, "I don't know about any particular bad situation but just that these things that were so obvious that you couldn't hide. . . . My general appearance . . . it was very obvious that it wasn't masculine, too masculine." Despite all this, Agnes compromised her dress. She said that she dressed "pretty much the same way" in grade school as in high school. Her typical outfit consisted of white corduroy pants and a shirt worn open at the neck which she arranged in the manner of a loose blouse. It turned out that the loose blouse as a management device was taught to her by her brother. Even with the developing breasts she had preferred to wear her blouse tightly tucked in. She changed only upon the disapproval of her brother who was a few years older than she and attended the same school, who was embarrassed by her appearance because of its feminine overtones and berated her for dressing like a girl. Her brother urged that she loosen the shirt. It was her brother, too, who complained that she carried her books like a girl and who demonstrated to her and insisted that she carry them like a boy.

Another example of an "occasion of continuous development" consisted of having to manage the opinions of friends, neighbors, and family after her return from Midwest City. These were circles that Agnes complained "knew all about her from before." In the

first part of her remarks when this topic came up she had asserted flatly that the problem of remaining inconspicuous was not a problem "even when I got home from Midwest City." A few moments later in that conversation when I questioned her rather closely about what her mother, her brother and sisters, previous friends, her mother's friends, and neighbors had to say, and how they treated her after her return, Agnes said, "It was so different that nobody in town knew how to treat it." Then after saying, "Everyone treated me nice; nicer than they ever treated me before, and they accepted me. They just wanted to find out," she changed her story. From the time of her return from Midwest City until she left for Los Angeles life was described by her as "terrible." She accepted her work experiences on her first job in her home town. In a later interview she said that she would never return to her home town. After the castration operation was performed at U.C.L.A. she talked of how much she wished to leave Los Angeles because she felt that so much was known about her and so many people knew about her, "All these doctors, nurses, and interns, and everybody."

A part of this situation was the rivalry with her cousin Alice and the combination of rivalry and mutual disapproval that went on between Agnes and her sister-in-law. After her return from Midwest City there was open disapproval and overt expressions of anger from her sister-in-law, her aunt, and most particularly her brother, who continually wanted to know "when she was going to stop this thing." Agnes said that those memories were painful and that she hated to remember them. To obtain her comments on them required considerable effort with questionable results because of the prominence of her denials and idealizations. She would repeat, "They accepted me" or she would deny that she could be expected to know *what* the others were thinking.

Another such "occasion" focused on the unsuccessful management by all parties concerned of the impugned self-esteem that Agnes suffered by the fact that an arrangement had been made after she dropped out of high school to continue her high school education with the use of a tutor that was provided by the public schools. Agnes did not return to high school in September, 1957 which would have been her senior year. Instead, according to Agnes' report, her mother arranged with the vice principal of the

high school for the services of a teacher furnished by the public school system who came each day to her house. Agnes was very evasive in saying what she and her mother had talked about in this respect and what kind of arrangement the two might have agreed or disagreed on about her schooling and tutor. Agnes professed to have no information on this agreement and claimed not to know what her mother thought about the arrangement, or what the mother had discussed specifically with the vice principal. Agnes claimed further to be unable to recall how long each one of the tutorial sessions lasted or how long the home visits continued. The vagueness and apparent amnesia led us to feel that these were memories about which Agnes had said that she hated to "remember." Agnes did describe, though briefly, the period during which she was tutored as one of great discontent and chronic conflict with her mother. From my first inquiries about this discontent she insisted that though she had had a great deal of time, and that retrospectively she saw that she could have done more with it than she did, "I felt like a recluse . . . I wanted to go out and meet people and have a good time. Before I went to Midwest City I could hardly bear to leave the house. After I came back I wanted to start going out and having a social life and mix in public and there I was, cooped up in the house with nothing to do." Along with this Agnes furnished the brief comment that the special teacher was also one who taught other pupils who, as Agnes described them, were "abnormal in some way." Given Agnes' general refusal to consider her condition as that of an abnormal person, it was my feeling that she might have refused to comment further because of a general refusal to acknowledge in any way that she was "abnormal" as well as her insistence that except for a misunderstanding and hostile environment she would have been able to act and feel "naturally and normally."

One of the most dramatic "nongame-analyzable occasions" started with the castration operation and lasted for approximately six weeks afterwards.⁸ Starting with the convalescence in the hospi-

⁸ NOTE: The following alternative description of the two week period immediately following the operation was written by Robert J. Stoller. Reasons for including it are made clear at the conclusion of the study.

"One of the most dramatic 'non-game analyzable occasions' started with the castration operation and lasted for approximately two months. Starting im-

tal immediately following the operation Agnes tried to sustain the privacy in the management of the care of her vagina by arranging for her own sitz-bath, and herself changing the dressing for the wound. This she insisted on doing out of the sight of the nurses and interns whom she resented. From her accounts, apparently, the nurses resented her as well. The vagina did not heal properly. An infection developed shortly after the operation. A large penis sized plastic mold had to be removed in order to facilitate healing with the result that adhesions developed and the canal closed down over its entire length, including the opening. The promised depth was lost and attempts to restore it by manual manipulation were made by both the attending surgeon, and under his advice, by

mediately postoperatively, Agnes tried to sustain privacy in managing the care of her vagina by arranging to give herself the prescribed sitz baths and changing her own surgical dressings. She insisted on doing this out of sight of the nurses and house officers, which may have added to the resentment the nurses felt toward her. Immediately postoperatively, she developed bilateral thrombophlebitis of the legs, cystitis, contracture of the urethral meatus, and despite the plastic mold which was inserted into the vagina at the time of surgery, a tendency for the vagina outlet to contract. She also required postoperatively several minor surgical procedures for modification of these complications and also to trim the former scrotal tissue to make the external labia appear more normal. Despite the plastic mold, the newly-made vagina canal had a tendency to close and heal, which required intermittent manipulations of the mold and daily dilatations. Not only were all of these conditions painful or otherwise uncomfortable but also, although minor, since they were frequent, they produced increasing worry that the surgical procedure would not end up with the desired result of a normal functioning and appearing set of female genitalia. Although these distressing conditions were carefully (and ultimately successfully) treated, at the time that she was well enough to go home these complications were still not fully resolved. During her first week home, there was difficulty with occasional uncontrolled seepage of urine and feces. In addition, her physical activities had to be restricted because of pain. The cystitis did not immediately clear with treatment but persisted for a couple of weeks, producing unpleasant symptoms ranging from urinary frequency, urgency, burning on urination, to bouts of considerable pelvic pain.

"About two weeks after surgery, another set of very unpleasant symptoms developed. She gradually became increasingly weak and tired, was listless, lost her appetite, lost a great deal of weight so that her breasts and hips became noticeably smaller, her skin lost its fresh and smooth appearance and became waxy; she lost interest in sex; and she rather rapidly became increasingly depressed, being subject to sudden uncontrollable spells of crying. The first time she was seen by us following her return home, she presented this picture. It sounded like a rather typical and moderately severe depression. It seemed to be rather strong evidence that a mistake had been made. The operation had been performed primarily for psychological reasons; it had been

Agnes. The efforts of both produced severe pain. For almost a week after her release from the hospital there was a combined urethral and fecal dripping with occasional loss of fecal control. Movements were painful and restricted. The new vagina required almost continual attention and care. The vagina had been anchored to the bladder and this together with its bearing on the lower intestine set up mixed signals so that as the bladder expanded under the flow of urine Agnes would experience the desire to defecate. A bladder infection developed. It was accompanied by continual pain and occasional severe abdominal spasms. The amputation of the testes upset the androgen-estrogen balance which precipitated unpredictable changes of moods. Arguments ensued with

the judgment of the medical staff that her identity was so strongly fixed in a female direction that no forms of treatment could ever make her masculine. In addition, it was felt that she was unequivocally sincere in her expressions of desperation about her anomalous anatomical situation and her feelings that if anybody attempted to make her a male, not only would the attempts be of no use but that they would drive her to despair if not suicide. There is always the possibility when a patient makes such claims about something they want in reality that there is more ambivalence present than is observable, and it is the responsibility of the experts making the evaluation to determine that such a degree of ambivalence does not exist. We had felt without doubt that our evaluation was extensive and adequate and that it revealed that this patient was as well fixed in her femininity as are many anatomically normal females and that whatever latent or vestigial masculinity was present was not greater in degree or quality than that found in anatomically normal women. If this judgment was wrong, then it would be expected that the absoluteness of the castrating operation, the uncontrollable and unalterable fact of the loss of male genitalia would, when the patient was faced with its actuality, produce a severe psychological reaction only if the hidden masculinity and unconscious desires to be a man were strong enough and had been missed by us.

"Therefore, on being confronted with a rather severely depressed patient, we had presumptive evidence that an error in judgment had been made and that the patient was now depressed from having lost her insignia of masculinity. Thus, the clear listing of all of these classical symptoms of depression was scarcely a happy occasion for the investigators. However, towards the end of her recital, an additional symptom was mentioned. She reported that she had been having increasingly frequent episodes of sudden sweating accompanied by a very peculiar sensation which started in her toes and swept up her legs through her trunk and into her face, a rushing sensation of heat. She was having hot flashes on the basis of a surgical menopause. When the operation was performed and her testes removed, the source of the estrogens which had produced the whole complicated anatomical picture of secondary sex characteristics of a woman was removed. Thus, she had acutely developed a menopausal syndrome no different from what is frequently seen in young women

Bill who was quickly out of patience and threatened to leave her. Despite a campaign to discourage her mother from coming to Los Angeles, it became increasingly apparent to Agnes that the situation was beyond her control and that she could not hope to manage her convalescence by herself. This motivated the additional anxiety that if her mother were to appear, Agnes would hardly be in a position to keep Bill and Bill's family from learning the terrible last thing that her mother and she knew about Agnes that Bill and his family did not know, *i.e.*, that Agnes had been raised as a boy. Until she was rehospitalized for the bladder spasms she managed the care of the vagina and her general illness by spending her days in bed in Bill's home, returning in the evening

who have their ovaries removed. Every one of the symptoms named above can be accounted for by the acute loss of estrogen (though this is not to say that the menopausal syndrome in anatomically normal women is usually to be explained simply on the basis of decrease of estrogen). At this point, hormone assays revealed an increase in urinary FSH and the absence of urinary estrogen. She was immediately placed on estrogen replacement therapy and all of the above signs and symptoms disappeared. She lost her depression, regained her interest in life and sexual drive; her breasts and hips returned to their normal amplex; her skin took on its more usual feminine appearance, and so on.

"It may be of value to mention briefly the pathological findings of the testes. They were severely changed from the normal male as a result of the chronic presence of estrogens in their milieu so that, in brief, the normal pathological evidence for production of fertile sperm was absent. Various degenerative and abortive forms of spermatogenesis were found in the abnormal cells. However, there was no tumor found, and there was no evidence of an ovotestis (that is, a hermaphroditic condition in which ovarian and testicular tissue are found in the same organ). The conclusion of the endocrinologist was that Agnes 'presented a clinical picture that seemed to suggest a superimposition of an excess of estrogen upon the substratum of a normal male.' What could not be explained, and what therefore made her unique in the endocrinologic literature is that even in the presence of large enough production of estrogen to produce completely feminine secondary sex characteristics, the development of the normal sized penis in puberty was not interrupted. There is at this time no adequate explanation for this anomaly.

"It is safe to assume that the findings of depression were due simply to the acute loss of estrogen following castration. Agnes had never had such an episode before; the episode was abruptly ended by the administration of estrogen and no such episode has occurred again. She has been on daily estrogen since that time.

"Agnes subsequently had to return to the hospital for further treatment of cystitis and for the minor surgical procedure of completely opening up the vaginal canal. Her subsequent course surgically and endocrinologically was uneventful."

to her own apartment. Thus it was necessary to manage the secrecy with Bill's mother who had been told only that she had had an operation for "female troubles." In addition, she suffered a moderately severe depression with bouts of unexplained and uncontrollable weeping, restlessness, deep feelings of nostalgia which were both strange to her and unpredictable in onset. Bill berated her for feeling sorry for herself and insisted on knowing, though she could give no reply, whether her condition was physical or whether she was "really like that all along." She complained to me that her thoughts and feelings had lost their sharpness, that she found it difficult to concentrate, that she was easily distracted, and that her memory failed her. As a further complication she became fearful of her depression and would ruminate about "going crazy."

After a particularly severe attack of bladder spasms she was re-admitted to the hospital and remedies were administered. The spasms were quieted; testosterone injections were started; the bladder infection was brought under control; the vaginal canal was reopened and a regime first of manual manipulations of the canal and later of manipulations with the use of a plastic penis were started. At the end of approximately six weeks the depression had cleared entirely. The vagina was healing, only tenderness remained, and under Agnes' conscientious use of the mold she had achieved a depth of five inches and was able to insert a penis of an inch and a half in diameter. Quarrels with Bill had subsided and were replaced by an anticipatory waiting on the part of both Agnes and Bill for the time when the vagina would be ready for intercourse. Agnes described their relationship as, "It's not the way it was at the beginning. We're just like an old married couple now."

The full variety of game-analyzable and nongame-analyzable occasions were involved at one time or another or in one way or another when Agnes described her relationship with Bill. If for Agnes all roads led to Rome, they did so by coming together at the boyfriend as a common junction point. For passing illustration, in the course of one of our conversations, at my request, Agnes recited in detailed succession the events of a usual day, and considered for each the possibility of acting differently than she had acted. The recited chain of consequences led to Bill, and from him to her secrets and "problem." This occurred regardless of the commonplace events with which the "chain of relevances" began. Then

I asked Agnes to start with something that she felt was extremely worthwhile, to imagine something that could alter it for the worse and to tell me what would happen then, and after that, and so on. She said, "The best thing that ever happened to me was Bill." Then the two of us laughed at the ineffectiveness of the trial.

Bill was discussed in every conversation we had. If she was discussing her confidence in herself as a female, the image of Bill was nearby as someone with whom she could feel "natural and normal." When she discussed her feelings of failure, of being a degraded, inferior female, Bill furnished the occasion when these feelings were most acutely encountered, for he was the only other one besides the physicians to whom she had voluntarily disclosed her condition. After the disclosure, her feelings of being an inferior female were in part assuaged by Bill's assurance that she need not feel inferior because the penis was nothing that she could have helped, and in any case it was not a sexual penis, it was a tumor or "like an abnormal growth." He was implicated in her accounts of her job aspirations, work attitude, work discipline, earnings, chances of advancement, occupational attainments. I mentioned before his "lectures" on how a lady should conduct herself whereby without knowing how he was teaching her he was nevertheless doing just that. On the occasions following the performance of household duties, their domestic relations, her conduct with strange companions, her conduct in Las Vegas, in his urging the operation and insisting that if she could not "get action out of those doctors at U.C.L.A. who only want to do research on you" that she drop the U.C.L.A. physicians and get a physician who would do her some good, in love-making, companionship, and the rehearsals for marriage, in all this Bill was either directly or indirectly relevant.

I proposed earlier that the occasions of passing involved Agnes in the work of achieving the ascribed status of the natural normal female. Bill's relevance to this work attenuated considerations of strict utility and instrumental effectiveness in her choice of strategies and in her assessments of the legitimacy of her procedures and their results. Among all her accounts, those that implicate Bill are invariably the most resistant to game analysis. One of the most obstinate structural incongruities that results when game analysis is used consists of the historico-prospective character of the mutual

biography that their intimate interactions assembled, and the diffuse use to which this mutual biography could be and was put by each. It is the diffuse relevance of this biography that helped to make understandable how frantic Agnes' fears were of the disclosure to Bill and how particularly resistant she was to tell me how the disclosure had occurred. Only toward the end of our conversations and then only upon the only occasion in which I insisted that she tell me, did she tell the story, and then it was delivered in the manner of defeat, and piecemeal. The mutual biography aided us, as well, in understanding how the possibility of disclosure became increasingly unavoidable for her, and how the disclosure increasingly assumed the proportions of a major agony.

I shall confine my attention to two occasions, each of which was represented by a question that Bill had, which Agnes, while she stayed in the situation and precisely because there was no choice but to stay, found agonizingly difficult to answer. Prior to the operation and before Bill knew Agnes' condition his question was: "Why no intercourse?" After he knew, his reported question was, "What is all the talking at U.C.L.A. all about? If the doctors at U.C.L.A. wouldn't promise her anything why didn't she drop them and go to a physician who would do something as they would for any other person?"

Agnes met Bill in February, 1958. She had her own apartment. Bill would go there after work and spend the remainder of the evening. There was a great deal of necking and petting. While Agnes permitted fondling and stroking she would not permit Bill to put his hand between her legs. At first he berated her for teasing. Agnes met his first demands for fondling and intercourse by claiming her virginity. This did not satisfy him because, according to her story, she entered willingly "and passionately" into the love-making. (She denied that the love-making stimulated an erection at any time.) As a condition for continuing the affair Bill demanded a satisfactory explanation. She told him that she had a medical condition that prohibited intercourse; that the condition could not be repaired immediately; that she required an operation; that after the operation they could have intercourse. She talked only generally and vaguely about the "condition" which motivated Bill's curiosity to the point where he once again insisted upon knowing

the condition in detail. She told him that she was not expert enough to furnish this information but would get it from her physician in Northwest City who was taking care of her. Fearful that Bill would leave her, Agnes returned to Northwest City where she asked the physician who had been taking care of her to write Bill a letter about her condition. The physician's letter, written deliberately in aid of Agnes, talked only generally about "a condition" that could not be repaired until she was 21 because an operation performed before that would endanger her life, which of course was not true. Although Bill did not know this, the answer nonetheless failed to satisfy him. He insisted that she tell him exactly what was wrong, and after a severe quarrel following frustrated intercourse made this a condition of any further courtship or marriage. Once more she tried to placate him by telling Bill that what was there was repulsive to her and would be repulsive to him, to which he replied, "What can be so repulsive? Are there bumps there?" She was convinced that she had the choice of either not telling him and losing him, or of telling him with the hope that he would understand, or if he did not, of losing him. She finally told him. On the many occasions when I asked her to tell me how he had convinced himself—for example had he made an inspection—she refused any further comment. She would insist that she was entitled to a private life and under no circumstances would she reveal how he had been convinced. To my question, "What does he know?" her answer invariably was, "He knows what you know," or "He knows everything that the doctors know." She would say nothing more. Agnes said that prior to the disclosure "I was like on a pedestal." Afterwards and since then she said that she was no longer able to feel, as she had felt prior to it, that she was "his queen." Agnes said that window shopping expeditions for home furnishings and discussion of wedding plans occurred prior to the disclosure. "Since April," when she returned home for the physician's letter, there had been no conversation about the wedding "because of the doubt for everyone concerned." Her account was not to be taken at face value. Later conversations occurred precisely because of the doubt. Some part, therefore, of what Agnes was talking about in saying "there had been no further conversations" referred to the degradation that she suffered

upon finally having to tell Bill that she had a penis and scrotum between her legs and that this was behind all his frustrated attempts to pursue their love-making.

The feelings that persisted following this disclosure, that she was an inferior female, were accompanied at first by the repelling thought that perhaps Bill was "abnormal." She dismissed this by recalling that Bill had fallen in love with her before he knew about her condition; by recalling the stories he had told her of his love affairs and sexual successes; and by reviewing the fact that he regarded it as "more or less a tumor or something like that" and that he began to urge an operation to remedy the condition. At different times in the course of our conversations she insisted that there was nothing in his manner, appearance, character, treatments of her and other women, and treatments of men that "resembled homosexuals." By homosexuals she meant effeminate appearing men who dressed like women. She found the possibility of his "abnormality" repulsive saying that she could not bear to see him again if she thought "at all" that he was "abnormal." Following the operation we obtained an account of Bill's appearance and manner from the urological intern and resident who had attended her case. The resident had encountered Bill one day when Bill was leaving her hospital room. He visited her regularly while she was in the hospital. The resident reported that he was struck by Bill's small stature, fine dark features, and swishy manner. In leaving the room Bill batted his eyes at the resident from which the resident took the message, "You and I know what's in there." We were reluctant to credit the resident's account since his dislike for Agnes was evident on other scores. He was firmly opposed to the decision to operate, stating that the operation was neither necessary nor ethical. It was his conviction that there had been anal intercourse, a conviction that he held because of the flabbiness of the anal sphincter. With respect to the unknown source of estrogens he preferred the hypothesis that Agnes, either alone or in league with others, had for many years obtained them from an exogenous source. Despite our attempts to talk with Bill, he refused all contact.

With respect to the second question, Agnes' passing occasions consisted of justifying to Bill her "choice" of "the doctors at U.C.L.A." The task of justifying to Bill her visits to U.C.L.A. arose

as a topic in almost all our conversations not only prior to the operation but after it as well, though of course for different reasons. Bill urged that she should get the doctors at U.C.L.A. to treat her "without all this funny business. They're taking you for a ride. They're not going to do anything. They just want to do research. You're just a guinea pig for them." In response to this Agnes, at her Saturday morning conversations with us, would press for a definite commitment as soon as possible. She said repeatedly that she was unable to argue with him because "in the sense that he's thinking, he's perfectly right. But I know something that he doesn't know." (That she had been raised as a boy and that the specific way in which she was of interest to us had to remain concealed in her arguments with Bill.) Agnes had to manage Bill's impatience by somehow convincing him that she was in the right hands at U.C.L.A., given Bill's impatience with the slowness of the procedure, and the mysteriousness of the Saturday morning talks which she portrayed to him as our insistence on research. She had to allow his insistence that she need not put up with all this "non-key business" and she could not argue his claim that, because she had something wrong, she should insist with us that we either do something about it or release her. Yet along with this, Agnes had the additional aim of getting an operation done by competent hands at minimum or no cost, but to get this she had to engage in the research, not only because of the anatomical condition that Bill was preoccupied with, but which was only a small part of our research interests. Additional research interests were directed to the fact that she was raised until she was seventeen as a male. So Agnes was unable to answer Bill because in her own words "this is something I know that he doesn't know. So he thinks of me as I suppose more or less of someone coming in here and being baffled or fooled or messed around with by doctors that think, oh here's a young girl that doesn't think too much and we can you know just do some research on her. . . . That's my big problem because I can't argue the point with him and I can't show him that he's wrong in that sense, because in the sense he's thinking he's perfectly right. But actually if I felt that way I'd be perfectly wrong. That's why I have to wait. It's because I know something he doesn't know. That's why I have to wait."

Following the operation Agnes needed arguments again, be-

cause she was afraid of her depression and of the swarm of difficulties during the first few weeks of convalescence. As she said, she swapped one set of troubles for another. She was frightened of what was happening. Among other things she wanted assurance that she was not "crazy" and confided that she got considerable relief from talking with us, but was entirely unable to explain this to Bill. When she discussed it with Bill he either took the line or wanted her assurance that her psychological problems were due entirely to physical changes after the operations, and that she was not *that* kind of a person *i.e.*, moody, irritable, self-pitying, weepy, selfish, and that this was not her "real" character. Even after the vagina had started to heal properly and the depression had lifted, she was still willing, and in fact desired, to continue the weekly conversations. A part of her uneasiness concerned the functional character of her vagina and the question for her as to whether or not Bill would promise marriage before or after they had had intercourse. She took as a matter of course that she had to permit Bill intercourse with the new vagina before marriage. As she said, "That's what it's for; it's for intercourse." Another part of her concern consisted of the uncertainty which she felt in sensing a changed relationship to Bill as she compared present arrangements with what they had been many months before. She sensed as well that the relationship would change even more in the ensuing months. "Now," she said, "we are like an old married couple." At this time she expressed, too, the conviction that we knew more about Bill than she did and knew more than we were saying. In one of the last interviews she asked, for the first time in all our conversations, if I would give her my opinion of Bill and did I think that Bill was "abnormal." I replied that I knew of Bill only from what she had told me about him, that I had never seen or talked with him, and that it would be unfair to give her such an opinion.

That Agnes was passing with us is a feature of the way in which our research was conducted with her, her problem being to obtain a competent, guaranteed, and low-cost operation without "submitting to research," by which she meant protecting her privacy. Thus, although she showed her willingness to take "all those tests" and to sort the Q-deck in accordance with various instructions, she herself furnished evidences of dissembling. Agnes had been given

the Q-deck to take home with her and to sort and return the sorted deck to the psychologist the following week. Agnes said that Bill was forever wanting to see how she arranged the cards, "but I had the cards all mixed up so he couldn't find out anything." (Agnes laughed.) Another measure of her passing with us is found in the "secrets" that Agnes managed nevertheless to protect. Despite a total of approximately seventy hours of talks arranged with the three of us and additional talks with various members of the staff of the Urology and Endocrinology Departments, and despite the fact that direct and indirect questioning had been attempted to obtain information, there were at least seven critical areas in which we obtained nothing: (1) the possibility of an exogenous source of hormones; (2) the nature and extent of collaboration that occurred between Agnes and her mother and other persons; (3) any usable evidence let alone any detailed findings dealing with her male feelings and her male biography; (4) what her penis had been used for besides urination; (5) how she sexually satisfied herself and others and most particularly her boyfriend both before and after the disclosure; (6) the nature of any homosexual feelings, fears, thoughts, and activities; (7) her feelings about herself as a "phony female." Some details as to the way in which this passing with us was managed may become clear in the following section where specific features of her management devices are discussed.

If Agnes was passing with us, it must be stated in all fairness that there were many times, indeed, when I was passing with her. There were many occasions in the exchanges between Agnes and me when it was necessary for me to side-step her requests for information in order to avoid any display of incompetence and so as to maintain the relationship with Agnes. For example, I was unable to tell her whether or not there was a difference between male and female urine. There were several legal angles to the case, about which she asked questions which were obvious enough as questions when they were asked, but had not occurred to me nor did I have the faintest idea as to what their proper answers were. When she was suffering with the bladder and bowel impairment she asked if I could tell her how long this would go on and what she could expect to happen next. On several occasions prior to the operation she wanted to know if I could tell her what I

knew about the likely decision. Several times she asked me details about the operation and the nature of postoperative care. She asked anatomical questions. One of these concerned a mysterious "hard thing" that she had encountered in the roof of the new vaginal canal. She assumed I would be able to tell her what it was. My wife had done graduate work with the hormone relaxin and its effects on the symphysis pubis in guinea pigs. I identified the hard thing as the symphysis pubis and told her what relaxin does by way of the spectacular relaxation of this cartilage prior to the passage of the neonate guinea pigs down the vaginal canal. I had to hope with a secret fervor that in transferring the story to humans that I was not telling her altogether a cock-and-bull story, partly because I would have liked to tell the truth, but perhaps even more importantly to preserve the friendship, the conspiracy, and the sense that we were in league with each other, that there were no secrets between us because I already knew many private things about her and nothing she might tell me would in any way change our sympathy for her or our desire to do what we could to see her happy and doing well. My typical reply therefore was to find out as much as I could about what she wanted to know, and why, and to reassure her that I could answer her questions but that it was to her best interest that she should have Stoller, the physician, give her the answers because answers to such questions were recognizedly of great importance to her and therefore she required authoritative answers. I must confess that this was an improvised answer that occurred on the first occasion that Agnes caught me short. Once it worked, however, I had it as a strategy to use on later occasions. It is of additional interest that despite such assurances Agnes could not ask me, apparently *knew* she could not ask me, nor would I have been prepared to tell her truthfully whether or how the decision to operate would be changed if she disclosed the answers to the seven points that we wanted her to tell us about but on which we could get no information from her.

Review of management devices

In contrast to homosexuals and transvestites, it was Agnes' conviction that she was naturally, originally, really, after all female.

No mockery or masquerading accompanied this claim that we were able to observe. In this respect Agnes shared, point for point, the outlook of "normals."

But important differences nevertheless existed between Agnes and "normals" in that normals are able to advance such claims without a second thought whereas for her such claims involved her in uncertainties of responses from others. Her claims had to be bolstered and managed by shrewdness, deliberateness, skill, learning, rehearsal, reflectiveness, test, review, feedback, and the like. Her achieved rights to treat others and be treated herself as a natural female were achieved as the result of the successful management of situations of risk and uncertainty. Let me review some of the measures whereby she was able to secure and guarantee her claims.

Her devices were carried out within the conditions of, and were motivated by a knowledge of herself that was, for almost every occasion of contact with others, none of somebody's business who was nevertheless important to her. As I have noted, the concealed knowledge of herself was regarded by her as a potentially degrading and damaging disclosure. She was realistically convinced that there would be little by way of an available remedy by which other persons might be "set right" if the disclosure occurred. In this respect, the phenomena of Agnes' passing are amenable to Goffman's descriptions of the work of managing impressions in social establishments.⁷ This amenability however is only superficial for reasons that will be apparent over the course of the discussion.

When I say that Agnes achieved her claims to the ascribed status of a natural female by the successful management of situations of risk and uncertainty, I do not mean thereby that Agnes was involved in a game, or that it was for her an intellectual matter, or that ego control for her extended to the point where she was able to switch with any success, let alone with any ease, from one sex role to the other. I have already mentioned several evidences of this. Other evidences can be cited. Even in imagination Agnes found it not only difficult to contemplate herself performing in the "male" way but found it repugnant. Some memories were so excep-

⁷ Erving Goffman, *The Presentation of Self in Everyday Life*, University of Edinburgh, Social Sciences Research Centre, 1956.

tionally painful to her as to be lost as grounds of deliberate action. When she learned that the decision had been made to operate, the knowledge that she was committed to the operation as a decision was accompanied by a fear that when she was on the table, because the decision would then be entirely out of her hands, the doctors without consulting her would decide to amputate her breasts rather than her penis. The thought provoked a mild depression until she was assured that nothing of the sort was the case. The natural female was a condition that her various strategies had to satisfy. Agnes was not a game player. The "natural female" was one among many institutional constraints, "irrational givens," a thing that she insisted upon in the face of all contrary indications and the seductions of alternative advantages and goals. It attenuated the deliberateness of her efforts, the actual availability, let alone exercise of choices, and the consistency of her compliance with norms of strict utility and effectiveness in her choices of means. It furnished "constraints" upon the exercise of certain rational properties of conduct, particularly of those rational properties that are provided for when certain games are used as procedural models to formulate formal properties of practical activities.

Not only is it necessary to stress the shortcomings of strategy analysis in discussing her "management devices," but the very phrase "management device" is only temporarily helpful. It is useful because it permits an enumerated account of these devices. For the same reason that it facilitates the enumeration it also clouds the phenomena that it is necessary to come to terms with. *These phenomena consist of Agnes in on-going courses of action directed to the mastery of her practical circumstances by the manipulation of these circumstances as a texture of relevances.* The troublesome feature encountered over and over again is the cloudy and little-known role that time plays in structuring the biography and prospects of present situations over the course of action as a function of the action itself. It is not sufficient to say that Agnes' situations are played out over time, nor is it at all sufficient to regard this time as clock time. There is as well the "inner time" of recollection, remembrance, anticipation, expectancy. Every attempt to handle Agnes' "management devices" while disregarding this time, does well enough as long as the occasions are episodic in their formal

structure; and all of Goffman's analyses either take episodes for illustration, or turn the situations that his scheme analyzes into episodic ones. But strategic analyses fail whenever these events are not episodic. Then to keep the analysis in good repair, there is required the exercise of theoretical ingenuity, and a succession of theoretical elections, one compounded on the other, with the frantic use of metaphor in the hope of bringing these events to faithful representation. This caveat can be summarized, although poorly, by pointing out that it would be incorrect to say of Agnes that she has passed. The active mode is needed: she is passing. Inadequate though this phrasing is, it summarizes Agnes' troubles. It stands as well for our troubles in describing accurately and adequately what her troubles were.

After enumerating some of her management devices I shall discuss her practical circumstances, to the end of treating her devices as manipulations of her practical circumstances conceived as a texture of relevances.

Passing devices

Agnes used a number of devices, all of them familiar enough, in managing to give us no information. Prominently, she employed euphemism—making the thing she was talking about out to be a vastly better, more valuable, nicer, more pleasant thing than it could realistically have been. Some examples: Agnes' description of the first job she had, following her return from Midwest City, was little better than a "blah" response. "Oh, everything was just so wonderful"; "It was the best job I ever had"; "Everyone was so nice; the arrangements were so harmonious"; "I still correspond with all the girls there"; "It was just a ball"; "Everyone was just bubbling over with friendship and cheer." Her specific duties were slighted in her account. When she was pressed, she did not find them "at all" interesting to discuss. Also, as we have seen, the female character of her early history was exaggerated while evidences that she had been raised as a boy were suppressed.

Another way of withholding information was to speak in generalities, or to use allusion or guarded and impersonal references, or to speak in the impersonal case. We came to mean that this was what she was doing when we would say of Agnes that she was

"evasive." Another favorite device was to pretend that she did not know what was being talked about, or to deny that something that had previously been talked about had ever really been mentioned.

When we made it unavoidable that she discuss with us something that she did not want to talk about she would use what we came to call "legalisms." She would respond and insist that she was responding correctly to the literal sense of the words and the question. Or, if I proposed to have recalled something that Agnes had said on a previous occasion she would hold me to the literally accurate recollection of what exactly had been said. A favorite device was to permit other persons, and, in many of our conversations, me, to take the lead so as to see which way the wind was blowing before offering a reply. She had a way of permitting the environment to teach her the answers that it expected to its own questions. Occasionally Agnes would give this device away by asking me, after an exchange, whether I thought she had given a normal answer.

For the many situations where she knew enough, she would have mapped out possible alternative developments beforehand and would have decided the conditions of her choice of one course or another prior to her having to exercise those choices. For example in providing for the possibility of backing out of the physical examination should the physician have proceeded to examine her genitals, Agnes considered well beforehand the variety of ways that the physician might respond when she refused to permit the examination to proceed. She said, "I have never been examined by a doctor and I don't intend to." I asked Agnes what she thought the physician's response would have been if she did not permit the genital examination. She said, "I thought he would mark it under, oh, idiosyncrasy or something."

Where it was possible to do so and particularly where there were important gains and important risks involved, Agnes would secretly "case" the situation beforehand. She tried to make herself knowledgeable about critical situations before she had to encounter them. For example, she wanted very much to apply for a civil service examination but she was afraid that the civil service physical examination would be very thorough. She remembered that her landlord, a fireman, would have had to take a civil service examination and so arranged to talk with him. She wished to avoid having

to explain to him her reluctance to risk an examination that she might not pass: "He didn't realize anything about what I was really asking him in regard to my problem. It was—I posed the questions in a casual way. I said, well, like—you do have to take a physical exam, don't you? He says, oh yeah. I said Oh? What kind? Is it a real thorough one? Do they judge how happy you are or something? No, he said, it isn't that thorough, it's a real light one."

She was particularly adept at furnishing information that would lead the other person away from entertaining the possibility that she was raised as a male. "Frankly, I don't want anyone checking up. By checking up I mean more or less looking into my past life. . . . I don't think it would be too possible unless they ran across something to find out anything about me when I was younger, but. . . ." Therefore she avoided giving information on job application forms that would motivate employers to "check up." She described her procedure in filling out job applications: "When the question is asked, 'Have you had any major operations?' I always say no. 'Do you have any physical defects?' I always say no. 'Would you resent too thorough a physical examination?' I always say no. I say I wouldn't protest because if I say yes they would probably notice that on the application and want it explained. So I more or less let it pass over so it won't become noticeable. If I started doing anything like that I would probably wind up in a lot worse situation. I mean it's harder to find a job or anything like that. Anyway, I don't think I have to be truthful about things like that." Agnes summarized the case for herself: "It is necessary for me to tell little white lies a lot of the time and I think there are those that . . . those are necessary and they have to be necessary to accomplish results."

Some of these little white lies were prefigured, many were improvised. With regard to employment questionnaires her characteristic answers showed several features: (1) She selected those answers that as she assessed them would appear not to require a later explanation. (2) The answers, while they were false about her biography, were likely to be answers for the type of female typist that she presented herself as, answers that set up anticipations that she was hopeful to be able to satisfy once she was on the job. (3) She depended upon her ability to improvise satisfactory explana-

tions for any discordancies that might be detected. Agnes was highly attuned to, and knew in detail, conventional expectancies in an extremely wide range of everyday situations that she had to meet: "I'm always aware" of contingencies. Her awareness of routine, otherwise unnoticed, workings of social structures, and her interest in and willingness to address them as grounds of her own actions leads to Agnes' actions their "manipulative" flavor. To use Parsons' phrasing, in Agnes knowledge of the exigencies of a stable order she assigned clear priority of relevance to the "adaptation" cell.

It was necessary for Agnes to continue to be alert to the tasks of keeping attributions of the natural female from being confounded with alternative attributions of male, male homosexual, and the like. An inevitable sense of double entendre occurred particularly in her discussions with physicians and with me. She was subject to the impulse to "check out," to "set right" companions whose remarks might have been innocent enough, but whose imputations, as she detected them, intended or not, were very uncomfortable for her—imputations of the fake female, the freak, the male homosexual, the abnormal female, and the like. The natural female was of course the single choice. On many occasions with me Agnes insisted that I "get things right." On many occasions she insisted that I was not saying something correctly the reason being that the priority of relevance was clouded by the wrong imputations. For example, once I reviewed some materials that she had presented about her feelings at the time that she was living with her roommate in Los Angeles and of the first parties that they had. She said, "I felt that *they* felt me to be completely normal and natural and it more or less gave me a satisfied natural feeling, you know, to be felt that way." I recapitulated: "You mean to be treated as a female, is that what you're saying?" Agnes answered, "Not as a *female*, not to be treated as a *female*—to be treated completely normally, without any regard to my problem at all." On the occasions with her on which I employed the usage that she had been "acting like a female" I would get one variation or another on the essential theme: *I am* a female but the others would misunderstand if they knew how I was raised or what I have between my legs. The conversational demand that I talk of Agnes as the natural female was accompanied by the demand, "I want you to get it

exactly right." For example, "I didn't feel assured because I expected to act normally. I didn't expect to act in any other way." Or, it wasn't that the occasion of the first party with her roommates was "particularly delightful." I had characterized that occasion as particularly delightful, to which her sharp and irritated retort was, "What do you mean by that? It wasn't particularly delightful. I said it was the first time in my life I was having fun, going out with people, and doing different things. . . . Nothing particularly delightful. Everything was, I would say, *natural!*"

Another concern of hers for my getting things right had to do with my taking notes. On one occasion she questioned what I was writing down and seemed a little uncomfortable with the fact that the sessions were being recorded, though the discomfort disappeared after about the fourth or fifth session. After a moment's reflection she seemed reconciled to the recording, saying "Of course you can always go back to the recording and correct your notes. A person no matter how smart can misunderstand what someone else is saying if it is said without the proper explanations—something that's said might have a bearing on—I'm sure the other doctors would probably want to listen to the conversations and where there's something like they might . . . use it to have a bearing on the case."

Finally, Agnes literally forbade me from "misunderstanding" the "reasons" and "explanations" that she furnished me for her actions. She was also much concerned to maintain the contrast between her biography and prospects, and the way in which they would appear in fiction, games, play, pretending, mockery, masquerading, supposition, mere theorizing, and the like. It is possible that Agnes had herself sensed the intimate tie between the way in which later interpretations may be bound by the precedents established in the mutually known histories of her interactions with one person or another and, of course, particularly in her histories with physicians and with Bill. With us, the possibility of a "misunderstanding" not only motivated the further possibility of an unfavorable decision with respect to the operation but, because of the confidence that had been built up, raised a nasty prospect of betrayal.

Several times in our talks Agnes emphasized the rehearsed character of something that she called "carelessness," by which she

meant the presentation of a casual appearance. She talked several times about rehearsed "carelessness." "It sounds like you're being very careless but—when you notice the circumstances, then you can tell it's not being careless at all." Agnes stressed the importance of the appearance of casualness which was accompanied by an inner vigilance. When I remarked to her, "So while it may look as if you're being casual, you're really not, you don't feel casual. Is that what you're saying?" To this she replied, "Not quite. I just feel casual in the sense that I feel normal and natural and everything, but I'm *aware* . . . that I . . . must be careful that way." To which she then added, "But remember I'm still a normal girl." As a companion tactic to the rehearsed casualness Agnes said that she preferred to avoid any tests, and that she attempted where possible to assess beforehand the severity and her chances of successfully completing a test to which she might be put. She clearly preferred to avoid any tests that she thought she might fail.

Management devices as manipulations of a texture of relevances:

Coming to terms with "practical circumstances"

Sociologists have long been concerned with the task of describing the conditions of organized social life under which the phenomena of rationality in conduct occur. One such condition is continually documented in sociological writings: *routine as a necessary condition of rational action*. The rational properties of action that are of concern in this respect are those which are particular to the conduct of everyday affairs. Max Weber, in his neglected distinction between substantive rationality and formal rationality, and almost alone among sociological theorists, used this distinction between the two sets of rationalities throughout his work.

The relationships between routine and rationality are incongruous ones only when they are viewed according to everyday common sense or according to most philosophical teachings. But sociological inquiry accepts almost as a truism that the ability of a person to act "rationally"—that is, the ability of a person in *conducting his everyday affairs* to calculate; to act deliberately; to project alternative plans of action; to select before the actual fall of events the conditions under which he will follow one plan or

another; to give priority in the selection of means to their technical efficacy; to be much concerned with predictability and desirous of "surprise in small amounts"; to prefer the analysis of alternatives and consequences prior to action in preference to improvisation; to be much concerned with questions of what is to be done and how it is to be done; to be aware of, to wish to, and to exercise choice; to be insistent upon "fine" as contrasted with "gross" structure in characterizations in the knowledge of situations that one considers valuable and realistic knowledge; and the rest—that this ability depends upon the person being able to take for granted, to take under trust, a vast array of features of the social order. In the conduct of his everyday affairs in order for the person to treat rationally the one-tenth of this situation that, like an iceberg appears above the water, he must be able to treat the nine-tenths that lies below as an unquestioned and, perhaps even more interestingly, as an unquestionable background of matters that are demonstrably relevant to his calculation, but which appear without even being noticed. In his famous discussion of the normative backgrounds of activity, Emil Durkheim made much of the point that the validity and understandability of the stated terms of a contract depended upon unstated and *essentially unstateable* terms that the contracting parties took for granted as binding upon their transactions.

These trusted, taken for granted, background features of a person's situation, that is, the routine aspects of the situation that permit "rational action," are commonly referred to in sociological discourse as the mores and folkways. In this usage the mores depict the ways in which routine is a condition for the appearance of rational action or, in psychiatric terms, for the operativeness of the reality principle. The mores have been used thereby to show how the stability of social routine is a condition which enables persons in the course of mastering and managing their everyday affairs to recognize each other's actions, beliefs, aspirations, feelings, and the like as reasonable, normal, legitimate understandable, and realistic.

Agnes' passing occasions and her management devices throw into relief the troubled relationship in her case between routine, trust, and rationality. By considering these passing occasions and management devices with respect to this troubled relationship we

may be able to break free of mere "diagnosis" or Goffman's episodic emphasis. One may allow, in agreement with Goffman, the accuracy of Goffman's "naughty" view that members of a society generally, and Agnes in a particularly dramatic way, are much concerned with the management of impressions. We may allow, as well, the accuracy and acuteness of his descriptions of this concern. Nevertheless if one tries to reproduce the features of the real society by populating it with Goffman-type members we are left with structural incongruities of the sort that were discussed in previous sections of this paper.

A review of Agnes' passing occasions and management devices may be used to argue how practiced and effective Agnes was in dissembling. We would have to agree with Goffman that, like his persons who are engaged in the management of impressions, she was a highly accomplished liar, and that as it is in the society produced by Goffman's dissembling members, lying provided for Agnes and her partners conservative effects for the stable features of their socially structured interaction.

But a troublesome point in Goffman's interpretive procedure emerges with full clarity when his views are used to analyze other aspects of Agnes' case. The trouble revolves around the general absence with which deliberateness, calculation, or what Agnes calls her "awareness" enters as a property of the work of managing impressions for Goffman's members. In the empirical applications of Goffman's notions one is continually tempted to press the informant with exasperation, "Oh come on now, you must know better than that. Why don't you confess?" Agnes' case helps us to see what this trouble might be due to.

Agnes treated with deliberateness, calculation, and express management (*i.e.*, in the manner that Goffman would like every one of his informants to confess, if his mode of analysis is to be counted correct) matters that members (a) not only take under trust, but (b) require of each other, for their mutual judgments of normality, reasonableness, understandability, rationality, and legitimacy, that they treat in a trusting and trusted manner, and (c) require of each other that evidences of trust be furnished wherever deliberateness, calculation, and express management are used in managing problems of daily life. Agnes would have wanted to act in this trusting fashion *but routine as a condition for the effective,*

calculated, and deliberate management of practical circumstances was, for Agnes, specifically and chronically problematic. To have disregarded its problematic character, she was convinced, was to risk disclosure and ruin. A review therefore of her case permits the re-examination of the nature of practical circumstances. It leads us also to think of the work of impression management—in Agnes' case, these consist of her passing "management devices"—as attempts to come to terms with practical circumstances as a texture of relevances over the continuing occasions of interpersonal transactions. Finally, it permits us to ask what this "preoccupation" for impression management is about by seeing how a concern for "appearances" is related to this texture of relevances.

In the course of one of our conversations Agnes had been questioning the necessity for any more research. She wanted to know how it bore on her chances of the operation. She wanted to know as well whether it would help "the doctors" to get the "true facts." I asked Agnes, "What do you figure the facts are?" She answered, "What do I figure the facts are, or what do I think everyone else thinks the facts are?" This remark may serve as a theme in elaborating Agnes' practical circumstances as a texture of relevances. The theme for her of the nature of her practical circumstances was furnished in yet another remark. Prior to the operation I had asked her about the discussions and activities that she and Bill might have engaged in by way of preparation for their marriage. In her answer she portrayed her discussions with Bill as overwhelmingly concerned with the necessity for the operation. She firmly dismissed my question with the remark: "You don't talk about how much fun you're going to have in New York when you're sinking on a ship in the middle of the ocean. . . . You're worried about the problem that's present."

Practical circumstances

Agnes' circumstances were striking in the stringency with which past and future events were related and regulated as an arena by the clock and the calendar. Her futures were dated futures, most particularly as present actions and circumstances were informed by the assumption of a potential remedy for "her problem" that had to have occurred by some definite time. That there were many

years during which no such date had been set did not detract in the slightest from the definiteness of this future even though its specific calendar date was entirely unknown. Agnes was required by specific performances not only to establish mastery over this arena, but by her performances to establish her moral worth as well. For her the morally worthwhile person and the "natural, normal female" were identical. In the pursuit of jobs, in the management of the love affair, in her aspirations to marriage, in her choice of companions, in the management of Northwest City friends and family, the tasks of achieving the status of the normal natural female had to be accomplished at, within, and by a time. Perhaps nowhere does this come out more dramatically than in the quarrels that anticipated the disclosure to Bill, and in the terrible recalcitrance of the new vagina that made up such a central feature of the postoperative depression. Her constant recourse to self-reassessment consisted of continual comparison of anticipated and actual outcomes, of continual monitoring of expectancies and pay-offs, with strong efforts to accommodate and to normalize the differences. Agnes expended a great deal of effort upon bringing ever more areas of her life under conceptual representation and control. Expectations in areas of life that to persons better able than she to take their normal sexuality for granted would appear to be far removed from the concerns of criticism and review of "common sense knowledge" of the society were, for her, matters of active and critical deliberation, and the results of these deliberations were tied to uppermost levels in her hierarchy of plans. The contents of biographies and futures were highly organized with respect to their relevance to the achieved natural female status. It was indeed difficult for her to find any area that she could not in a few short steps make relevant to the prize.

There was very little of a "take it or leave it" attitude on Agnes' part toward past, present, or future fall of events. Agnes reasoned as follows: I have had this terrible time in high school, I was without companions as a child, I was raised as a boy, I have this face and these breasts, I've had dates and fun with girlfriends in the normal natural way that girls do, I lost seventeen years because a misunderstanding environment did not recognize the accidental character of the penis and refused to take action, hence I *deserve* the status that unfortunately I find myself in the position of having

to ask for. For Agnes the likelihood of being accorded treatment as a natural, normal female was a moral likelihood. She reckoned her chances in terms of deservingness and blame. She found it repugnant to consider that an enumeration of such factors would or should serve in probability fashion merely to fix the likelihood that she was "female." With respect to that past as well as to her anticipated validation of her claims, the occurrence of a remedy for her condition had a moral requiredness. For her there must be and should be a plan and a reason for the way things had transpired as well as how they would have finally occurred. Very few things could occur for Agnes, bearing in their relevance on "her problem," in an accidental or coincidental manner. Agnes was motivated to search for patterns and for the "good reasons" that things occurred as they did. The events of Agnes' environment carried along for her, as their invariant features, that they could actually and potentially affect her and could be affected by her. To refer to this as Agnes' egocentricity, if it is left at that, may be seriously misleading. For Agnes her conviction that she had grasped the order of events arranged around her in an accurate and realistic fashion consisted in the conviction that her assessments were to be tested and were testable without ever suspending the relevance of what she knew, what she took to be fact, supposition, conjecture, and fantasy by reason of her bodily features and social positions in the real world. Everyday events, their relationships, and their causal texture were in no way matters of theoretic interest for Agnes. The possibility of considering the world otherwise "just to see where it leads"—a peculiar suspension and reordering of relevances that scientific theorists habitually employ—was for Agnes a matter of inconsequential play; as she would talk about it, "just words." When she was invited to consider it otherwise, the invitation amounted to a bid to engage in a threatening and repugnant exercise. It was no part of Agnes' concern to act in active alteration of "the social system." Instead she sought her remedy as an adjustment to it. One could never consider Agnes a revolutionary or a utopian. She had no "cause" and avoided such "causes" as one frequently finds among homosexuals who may seek to re-educate a hostile environment, or who might scrutinize that environment for evidences that it was not what it appeared to be but instead contained, in masked fashion, the identical types that it

was hostile to and punishing of. Challenges to the system were for Agnes not even so much as hopeless risks. She wanted "in." The "credentials committee" was at fault.

Time played a peculiar role in constituting for Agnes the significance of her present situation. With regard to the past, we have seen the prominence with which she historicized, making for herself and presenting us with a socially acceptable biography. We have already remarked on the fact that the work of selecting, codifying, making consistent various elements in a biography, yielded a biography that was so consistently female as to leave us without information on many important points. Two years of arduous female activities furnished for her a fascinating input of new experiences upon which this historicizing process operated. Her attitude toward her own history required ever new rereadings of the trail that wound off behind her as she sought in reading and rereading the past for evidences to bolster and unify her present worth and aspirations. Before all, Agnes was a person with a history. Or, more pointedly perhaps, she was engaged in historicizing practices that were skilled, unrelieved, and biased.

On the side of future events, one is struck by the prevalence with which her expectations were expectations of the timing in the fall of events. There was little tolerable "slack" in this respect. It was to their timing that Agnes looked to inform her of their character. Events did not "just occur." They occurred in pace, duration, and phasing, and she looked to these as parameters of their meaning and to recognize them for "what they really are." She had only a thin interest in events characterized for their own sake and without regard for temporal determinations such as pace, duration, phasing. It was a prominent characteristic of Agnes' "realism" that she addressed her environment with an expectation of the scheduled fall of events. We were struck by the sharpness and extensiveness of her recall. An important part of this impression stemmed from the ease with which she dated events and arranged recalled sequences in strict chronology. The effect of such an orientation was to assimilate events both past and prospective to the status of means to ends and lent to the stream of experience an unremitting sense of practical purposiveness.

With almost remarkable ease, a present state of affairs taken for granted could be transformed into one of open problematic

possibilities. Even small deviations from what she both expected and required to happen could occur to her as extraordinarily good or bad in their implications. She had achieved, at best, an unstable routinization of her daily rounds. One might expect that her concern for practical testing and the extensiveness of deliberateness, calculation, and the rest would be accompanied by the use of impersonal norms to assess her decisions of sensibility and fact, *i.e.*, that she knew what she was talking about, and that what she claimed to be so was indeed the case. Nothing of the sort was so. Agnes did not count her assessments of sensibility and fact right or wrong on the grounds of having followed impersonal, logical-empirical rules. Her rules of evidence were of much more tribal character. They could be summarized in a phrase: I am right or wrong on the grounds of who agrees with me. Particularly did she look to status superiors to test and maintain the difference between what in her situation she insisted were "true facts" and what she would count for "mere appearances." Being right or wrong was for Agnes a matter of being *in essence* correct or not. In matters relevant to her assessed chances of exercising her claimed rights to the status of the natural, normal female she did not take easily to the notion of being wrong in degree. For her the correctness of her assessments of events was a publicly verifiable one in the sense that other persons *typically like her* (*i.e.*, normal females) would experience what she had experienced in extremely close correspondence to the manner that she had experienced these events. She distrusted a characterization if its sense appeared to be peculiar or private to her and feared such an interpretation as unrealistic. Wanting to place the accent of actuality on events—fearing and suspecting supposition—she insisted that actual events were those which were verifiable by persons similarly situated. Similarly situated, to repeat, meant situated as a normal female. While she would allow that there were others in the world with problems like hers, neither with them nor with normal females was a community of understanding possible based upon their possible interchangeability of standpoints. "No one" Agnes insisted, "could possibly really understand what I have had to go through." In deciding the objectivity of her assessments of herself and of others Agnes counted, before anything, and sought to take for granted that she was normal and that she was like others.

Agnes, the practical methodologist

Agnes' practices accord to the displays of normal sexuality in ordinary activities a "perspective by incongruity." They do so by making observable *that* and *how* normal sexuality is accomplished through witnessable displays of talk and conduct, as standing processes of practical recognition, which are done in singular and particular occasions as a matter of course, with the use by members of "seen but unnoticed" backgrounds of commonplace events, and such that the situated question, "What kind of phenomenon is normal sexuality?"—a member's question—accompanies that accomplishment as a reflexive feature of it, which reflexivity the member uses, depends upon, and glosses in order to assess and demonstrate the rational adequacy for all practical purposes of the indexical question and its indexical answers.

To speak seriously of Agnes as a practical methodologist is to treat in a matter of fact way her continuing studies of everyday activities as members' methods for producing correct decisions about normal sexuality in ordinary activities. Her studies armed her with knowledge of how the organized features of ordinary settings are used by members as procedures for making appearances-of-sexuality-as-usual decidable as a matter of course. The scrutiny that she paid to appearances; her concerns for adequate motivation, relevance, evidence, and demonstration; her sensitivity to devices of talk; her skill in detecting and managing "tests" were attained as part of her mastery of trivial but necessary social tasks, to secure ordinary rights to live. Agnes was self-consciously equipped to teach normals how normals make sexuality happen in commonplace settings as an obvious, familiar, recognizable, natural, and serious matter of fact. Her specialty consisted of treating the "natural facts of life" of socially recognized, socially managed sexuality as a managed production so as to be making these facts of life true, relevant, demonstrable, testable, countable, and available to inventory, cursory representation, anecdote, enumeration, or professional psychological assessment; in short, so as unavoidably in concert with others to be making these facts of life visible and reportable—accountable—for all practical purposes.

In association with members, Agnes somehow learned that and

how members furnish for each other evidences of their rights to live as *bona-fide* males and females. She learned from members how, in doing normal sexuality "without having to think about it," they were able to avoid displays that would furnish sanctionable grounds for doubt that a member was sexually what he appeared to be. Among the most critical of these displays were situated indexical particulars of talk. Agnes learned how to embed these particulars in vis-a-vis conversations so as to generate increasingly tellable, mutual biographies.

Agnes' methodological practices are our sources of authority for the finding, and recommended study policy, that normally sexed persons are cultural events in societies whose character as visible orders of practical activities consist of members' recognition and production practices. We learned from Agnes, who treated sexed persons as cultural events that members make happen, that members' practices alone produce the observable-tellable normal sexuality of persons, and do so only, entirely, exclusively in actual, singular, particular occasions through actual witnessed displays of common talk and conduct.

Agnes, the deer of the accountable person

The inordinate stresses in Agnes' life were part and parcel of the concerted practices with normals, whereby the "normal, natural female" as a moral thing to be and a moral way to feel and act was made to be happening, in demonstrable evidence, for all practical purposes. Agnes' passing practices permit us to discuss two among many constituent phenomena that made up the normally sexed person as a contingent, practical accomplishment: (1) Agnes as a recognizable case of the real thing, and (2) Agnes the self-same person.

(1) *The case of the real thing.* In the ways Agnes counted herself a member to, and an object in, the environment of normally sexed persons, it included not only males with penises and females with vaginas but, because it included her as well, it included a female with a penis, and following the operation a female with a man-made vagina. For Agnes, and for the physicians who recommended the operation as the "humane" thing to do, the surgeons rectified nature's original mistake. Agnes' rueful admission, "Noth-

ing that man makes is as good as something that nature makes" expressed a member's realistic social truth about claims to normal sexuality. She, her family, and the physicians agreed that she had been granted a vagina as the organ which was rightfully hers, that she had resisted the anomaly as an accident of fate, and that because of a cruel trick she had been the victim of severe penalties of misunderstanding while she carried out the tasks of living as best she could as a misunderstood "case of the real thing." The operation furnished her and others evidences of the socially realistic character of her claims.

Agnes had witnessed in endless demonstrations by normals that and how normals believe that normal sexuality as a case of the real thing is an event in its own right and is assessable in its own terms, and that the accountability of normal sexuality could be made out from the study of how normally sexed members appear to common sense, lay or professional. Those were not her beliefs. Nor could she believe them. Instead, for Agnes in contrast to normals, the commonplace recognition of normal sexuality as a "case of the real thing" consisted of a serious, situated, and prevailing accomplishment that was produced in concert with others by activities whose prevailing and ordinary success itself subjected their product to Merleau-Ponty's "prejuge du monde."⁸ Her anguish and triumphs resided in the observability, which was particular to her and uncommunicable, of the steps whereby the society hides from its members its activities of organization and thus leads them to see its features as determinate and independent objects. For Agnes the observably normally sexed person consisted of inexorable, organizationally located work that provided the way that such objects arise.⁹

(2) *The self-same person.* The ways in which the work and occasions of passing were obstinately unyielding to Agnes' attempts

⁸ This and the observations in the remainder of this paragraph were obtained by revising the illuminating remarks by Hubert L. and Patricia Allen Dreyfus (in their translators' introduction to Maurice Merleau-Ponty, *Sense and Non-Sense* [Evanston, Ill.: Northwestern University Press, 1966]), pp. x-xiii) so as to make their modified sense available to my interests.

⁹ That knowledge loaned to her descriptions of this work an unavoidable "performative" character. This property of her descriptions of normal sexuality turned them into exhibitions which, as much as anything, distinguished for us her talk about normal sexuality from the talk about normal sexuality by normals.

to routinize her daily activities suggest how deeply embedded are appearances-of-normal-sexuality for members' recognition in commonplace scenes as unavoidable, unnoticed textures of relevances. Agnes' management devices can be described as measures whereby she attempted to exercise control over the changed content and the changed texture of relevances. Directed over their course to achieving the temporal identity of herself as the natural, normal female, her management devices consisted of the work whereby by the problem of object constancy was continually under solution. Her "devices" consisted of her work of making observable for all practical purposes the valuable sexed person who remains *visibly* the self-same through all variations of actual appearances.

Agnes frequently had to deal with this accountable constancy as a task and in a deliberate way. Her management work consisted of actions for controlling the changing textures of relevances. It was this texture that she and others consulted for evidences that she was the self-same person, originally, in the first place, and all along that she had been and would remain. Agnes was well aware of the devices that she used to make visible the constancy of the valuable, self-same natural, normal female. But her question, "Devices for what?" inseparably accompanied that awareness.

With that question Agnes mocked scientific discussions of sex roles that portray how members are engaged in making normal sexuality accountable. She found it flattering and innocent to consider a normal's activities and hers as those of role players or role makers who know, seek to establish, and enforce compliance to socially standardized expectancies of normal sexuality with their "functional consequences" that prior to encountering actual occasions in which they apply the normal can "talk about," given the various things he might be *doing* with something that's "said," and in the actual occasion use them to exercise choice among displays of appropriate talk and conduct. Equally flattering were the varieties of psychologically certified normally sexed persons whose possibilities, according to a favored version, are fixed early in life by the social structures of the childhood family as a complicated program of reinforcements; or the biological normal who is after all one sex or the other by the surplus that remains in the appropriate column when the signs are arithmetically evaluated; or the sociological normal for whom society is a table of organization so

that sex "positions" and "statuses" and their possible departures are assigned and enforced as a condition for maintaining that table of organization and for other "good reasons."

Each furnishes a commonplace method for theorizing out of recognition a demonic problematic phenomenon: *the unrelieved management of herself as the identical, self-same, natural female, and as a case of the real and valuable person by active, sensible, judgmentally guided unavoidably visible displays in practical, common sense situations of choice.*

That this phenomenon was happening was Agnes' enduring concern. Her devices were continually directed to, indeed, they consisted of a Machiavellian management of practical circumstances. But to manage in Machiavellian fashion her scenes of activity she had to take their relevant features on trust and be assured that normal companions were doing so, too. She differed from the normals in whose company and with whose unacknowledged help she "managed" the production task of keeping this trust in good repair. Thereby we encounter her wit with, her sensitivity to, her discrimination in selecting, her preoccupation with and talk about, and her artful practices in furnishing, recognizing "good reasons" and in using them and making them true. To enumerate Agnes' management devices and to treat her "rationalizations" as though they were directed to the management of impressions and to let it go at that, which one does in using Goffman's clinical ideal, euphemizes the phenomenon that her case brings to attention. In the conduct of her everyday affairs she had to choose among alternative courses of action even though the goal that she was trying to achieve was most frequently not clear to her prior to her having to take the actions whereby some goal might in the end have been realized. Nor had she had any assurances of what the consequences of the choice might be prior to or apart from her having to deal with them. Nor were there clear rules that she could consult to decide the wisdom of the choice before the choice had to be exercised. For Agnes, stable routines of everyday life were "disengageable" attainments assured by unremitting, momentary, situated courses of improvisation. Throughout these was the inhabiting presence of talk, so that however the action turned out, poorly or well, she would have been required to "explain" herself, to have furnished "good reasons" for having acted as she did.

That persons "rationalize" their own and each other's past actions, present situations, and future prospects is well known. If I were speaking only of that, this report would consist of one more authoritative version of what everyone knows. Instead, I have used the case to indicate why it is that persons would require this of each other, and to find anew as a sociological phenomenon how "being able to give good reasons" is not only dependent upon but contributes to the maintenance of stable routines of everyday life as they are produced from "within" the situations as situations' features. Agnes' case instructs us on how intimately tied are "value stability," "object constancy," "impression management," "commitments to compliance with legitimate expectancies," "rationalization," to member's unavoidable work of coming to terms with practical circumstances. It is with respect to that phenomenon that in examining Agnes' passing I have been concerned with the question of how, over the temporal course of their actual engagements, and "knowing" the society only from within, members produce stable, accountable practical activities, *i.e.*, social structures of everyday activities.