

Against the Bedrock: Gender-Affirming Therapies, Transgender Psychoanalysis, and a Case for Confusing the Sexes

Brendan Moore¹

¹Comparative Literature, Emory University, Atlanta, USA

Correspondence
Email: btmoore@emory.edu

This article identifies and offers an alternative to a trope shared across multiple genres of writing on therapy for transgender people: the bedrock. That metaphor, derived in part from Sigmund Freud's own argument (in "Analysis Terminable and Interminable" [1937]) that a sexual difference rooted in biology is the "bedrock" of all psychic phenomena, is influential in psychoanalytic accounts of transgender being and often implicitly present even in non-psychoanalytic clinical writing. I take as exemplary cases two recent non-psychoanalytic manuals on trans-affirming therapy, and two recent articles on psychoanalytic therapies with trans patients and theories of trans being. Despite their differences, each of these articles formulates or depends on a theory of a "bedrock" to trans experiences in order to demonstrate that trans patients are not confused about sex and gender. I propose the prepositional "against the bedrock" as a counter-metaphor which might articulate how patients, cis and trans, only confuse sex precisely because sexed biology is itself confusing and confused.

KEYWORDS

transgender, gender affirming, bedrock, Freud, Laplanche

1 | INTRODUCTION

This article arises out of an ongoing engagement with the emergent fields of transgender-affirmative and gender-affirming psychotherapies¹, which, as part of a larger field of gender-affirming medical care, take as their point of departure the notion that transgender experience is not in need of correction and therefore seek to validate the patient's lived sense of their gender (Chen et al., 2018; Hidalgo et al., 2013; Keo-Meier & Ehrensaft, 2018; Lev, 2019; Lopez et al., 2017; Pyne, 2014a, 2014b; Rafferty, 2018). Itself at the intersection of clinical psychology, social work, and academic research in gender and sexuality, the field of gender-affirming therapies is inextricable from both the scientific frameworks of psychology and medicine, and from the hybrid humanistic and social scientific study of "gender" in the academy. Gender-affirming therapies, like the gay-affirmative therapies which preceded them, are also the product of an encounter between marginalized people and the clinicians and institutional bodies which endeavor to "treat" them. If gay-affirmative therapies aim to treat the gay person's sexual orientation as a fact to which they must adapt in some way (Landridge, 2007), then gender-affirming therapies, *mutatis mutandis*, do the same with the trans person's gender. Gender-affirming therapies also treat cisgender patients whose gender identities or expressions may be considered non-normative, and thus do not assume that "gender" is something which only affects trans people.

However, the entanglement of gender-affirming therapies with both academic and clinical endeavors to produce knowledge about transgender, nonbinary, and gender-nonconforming² people suggest the need for a critical psychological intervention in psychotherapeutic discourses around transgender (and, by extension, gendered) experience. The tension in gay-affirmative therapies between supportively neutral and actively supportive approaches to the patient's gay identity (Landridge, 2007) appears as well in gender-affirming therapies. For instance, in one exposition of what a gender-affirming model for child therapy can look like, we read that "the role of the mental health professional is a facilitator in helping a [gender-expansive] child discover and live in their authentic gender with adequate social supports," and that "mental health professionals are their translators" (Keo-Meier & Ehrensaft, 2018, p. 13). Are facilitators and translators blank screens against which patients' gender identities can unfold, or should the therapist's facilitation and translation take the form of active validation, affirmation, or approval? This open question is especially fraught when the therapist is tasked with trying to determine whether a child patient is "really" trans and therefore in need of a specific kind of affirmation. Some work in critical psychology (Pyne, 2014b; Riggs, 2019; Riggs et al., 2019) has therefore already begun asking: How can psychotherapy treat gender concerns without reducing both trans and cis persons to static objects of the clinician's diagnostic gaze?

One unplumbed site where this critical encounter with gender-affirming therapies might take place is at the join of mainstream talk therapy and psychoanalysis. For scholars and clinical practitioners within critical psychology, this avenue of investigation is likely to appear equal parts intriguing and inviable. Skeptics and proponents alike rightly note that psychoanalysis in the United States has historically integrated itself within the normalizing disciplinary apparatuses of psychiatry (Abelove, 1993; Malone & Friedman, 2015). Proponents of an alliance between psychoanalysis and critical psychology point to a counter-tradition (perhaps an anti-tradition) within psychoanalysis which seeks not to normalize the subject, but to bring it back in touch with its own ex-centricity. These scholars have tended to rely on French psychoanalyst Jacques Lacan over any other psychoanalytic theorist (Frosh, 2014; Hook, 2008; Malone, 2012; Owens, 2009; Parker, 2015, 2018, 2019; Parker & Hook, 2008). A field which courts both Foucault and Lacan is thus in a potentially irresolvable conflict with itself about the recourse to psychoanalysis. To risk prosopopoeia, this

¹Henceforth "gender-affirming therapies."

²The phrase "transgender, nonbinary, and gender-nonconforming" is an umbrella phrase for people who understand themselves to either not conform to the sex assigned to them at birth, not conform to the social and cultural expectations surrounding their gender, or both. For simplicity, this article uses "transgender" and "trans" to refer to TNG people, as TNG people do not identify with the sex they were assigned at birth. Admittedly, this stylistic simplification risks excluding cisgender people who consider themselves to be gender-nonconforming.

is where psychoanalysis might ask to be: on the outside, within.

The matter is yet more vexed for any speculative attempt at using psychoanalysis for the purpose of critically reframing trans-affirmative therapies more specifically. The attribution of normalizing and disciplinary effects, not to mention aims, to psychoanalysis becomes more viscerally meaningful when recast in the light of decades of abuse which trans people have endured under the aegis of analytic "interpretation" (Cavanagh, 2017; Hansbury, 2017b; Wiggins, 2020). Even if it were possible to do so, it would not suffice to tally up the number of trans analysands who have been the victims of a psychoanalyst's attempts at conversion therapy by another name.

In this context, one of the most frequently nominated representatives of an alliance between critical psychology and psychoanalysis—the work of Lacan and his followers—suddenly appears too reactionary to merit consideration. A field whose doxa (that a transgender analysand is the psychotic product of a weak or absent paternal function [Fink, 1999; Millot, 1990; Safouan, 1980]) went unchallenged internally until recent years is difficult to bill as helpful to trans people, whether as therapy or as theory of sexual difference. Pointing out that the transphobic views propounded for years by many Lacanian analysts are misrepresentations of either the letter or the spirit of Lacan's teaching is a tactic which likely appeals only to the already converted. To this point, we need only turn to recent comments from both Lacan's son-in-law, Jacques-Alain Miller, and Lacanian analysts operating under the Millerian brand, to see that the transphobia of Lacanian psychoanalysis is not a thing of the past.³ The non-Millerian Lacanian protest that Miller misrepresents Lacan and non-Millerian Lacanians is a startling disavowal of the reality that, for people who

³It would take me too far afield from the meat of this article to devote space in the body to Miller's article, "Docile to Trans" (2021). Nevertheless, it is useful to include some of Miller's comments (and those of his colleagues) here: Miller writes that trans people have provided the model for recent genocidal misogynist political ideologies ("his [the misogynist's] rhetoric is modelled on that of those de-colonials, genderqueers and woke people whom he vows to demonise. He simply reverses it" [Miller, 2021, "MGTOW" section, emphasis in original]). He implies that trans people wish to censor psychoanalysts (an imagined trans interlocutor tells Miller, "You have only one thing to do: shut up. And then, once you have repented, you will go the school of the trans, where you will finally learn who we are, which you have no idea about" ["The prosopopeia of trans" section]). With a wink and a nudge he alludes to white nationalist rhetoric of "demographic replacement" when he notes, "As the demographics of the small 'chosen people' [Jews] decline, 'the trans population' are taking over and seem to 'fill the earth'" ("A dizzying demography" section). Miller's rhetoric is vitriol without argument, but perversely occupying the place of argument by passing itself off in the form of a journal article.

It is worth noting, too, that an analyst contributing to the journal in which Miller's "Docile to Trans" is published writes, "J'ai lu un livre de Judith Butler... Elle est juive et homosexuelle..." (David, 2021, p. 64) (I've read one book by Judith Butler... She is a Jew and a homosexual...). The second ellipsis is not mine, but the writer's—it seems that only sneering silence can follow a queer, nonbinary Jew who has the temerity to argue with psychoanalysts. What could a non-Lacanian or someone unfamiliar with psychoanalysis at all make of this other than that psychoanalysis condones transphobia, antisemitism, and homophobia? Do psychoanalysts who ignore or excuse this language think that their profession will last in a world without antisemitism, homophobia, and transphobia? Or are they banking on psychoanalysis thriving in a world without Jews, gay people, and trans people?

No matter. Miller concludes by complaining that at least the hysterics of Freud's day knew to be quiet and accept that they were sick: "[I]n Freud's time there were no militant groups or lobbies dedicated to the emancipation of hysterics, to their *empowerment*" ("The Capture of Hysterics" section, emphasis in original). That feminists indeed marched in the streets seems to have missed Miller. Of course, feminists did not march under the banner of hysteria, even as they were considered hysterics. But neither do trans people march under the banner of hysteria. Is it Miller's position that a split subject cannot also be a political subject? Does the fact that the hysteric votes mean that the hysterical vote is an invalid vote? Do we not count the hysteric's vote? Does the hysteric's vote not count?

Disappointingly, one non-Millerian Lacanian response to this rhetoric from Slavoj Žižek merely recapitulates Miller's terms by framing trans people as victims who need the Lacanian analyst (or the Lacanian Marxist) to rescue them: "Our task today is to separate the transgender and feminist ideology from the radical core of this movement. Only in this way can the movement be redeemed, and only Lacanian psychoanalysis combined with Marxism can do this job" (Žižek, 2021). The "transgender and feminist ideology" which Žižek targets (without citing trans people or feminists) is one which "forgets to assert a negative universal: the antagonism that characterizes human sexuality as such." These trans people and feminists monomanically wish to live in a world where gender is "a joyful experience or expression of our true selves: a practice of non-binary plasticity where a subject permanently experiments with itself and reconstructs itself, playing with different identities from hetero to gay, from bisexual to asexual." For Žižek, "[t]he true tyranny is the tyranny of this permanent rediscovery of new identities"—i.e., not the tyranny of violence against trans people.

One Lacanian analyst, Patricia Gherovici (2021), cited her work with trans people to dispute both Žižek's and Miller's framing of trans experience as a simple refusal of sexual difference: "[M]y position has taken distance from a classical position among Lacanians, which is to assume that any... transgender form of expression is necessarily a sign of psychosis, which I think is evidence that they have very little clinical experience with trans-identified analysands." And further: "I don't think it was helpful clinically to think of transgender expressions as a clear sign of a specific [psychic] structure. That's why I work with them as a symptom, as something that could eventually become a *sinthome*—not even a symptom in the medicalized way, not as something you want to cure, but something that maybe is a unique singular invention that makes life possible, or life livable." It is worth noting that neither Miller (an analyst) nor Žižek (not an analyst) cited any clinical work with trans people to support their arguments. Gherovici remains, frustratingly, one of few exceptions to the rule of Lacanians speaking and writing publicly about transgender people.

stumble upon, indeed are targeted by, but are not already enmeshed in these internecine disputes, Miller is Lacan, Lacan is psychoanalysis, and psychoanalysis is transphobic. I write this not to paint Lacanian psychoanalysis with a Millerian or a transphobic brush, but to register bewilderment that there are clinicians and theorists who think that the best response to some trans people's equation of psychoanalysis with transphobia is yet more scholastic exercises supposedly demonstrating the infidelity to Lacan of Miller (or of Slavoj Žižek).⁴ It is perhaps a testament to the transformative and creative potential of the psychoanalytic experience that, despite the myriad failings of psychoanalysts, trans people continue to seek analysis at all.

It is that potential psychoanalysis which I am interested in putting in contact with gender-affirming therapies. Its status as potential rather than actual should signal that I do not take some monolithic ideal called "psychoanalysis" even to exist, let alone to be superior to the diverse array of practices gathered under the header of gender-affirming therapies. Instead, I find this potential psychoanalysis in the interstices of psychoanalytic (not exclusively or even mostly Lacanian) theory and practice, where the analysand's gender is something to be explored, not merely affirmed. This exploration takes place, not as a consequence of the analyst's clumsy efforts to produce the analysand's gender as either cause or outcome of their pathology, but through the unfolding of the material the analysand brings to the couch through their attempts at free association. I understand the use of an encounter between gender-affirming therapies and psychoanalysis to be the opening-up of both fields to their critical possibilities.

Scholars and clinicians working at the intersection of trans theory, critical psychology, and psychoanalysis have already begun much of this crucial work. Damien Riggs (2019) applies a critical psychological approach to clinical work with trans children and adolescents, resisting the linear developmental narratives of trans childhood upon which many guides to trans-affirmative therapies base their advice. Yet while Riggs is a Lacanian analyst, the cited work prioritizes critical psychology over psychoanalysis and thus leaves untouched the connection between the latter discourse and gender-affirming therapy. On the other hand, Tobias Wiggins (2020) brings psychoanalysis to bear on itself in the context of psychoanalysts' defensive pathologization of transness, but focuses on the countertransference reactions which produce what we might call transphobic psychoanalyses. This recent body of work on psychoanalysis, critical psychology, and gender-affirming therapies is still nascent, and as such does not yet address what I identify as the mutual pitfalls of both gender-affirming therapies and gender-affirming psychoanalytic approaches to trans analysands.

I am not proposing a new treatment model of trans-affirmative psychotherapeutic practice, or even a new set of techniques for trans-affirmative psychoanalysis (where this latter may be said to exist at all). In fact, this article does not propose a "new" theory derived from clinical material, as I myself am neither a clinician nor a researcher in academic psychology. Instead, this is a reading of four sources (two recent guides to conducting gender-affirming therapy in section 2, and two non-Lacanian psychoanalytic articles in section 3) on the treatment of trans clients and analysands,⁵ with implications for any talk therapy which involves speaking beings who must situate themselves in some relation to sex.⁶ I focus primarily on non-Lacanian psychoanalytic theorists to develop a potential route between critical psychology, gender-affirming therapies, and psychoanalysis beyond Lacan. This preference for non-Lacanian theories stems not from an antipathy toward Lacan but rather from a dual interest: in making critical psychological approaches available to the wider world of psychoanalysis, and in putting in connection with critical psychology the burgeoning field of non-Lacanian psychoanalytic writing on trans experience.

My argument is twofold, but not sequential. I consider these two insights to go hand in hand. One of my

⁴The fact that many attendees of *A Symposium on The Desire of Psychoanalysis* saw Žižek's comments on trans people as substantively different from those of Miller points to a profound confusion among, at least, academic Lacanians regarding what a non-transphobic psychoanalysis could even look like.

⁵I use the words "client" and "analysand" following the usage of whichever clinician I am citing.

⁶This includes those whose relation to gender is that of a non-relation, like agender people.

claims is that much gender-affirming therapy leans too far in the direction of affirmation. Affirmation as the primary ground of therapy for trans people implicitly sets in place a prohibition on what we might call the therapeutic negative: the undigestible antagonism which must be encountered again and again before therapeutic action can set in, and even then, without eliminating this negative, rendering it positive, or incorporating it into the patient's psyche in some harmonious way. This negative is most apparent in the overdetermination of speech, whose meaning is never exhausted by the communicative function privileged by everyday intercourse. By prioritizing the ambiguous value of "affirmation," affirmative therapies not only evade homophobic or transphobic iatrogenic harms, but they also have the potential to block clients from an encounter with the negative. In this sense, affirmation is necessary but not sufficient for positive, long-term therapeutic action. In fact, although this is not the focus of this paper, what is often described as "affirmation" in the literature on gender-affirming therapy might better be called openness or neutrality with a touch of warmth, as when an analyst accepts (and uses) an analysand's name and pronouns while leaving open the possibility that the meanings of these words will reveal themselves during the analysis. The play between openness and neutrality, and between therapeutic affirmation and the therapeutic negative, is something which many psychoanalysts seem to grasp in their writing more clearly than do non-psychoanalytic, gender-affirming clinicians, for whom gender can either be affirmed as identity or critiqued as socially imposed norm, but rarely if ever explored as unconsciously, semiotically rich.⁷

My other claim, however, is that psychoanalytic writing (by clinicians and academic theorists alike) about the treatment of transgender analysands must deal creatively with the issue of sexed embodiment if it is not to fall into the trap of situating itself on one side or another of an affirmative/corrective binary.⁸ I focus here not on the psychoanalytic writing which might reasonably be deemed transphobic or cisnormative, but on that writing which shares many of the assumptions of the gender-affirming therapeutic models. This relatively incipient field of psychoanalytic writing attempts to carve out a theoretical and clinical space where analytic methods and a commitment to justice and dignity for trans lives can coexist. I argue that this psychoanalysis (which we could, after Patricia Gherovici, call transgender psychoanalysis [Gherovici, 2017]) can only avoid carrying the baggage of both transphobic psychoanalysis and gender-affirming therapies if it remains invested in the fundamentally unconscious creativity about sex which analysands reveal in their free associations. Discussion of this sexual creativity must be localized around a word which psychoanalysts seem to be loath to abandon, yet anxious to deploy differently: "bedrock."

While many psychoanalysts in the twenty-first century will be quick to express their disagreement with Freud's famous dictum that "anatomy is destiny" (Freud, 1924), they are nevertheless as attached to the idea of sexual difference's bedrock as non-psychoanalytic therapists, if in different fashions. There is no single way that the

⁷This article cannot address the fact of a gap between how clinicians describe their practices, and how they actually practice. I am not critiquing the technique of a particular clinician or making claims about how psychoanalysts and non-psychoanalytic therapists, in the aggregate, deal with gender in the consulting room. Rather, my wager is that something can be learned about the enabling limits of various therapeutic discourses (which operate in the consulting room as well as in monographs, conference presentations, and academic journal articles) by investigating what kinds of considerations different fields make legible.

⁸I do not mean to posit an equivalence between gender-affirming and trans-affirmative therapies on the one hand and "conversion" or "reparative" therapies on the other. In a world where affirming trans people in their identities, bodies, and experiences is *ipso facto* suspect, while delegitimizing a trans person's declared understanding of themselves is allowed to appear politically neutral, we cannot risk treating "affirmation" as dangerous in the same way that conversion therapies are dangerous (i.e., life-threatening). A poor understanding of psychoanalytic technique, for instance, would have it that "analyzing" the symptoms with which a trans person presents would be enough to do away with those symptoms and return the patient to their "original" sense of their gender. Trans-antagonistic clinicians and polemicists will also sometimes assert that a transgender person's claim of "being born in the wrong body" or "having gender dysphoria" is itself essentialist—an assertion which fails to engage with how transgender people have had to make their necessarily complicated experiences legible to the manual-wielding clinical gatekeeper who stands between them and lifesaving healthcare (Stone, 1992). While few analytically informed clinicians would admit to holding such a simplistic view of the analytic process, it is significant that psychoanalysts working with trans and queer analysands have sometimes described a decision (often unconscious or at least unarticulated at the time) to discourage the analysand's interest in medical transition or the exploration of non-normative gender identifications (Kulish, 2010; Lemma, 2018; Marcus & McNamara, 2013; Winograd, 2014). While these analysts would likely not consider themselves to be in the same group as those conversion therapists who ground their practices in a faith tradition, it is easy to see how the exercise of suggestion for the sake of gender normalization is at play in both cases. But the retreat into a knee-jerk affirmativism also carries, as I will argue, less obvious costs.

ensemble of psychoanalysts appears to interpret this concept of “bedrock”—some understand its metaphoric referent to be the actual sexed anatomy of the human being, whereas others accept the foundational significance of sexual difference for human beings, while making sex itself non-literal. (We might ask why the idea of “sex as bedrock” has merited so much reinterpretation and rearticulation among psychoanalysts where “anatomy is destiny” has appeared impossible to understand as anything but simple anatomical essentialism. Anatomy’s destiny is, after all, an open question.) Curiously, gender-affirming therapies often also ground their models of therapeutic action in a theory of sex, having shifted the ground from genital morphology to endocrinology, neurology, or even psychology and sociology. The gender-affirming clinician does not seek to prove the patient’s so-called brain sex before offering treatment, but presumes that the bedrock matches the patient’s declared gender.

While this is certainly less dehumanizing than predicating the acceptance of a trans person’s declared identity on a test (whether psychological or biological), its flat biologism carries a risk. This biologism, which takes biology literally rather than seriously, is also at play in psychoanalytic work on transgender identification. I do not wish to dissuade psychoanalysts and psychoanalytic theorists from grounding their theories in sexed embodiment. Rather, I want psychoanalysis to interpret against, rather than with, the bedrock. This move, which I will explicate further below, would position psychoanalysis as a praxis of sex beyond the reductive options of gender correction and gender affirmation.

Finally, a word on qualifications. Both psychoanalysis (particularly in the U.S.) and psychology consider themselves to be grounded in some variation on the empirical. The author, neither a clinician nor a researcher in psychology, finds himself thereby precluded from expressing what might be considered an informed opinion by either psychologists or psychoanalysts. This is perhaps especially so in the Anglophone U.S. American context, where psychoanalysis has desperately attempted to maintain a delicate balance between holding the critical inspection of quantitative science at bay and claiming for itself a position *within* science. The generic conventions of any writing that intervenes at the level of psychoanalytic practice (or “technique”) call for case material as evidence. Otherwise, the author risks wild (or, maybe worse, backseat) psychoanalysis.

But even if, “[o]fficially, the practice of psychoanalysis is the only valid means of testing the theory...the move from theory to practice can also be thought of as a flight from a specifically psychoanalytic type of thought” (Bersani, 1986, p. 4). Leo Bersani, not a clinician, makes the groundbreaking claim that the speculative thought which founds psychoanalysis cannot be effaced by the nevertheless singular importance of the clinical encounter. One place the history of psychoanalysis begins is, scandalously, Freud’s self-analysis. That this self-analysis was conducted in part through a passionate (and transference) epistolary relationship with another man would not so much prove that self-analysis is impossible as it would suggest that the speculative and the empirical are blurred in a “science” like psychoanalysis, where unconscious thought is our primary object. The hope in analyzing the clinical and theoretical reflections of others is that something will be able to emerge about both gender-affirming therapy and psychoanalytic theory and practice that would not have emerged without this confrontation.

In this light, it is useful to call to mind what Gayatri Spivak (a literary scholar rather than a clinician) has provocatively called her practice of “say[ing] ‘yes’ to a text twice” (Spivak, 1993, p. 143). This strategy, which she also calls “affirmative deconstruction,” “sees complicity when it could rather easily be oppositional” (143). While Spivak does not consider her task as a scholar of literature to be primarily or even necessarily “an exposure of [another’s] error” (145), she also sees saying “yes” to the text as reading against the grain. Like Spivak, I am interested in an “attitude towards that which is critiqued... [which] give[s] assent without excuse, so much that one inhabits its discourse—a short word for [which] might be ‘love’” (145). I read psychoanalysis as well as both academic and clinical gender-affirming writing in order to think gender and the unconscious together. Each clinician and scholar cited here is someone whose work I have found inimitably helpful in locating the potholes in the bedrock.

2 | GENDER-AFFIRMING PSYCHOTHERAPIES

2.1 | Outline of gender-affirming therapies based on two recent manuals

This section examines two recently published guides to the gender-affirming practice of therapy: M. Nichols's *The Modern Clinician's Guide to Working with LGBTQ+ Clients: The Inclusive Psychotherapist* (2021) and S.C. Chang, A.A. Singh, and I.m. dickey's *A Clinician's Guide to Gender-Affirming Care: Working with Transgender and Gender Nonconforming Clients* (2018). Both texts market themselves as providing a continuing education to mental health clinicians on the effective treatment of trans clients. While, based on its title, Nichols's guide at first appears to simply add the "T" to "LGB," she notes that the book's advice on working with trans clients takes up "more space than I have devoted to any one subgroup in the LGBTQ+ universe" (Nichols, 2021, p. 191). Inversely, although Chang et al.'s guide mentions only "gender" and "transgender and gender nonconforming clients" in the title, its framework is intersectional: "When working with trans clients, it is important to take into account the multiple contexts of their lives" (Chang et al., 2018, p. 14). As such, Chang et al. readily discuss the technical aspects of (and provide case vignettes about) working with trans clients on issues not reducible to a unitary experience of "gender"—trans people have sexual orientations, racial and ethnic identities, class positionalities, disabilities, religions and spiritualities, national origins, and more. Consequently, neither text appears to fall prey to two potential pitfalls of clinical writing about gender: the relegation of trans experiences to secondary status after the sexuality-based struggles of lesbians, gay men, and bisexuals; and the reification of "gender" as a category which exists outside the webs of social relations which determine it.⁹

Furthermore, and contrary to a facile reading of words like "affirming" and "affirmative," both works evince dynamic understandings of what it means to be a gender-affirming and trans-affirmative clinician. "Affirmation" here sounds nothing like the caricatured coercion of adults and even children into social or medical transition which takes center stage in right-wing and reactionary feminist representations of gender-affirming therapy. Instead, as will be unsurprising to those familiar with gay- and trans-affirmative therapies, clinicians are advised to take a "come as you are" approach to treating trans people. Neither book explicitly endorses guiding a person toward or away from any kind of transition. Both books caution against rushing someone into a transition for which they may be unprepared or about which they are unenthusiastic. Nichols describes working with "[s]ome older transgender clients [who] decide that transitioning isn't worth the life disruption it will cause" (p. 198). Nichols's approach, true to client-centered form, leaves such decisions up to the person she is treating. This kind of affirmation is radically empathetic, insofar as it sees dignity in all forms of gendered being—even the supposedly shame-filled closet. Likewise, Chang et al. emphasize that the gender-affirming clinician's role might be to let gender fall to the side if it is not relevant to a client's presenting concerns: "it is important to be aware of [clinician] assumptions about the salience of gender and to center clients' needs and perspectives" (p. 188). This reflects both Nichols's and Chang et al.'s holistic (and, especially for the latter, intersectional) approach to treating trans people. Gender-affirming is not a synonym for gender-fixed.

However, the model of transgender personhood assumed by gender-affirming therapies reflects a broader tension within neoliberal accommodationist frameworks of LGBT+ inclusion. On the one hand, the movements for gender and sexual minorities which have achieved the greatest legal and social success in North America have not differed much from a liberal humanist conception of (rights derived from) a universal personhood (Duggan, 2004; Jakobsen & Pellegrini, 2003; Puar, 2007; Spade, 2015; Vaid, 1995). In the fight to write LGBT+ people into antidiscrimination and marriage law, these movements seek mostly to submit an addendum to the definition of the universal person.¹⁰ LGBT+ people are "just like you"—mere variations on the universal person—and it is on that basis that they

⁹ For critical historical explorations of the co-construction of gender, race, and sexuality, see: Abelson, 2019; Galarte, 2021; Gill-Peterson, 2018; Muñoz, ?; Salamon, 2018; Snorton, 2017; and Somerville, 2000

¹⁰ This is not to disregard the very real gains which derive from such a reinscription of the universal person.

deserve the same rights. On the other hand, the grounds on which LGBT+ people can be included in the definition of the rights-having person must be an essential difference from straight people and cis people. After all, straight people, like gay and bisexual people, have long been forbidden from marrying someone of the same gender. Cisgender and transgender people alike might be discriminated against in housing and employment on the basis of a perceived failure to live up to prevailing gender norms.

That such arguments probably strike most readers as facile attests to the successes of LGBT+ social movements at reframing sexual and gender discrimination as harms perpetrated against discrete groups. Homophobic and biphobic discrimination harms gay and bisexual people, and transphobic discrimination harms trans people. This argument defines LGBT+ people as measurably different from straight and cisgender people due to immutable characteristics, namely, sexual orientation and gender identity. Early proponents of the immutable characteristic argument emulated the U.S. legal framework for addressing racist discrimination: discrimination on the basis of an inborn and immutable trait, like race, is impermissible (Halley, 2000; Jakobsen & Pellegrini, 2003). Implicit in this formulation is that an immutable characteristic is immutable in the same way for each person who is characterized by it—and thus that there is a universal experience of something like being trans. Membership in the group and possession of the immutable characteristic are reciprocally defining.¹¹ In the following subsection, I detail how this commitment to a liberal humanist conception of trans identity can undermine the gender-affirming clinician's commitment to epistemological humility about the nature of the people they treat.

2.2 | On why affirmation is not enough

To be sure, the gender-affirming clinician, as described above, takes a “come as you are” approach to the client. As Chang et al. write, “We believe the basis of all trans-affirming [and gender-affirming] care is this: to respect client self-determination” (p. 19). The clinician takes the client at their word about how they understand their gender, and displays both humility and flexibility if and when the client's perceptions about their gender shift. A corollary of this approach to therapeutic technique is the theoretical axiom that atypical gender identification or expression, and changes in identity and expression, are not in themselves pathological or indications of underlying pathology but are simply an aspect of the client's being.¹² Furthermore, Chang et al. emphasize that there is no singular transgender experience, as gender variance is constructed in many different ways across cultures (see, e.g., Chang et al., 2018, pp. 171-172). Nichols shares this investment in both client self-determination and an intersectional approach to gender-affirming care (Nichols, 2021, pp. 42-44 and 188-189).

Yet this welcoming approach to trans clients also entails a certain production of knowledge about who or what that client “is.” As a result, gender-affirming approaches to therapy sometimes cannot sustain their commitment to strict agnosticism and libertarianism regarding the meaning of a client's transgender identification or atypical gender expression. The clinician's humility is paradoxically founded on an assumption of a unitary trans experience. In this subsection, I will show how Nichols reduces transness to a stable object of biological and psychological knowledge. On

¹¹A more flexible understanding of discrimination and other forms of anti-queer and anti-trans violence can eschew the formalistic rigidity just described by applying what Dean Spade, reading Foucault, calls a “population management” framework (Spade, 2015). Laws and administrative policies might target and therefore disproportionately impact sexual, gender, and racial minorities while also ensnaring those in the social majority, albeit at lower rates. Identity can be ontologically messy without the state losing its ability to, on the aggregate, target certain modes of being for surveillance, maiming, and premature death (Browne, 2015; Gilmore, 2007; Puar, 2007).

¹²Given the prevalence of this norm among gender-affirming clinicians, the claim ubiquitous in social conservative and reactionary feminist circles—namely, that terms like “gender-affirming” disguise an agenda to coerce children into social and medical transition—is so baseless that to attempt to debunk it here would be to give it more credence than it merits. Most recently, for instance, critics of gender-affirming therapies have accused gender-affirming therapists of themselves attempting to “convert” cisgender lesbian and gay children and adolescents into being transgender and, as the logic goes, thereby no longer gay. That there is no evidence of such a practice taking place, and that many transgender people are also gay or bisexual, should be enough to suggest that comparisons between gender-affirming therapies and reparative therapies are specious (Ashley, 2020).

the other hand, while Chang et al. make no reference to biological or psychological explanations of trans experience, they rely on a conception of transphobic oppression so expansive that they consider trans people to be definitionally incapable of sustaining any therapeutic work other than the most short-term and goal-oriented.

Nichols is adamant that attempts to determine the etiology of a client's sexual orientation or gender can only be demeaning. For instance, she advises against psychodynamic efforts to find biographical reasons for a client's preference for kinky sex (Nichols, 2021, p. 262). Yet the question of etiology is assumed to be unproblematic when it is given the imprimatur of biological and psychological scientific research: that is, the only possible etiology of LGBT+ identities is both empirically verifiable and linearly developmental. For example, in a chapter also replete with references to empirical research on the brain differences between gay people and straight people, Nichols offers three examples (two of which she does not provide a citation for) of research on trans brains. First, a comparison of "digit ratio" between trans people and gay people¹³ indicates closer resemblance between a trans woman and a cis woman than between a trans woman and a cis man. Trans men and cis men, likewise, have more similar digit ratios than trans men and cis women. (Per Nichols: "This suggests that prenatal androgen exposure, perhaps at a different prenatal stage than for sexual orientation, may be involved in the etiology of transgenderism" [p. 52].)¹⁴ Second, studies of twins show higher rates of both twins being trans if identical, and lower rates if fraternal. Third, autopsied trans women's brains "anatomically appear to be an intermediate range somewhere between that of natal [sic] males and natal females" (p. 52).

It is notable that these data are left to speak for themselves. They are perhaps meant to convince the more skeptical reader that clients' genders and sexualities are immutable and therefore not the proper objects of therapeutic intervention, but this connection is implied rather than established. Furthermore, the exact meaning of the studies cited or alluded to is itself in need of elaboration. Does a higher rate of gender identity concordance in identical twins compared to fraternal twins suggest that monozygotic trans twins share a trans gene, or does it suggest that identical twins are likelier to share lived experiences around gender (Joseph, 2015)? Does a person's brain anatomy reveal the underlying truth of their endocrinologically determined gender, or is it possible that data like post-mortem brain anatomy and even hormone levels might reflect, as feminist theorists of materiality argue, a lifelong trajectory of the psyche-soma coming to grips with itself (Jordan-Young, 2010; Karkazis, 2019; Kirby, 1997; Wilson, 2015)? An ominous implication of the "born this way" arguments is that trans people seeking surgeries and/or hormones might one day be required to offer biological proof of gender. It is not my aim here to efface the part that hormones and neural anatomy play in sexuality and gender, although certainly terms like "biology," "sexuality," and "gender" are much more difficult to define than the "born this way" discourse (and transphobic discourses) would imply. It is unfortunate if gender-affirming clinicians who endeavor to take biology seriously become, in the process, "overly credulous about the status of neuroscientific data" (Wilson, 2015, p. 5), which always require contextualization and elucidation before they can be used to make strong claims about something like inborn, immutable psychological traits.

This undertheorized use of scientific data and hypotheses can take place without "biology" entering the conversation. In the book's otherwise convincing critique of recent work which posits the existence of "rapid-onset gender dysphoria" among teens assigned female at birth, Nichols relies on psychological research to argue for the clinician's ability to "determine" (p. 226) the future gender of a gender-atypical child or adolescent. Nichols summarizes the work of psychologist Diane Ehrensaft (2016) in the following way. Gender-atypical children can be divided up into three categories: those who typically say "I am a (girl/boy)" and persist in their trans identification; those who typically say "I wish I was a (boy/girl)" though "they rebel against attempts to make them conform to gender stereotypes," often end up being (cis and) gay or bi rather than trans; and those other children "who are exploring both gender expression

¹³The reader is left to assume that these are cisgender gay people in contrast to trans people whose sexual orientations are otherwise unspecified.

¹⁴This study is the only one with a parenthetical citation provided, which I include in my references below: Kraemer et al., 2009

and gender identity” and then “become teens and adults who identify as ‘gender queer,’ ‘agender,’ or ‘nonbinary’” (Nichols, 2021, p. 226). Ehrensaft refers to these children as “apples,” “oranges,” and “fruit salad,” respectively. It is uncertain if it is beneficial to give clinicians the power to judge whether a child seems serious enough about (or uses the right language regarding) their gender identification in order to qualify for social transition or puberty blockers. What would be the harm, for instance, of an orange mistaking themselves to be an apple and changing their gender pronouns? Training clinicians to detect objective markers of trans identification might only serve the overall goal of gatekeeping transness.

Importantly, the line between the language of “I want to be a [gender]” and “I am a [gender]” is as fraught as it is significant. It seems like a leap to assume these phrases’ distinctness as simple markers of trans or cis identification. One case vignette Nichols offers to illustrate the apple/orange/fruit salad distinction revolves around a cis boy who, for a time, identified as a girl, but eventually detransitioned. (All this involved was a change of name and pronouns.) As the child, Zak,¹⁵ recalls, “All my life I wanted to be a girl, thought I really was a girl. I guess I had to live as a girl for a while to realize that I’m not. What I am is a girly gay boy” (p. 230). All that separates wanting and being in the syntax of Nichols’s quote is the breath of a comma. This separation can be semiotically rich, but the ability of the clinician to read that caesura is never certain. “Wanting to be” and “being” are so ambiguously different that one might need a deferral to the next session to see how the one and the other will play together. And, as we see with Zak, the only fallout from allowing this child to live his life was for the adults around him: “the adults involved... were all more confused and upset over his change of mind than he was” (p. 230). Nichols’s commitment to unconditionally supporting the client’s right to self-determination (p. 188) can therefore conflict with her investment in proving the trans person’s groundedness in something like a human nature.

On the other hand, Chang et al. steadfastly avoid arguments for trans personhood from the perspective of the natural sciences. Yet Chang et al.’s investment in an intersectional analytic, with its concomitant focus on oppression as a defining feature of marginalized people’s experiences, might also confine the client within a box of gender-affirmation. Intersectionality can thus be deployed in as positivist a fashion as “biology” or “psychology.” To be sure, intersectionality as a field of study is only as fraught or contradictory as it has been generative (Nash, 2019). In the context of gender-affirming therapy (in the iteration which Chang et al. describe), intersectionality comes to reify the very categories which it endeavors to illuminate.

Chang et al. helpfully define intersectionality as “a framework that considers the additive and interconnected nature of cultural identities, systems of oppression, and the power, privilege, and marginalization that may result [from the former]” (p. 14). (They also rightly cite Kimberlé Crenshaw as the theory’s originator—a citation which I repeat here [Crenshaw, 1991].) This comprehensive definition is careful to specify that oppressions and identities are constituted in both “additive” and “interconnected” fashions, thus allowing for the possibility that gender and (for instance) race might not simply combine but also shape each other. The authors’ adoption of an intersectional framework reflects their investment in a clinical ethos of humility. In short, like Nichols, Chang et al. believe that the clinician’s first duty is to listen to the client’s own words about their unique experience.

Yet even with Chang et al.’s attentiveness to the nuances of clients’ intersecting identities and oppressions, a positive knowledge about transness comes to the fore when any question of the client’s unconscious arises. In such moments, the “client” ceases to be a client and is instead positioned as a potential analysand—a shift which might disrupt the consumer-oriented model of psychotherapy which undergirds both gender-affirming as well as mainstream therapies (Parker, 1998, 2014). Avoiding the possibility that the client could cease to be the customer of an entrepreneurial “service-provider,” Chang et al. circumscribe the meaningfulness of trans identification within the role

¹⁵All clients, patients, or analysands described in this article are drawn from the published writing of clinicians. Therefore, the name used for every client, patient, or analysand discussed is a pseudonym provided by the clinician whose work I am citing.

of goal-oriented client. The more that gender—as both system of oppression and mode of being/experiencing oneself—becomes significant, it seems, the less trans people “can afford to have an unconscious” (Gherovici, 2018, p. 221).

The authors in fact counsel clinicians to avoid delving too deep with their trans clients. In particular, they warn that “approaches that encourage insight alone (e.g., classical psychoanalysis) are often not the most useful for trans clients, as the reality of anti-trans bias, as well as the need to take actions to cope or seek medical care, require more solution-focused strategies for dealing with client concerns” (Chang et al., 2018, p. 4). This advice appears within a section of the text’s introduction which otherwise recommends a variety of different therapeutic modalities, like cognitive behavioral therapy, dialectical behavioral therapy, and trauma-informed therapies, and theoretical frameworks, like intersectionality and social justice. The authors acknowledge that psychodynamic modes of therapeutic intervention may be a part of the gender-affirming clinician’s tool kit, but “psychodynamic” is as circumscribed as the trans client’s role in therapy. Chang et al. are quick to clarify that the usefulness of psychodynamic theories lies in their “acknowledgment that the relationship dynamics between you, as clinicians, and the clients with whom you work can greatly affect the course and outcomes of your clinical practice” (p. 3). The relationship in the present with the therapist is only valuable in its capacity to validate the client’s experience. Chang et al. grant that this relationship may take the client back to memories of prior relationships—but, tellingly, the only hypothetical example provided is of trans clients recovering from past experiences with transphobic therapists. The relationship with the therapist never leads the trans client away from the immediate work in the room. The reader is left to wonder if trans clients are capable of dreaming, fantasizing, or symbolizing their pain.

Eventually, Chang et al. do provide one case vignette of how to work psychodynamically with a trans client, but this vignette merely reinforces the trans client’s circumscription. Lyle, a trans man, seeks help about his unstable relationship with his husband. The clinician notes enactments taking place in and around the session and makes hypotheses about the meanings of these enactments. The approach to using these hypotheses is psychoeducational: the clinician surmises that Lyle has a certain attachment style, and “decides to educate Lyle about attachment styles and how Lyle’s attachment style may relate to” patterns in his relationships (p. 190). The authors describe some of Lyle’s initial resistance to the clinician’s didactic intervention, but this resistance vanishes quickly and is replaced by the client’s eagerness to learn from the therapist. The treatment appears to be focused on Lyle “learn[ing] skills to address [his] feelings when they come up” (p. 190). Here it is apparent that the gender-affirming clinician, like most trained mental health workers, is ideally one who brings their client knowledge. Belying the ostensible simplicity of such claims about the client being the expert in their own experience (“clients have the right to say who they are” [p. 2]), Chang et al. implicitly emphasize that the client’s speech must always be brought back to the concrete realities which their book assumes constitute everyday life.

While Chang et al. have dispensed with the bedrock of neurobiology and endocrinology upon which Nichols relies, they still attempt to locate a ground to the trans person’s experience. The non-biological ground is social—but with the term “social” designating a static referent available to both clinician and client. The knowledge of the social which Chang et al. prioritize (under the much-discussed rubric of “cultural competence” [Chang et al., 2018, pp. 37–38]) is positive and empirical. While the principle of “cultural humility” (Chang et al., 2018, p. 71) guides the clinician to avoid assuming they know better or more than the client about that client’s own experiences, it also places a burden on the client to know whereof they speak. As a result, the belief in the right of the trans person to “say who they are” can lead the gender-affirming clinician in different directions. The gender-affirming therapies I have discussed here risk corraling the trans person within the role of “client,” offering them a semblance of choice while deciding in advance—and on their behalf—the limits to the meaning of their speech. The client qua client is rendered an expert on their experience only to the extent that the clinician grants their speech the power to communicate fully the first

time around, while denying that speech the quality of overdetermination. Recognizing the overdetermination of the trans person's speech (like the overdetermination of all speech) would mark the transition from a trans client position to the position of a trans analysand.

It is therefore doubtful that "affirmation" may be enough to allow trans clients to experience effective change in their lives. The "come as you are" approach which guides gender-affirming therapists is ironically capable of confining the trans person to just that: the way they represent themselves upon coming to therapy, or upon revealing a change in identification. To see the trans person's speech as representing something both more and less than expert knowledge about their conscious and preconscious experiences would entail deeper, potentially longer, treatment. While gender-affirming clinical practices can dramatically reduce the iatrogenic harm done to trans people by the pervasive transphobia of mental health providers, this course correction also reinforces the capitalistic ethos of most modern talk therapy.

In the following section, I will discuss how psychoanalysis, as an alternative to more mainstream modes of talk therapy, can avoid both the iatrogenic violence of reparative therapies and the confinement of the trans person to the role of "client." In short, psychoanalysis can take the language which the analysand uses to refer to themselves as a jumping-off point (rather than something to be corrected) without assuming the univocality of this language. One way of putting this is that psychoanalysis would not so much affirm gender as *be* transgender itself (Gherovici, 2017), incorporating and unleashing the language of the trans analysand. Rather than hypostatizing "transgender psychoanalysis" as a pure praxis, I will detail both the strengths and the stress points of some recently published psychoanalytic approaches to theorizing work with trans analysands. Transgender psychoanalysis (like gender-affirming therapy) is a horizon toward which analysts and analysands might proceed, not an actually existing entity which an objective third party could identify by checking off boxes on a list of criteria. Instead, returning to Freud, and using Sándor Ferenczi's theory of genitality and Jean Laplanche's innovative work on the drive, I will suggest that transgender psychoanalysis distinguishes itself by working against the bedrock of sex, not *grounded* in it. I play on the double meaning of "against" as both *contra* and *leaning on* to argue that transgender psychoanalysis is at its most hospitable to trans analysands when it acknowledges the domain of sex as one of unconscious creativity.

3 | TRANSGENDER PSYCHOANALYSIS

Just as there are many ways of practicing gender-affirming therapy, so too does the universe of psychoanalysis contain multitudes. This article will not attempt to argue for the appropriateness of different psychoanalytic orientations in treating trans analysands. For the sake of space, I take for granted that a treatment is psychoanalytic if it engages "in bringing out the unconscious meaning of the words, the actions and the products of the imagination (dreams, phantasies, delusions) of" the analysand, particularly through "the controlled interpretation of resistance, transference and desire" in the analysand's free associations (Laplanche & Pontalis, 1973, p. 367). Different psychoanalytic orientations (different "psychoanalyses") privilege or forego various elements of this definition, but they attempt to orbit around it rather than jettison it entirely.

It would be a gross understatement to describe the institutions and practice of psychoanalysis as, historically, damaging to the interests of trans people. As trans-affirming analysts have shown (Gherovici, 2017; Hansbury, 2017b), psychoanalysts have, in their practices and in their published writing, traditionally considered the mere fact of being transgender as essentially qualifying one for a diagnosis as either a pervert or a psychotic.¹⁶ In a way, psychoanalysis

¹⁶Gherovici points out that the transphobic history of psychoanalysis is inextricable from its (arguably anti-Freudian) normalizing attitudes toward homosexuality and bisexuality (Gherovici, 2017, pp. 60-61).

has not only enacted harm on trans people at the levels of treatment and public discourse, but it has also locked trans analysands out of the experience of an encounter with the unconscious. Like the psychoanalysts who instructed their gay analysands that they could either cease all “homosexual activity” or leave analysis (Roughton, 2002), the analyst who relegates any trans analysand’s speech to the realm of the perverse or the psychotic has made the decision not to take trans speech as seriously as cis speech.¹⁷ For many analysts, the fact of a person’s being diagnosable (according to psychoanalytic diagnostic criteria) as psychotic has been tantamount to the claim that this person is not analyzable, or at the very least cannot sustain the kind of analytic exploration of their unconscious which a neurotic might be able to undergo. In practice, this has meant a wholesale rejection of not only trans people as candidates for analysis, but of the task of psychoanalysis itself.

In this section, I explore some attempts to make psychoanalysis capable of listening to trans analysands. The 2010s saw a proliferation of academic writing, both clinical and academic, on psychoanalysis and trans people.¹⁸ This writing has shared a common interest in arguing both that trans speech is unconsciously overdetermined (like all speech), and that an analysis cannot have as its treatment goal the cessation of transgender identification or expression. Combining these two insights, we might say that a transgender psychoanalysis is one which recognizes that social and medical transition can be both psychodynamically rich experiences worthy of exploration *and* enlivening for the person who elects to undergo either or both. This position conflicts with the notion that all forms of transition are instances of “acting-out,” i.e. a carrying into action outside of analysis that which should be interpreted within analysis and then sublimated. Instead, transgender psychoanalysis understands transition as something which, like a choice of career or choice of partner, is part of the analysand’s attempt to produce something livable out of the confusion of childhood wishes and identifications. Just as there can be sustainable and unsustainable modes of adopting a career, so can there be sustainable and unsustainable modes of gender transition.

Here, I examine two articles which have assumed something approximating the foregoing as the basis of the encounters they stage between “transgender (people, bodies, experiences)” and “psychoanalysis.” These articles (one published in a psychoanalytic journal, the other in an academic journal) exemplify one tendency in the trans-affirmative psychoanalytic writing on trans people: an emphasis on the “bedrock” of sexual difference as the grounds of transgender as well as cisgender identification. While there has been some fanfare over recent Lacanian work on returning psychoanalysis to its roots as a practice of gender and sexual liberation (Gherovici, 2017), I focus here on the Anglophone tradition which privileges Freud and his British and U.S. followers. This tradition has in recent years become somewhat more open to transgender analysands, but much of the debate within these circles has appeared to center on the question of retaining or abandoning a supposed biological bedrock of sexual difference.

“Mourning the Body as Bedrock: Developmental Considerations in Treating Transsexual Patients Analytically” (Saketopoulou, 2014a) is a case history of work with a trans child analysand which won the American Psychoanalytic Association’s 2014 Ralph Roughton Award.¹⁹ On the other hand, “The King’s Two Anuses: Trans Feminism and Free

¹⁷This is not to say that the pervert and the psychotic (to the extent that these words designate people with perverse or psychotic psychic structures) speak or act meaninglessly. To the contrary, perverse and psychotic acts and speech are profoundly meaningful to practitioners of many if not all psychoanalytic orientations. But the choice to confine trans experience to perversion and psychosis is symptomatic of a refusal to hear trans speech as meaningful in the ways which neurotic speech is meaningful.

¹⁸See, e.g., Goldner, 2011; Gozlan, 2014; Hansbury, 2011, 2017a, 2017b; Offman, 2017; Saketopoulou, 2011, 2014a; and Suchet, 2011. This is, of necessity, a partial list.

¹⁹The Ralph Roughton Award is given by the American Psychoanalytic Association (APsA) for a paper which expands psychoanalytic thinking on issues of gender and sexuality affecting LGBT people. Roughton was instrumental in the fight to bring the American Psychoanalytic Association (APsA) in line with the policies of the American Psychiatric Association (APA) on the matter of the depathologization of homosexuality. While the APA had voted to remove homosexuality from the *Diagnostic and Statistical Manual of Mental Disorders* (DSM) in 1973, APsA only prohibited discrimination against analysands and analytic candidates on the basis of sexual orientation in 1992 (Roughton, 2002). The International Psychoanalytic Association followed suit in 2002, following the prompting of Roughton and others (Roughton, 2003). A comparable battle over the inclusion of transgender analysts and analysands within the practice of psychoanalysis does not seem to have been waged, at least not so publicly.

Speech" (Lavery, 2019) is a somewhat autobiographical essay on Michel Foucault, Ray Blanchard, and Jacques Lacan published in the feminist theory journal, *differences*. Lavery's article exemplifies much of the stylistic twist-and-turn exemplary of contemporary queer, feminist, and trans theories, while Saketopoulou's writing hews closely to the narrative arc required by the genre of the psychoanalytic case history. I bring these two texts together because, despite their argumentative and formal differences, they both stage a case for transgender psychoanalysis (though neither uses this term) by basing psychoanalysis in some way on the bedrock of sexual difference. Neither Saketopoulou nor Lavery argues for the reduction of transgender identification to brain sex, or the more unambiguously measurable "digit ratio," as does Nichols. Both Saketopoulou and Lavery write about trans speech without the assumption that the communication of knowledge (we might say, of a referent) is the bedrock of that speech, unlike Chang et al. However, the notion of sexual difference as bedrock in psychoanalysis persists in Saketopoulou's and Lavery's writing as a way of providing some ground to the trans person's experience, even as they adopt explicitly anti-foundationalist attitudes toward gender.

As is evident from Saketopoulou's title ("the body as bedrock"), the bedrock of sexual difference is frequently construed as being at the level of the body. This locution, originating in Freud, is apparently so well disseminated in psychoanalysis that Saketopoulou can include it within the title of her essay (and only once within the body of the text itself) without citing Freud directly. Despite the status which the phrase has as a psychoanalytic common sense, it can be especially opaque to non-psychoanalytic readers. The bedrock of sexual difference, though perhaps bodily, is not what Nichols refers to when she cites research on brain sex, or what biological essentialists refer to when they insist that sex "is" one's chromosomes.

3.1 | "Mourning the body as bedrock": bedrock as the past in the present

In Saketopoulou's work with Jenny, a six-year-old trans girl, the body both discloses and disguises itself as an object of analytic work. Jenny's life is characterized by "agonizing outburst[s], part fury, part despair" (Saketopoulou, 2014a, p. 783), typically in response to others misgendering her—even her little brother, who sometimes forgets the right pronouns or Jenny's new name. While Jenny's rage is often disproportionate and inconsolable, Saketopoulou does not present the analysand's gender as a manifestation of an underlying pathology. The rage and other symptoms "*result from the traumatic and unmentalized impact of being trans rather than being its originary cause*" (p. 780, emphasis in original).²⁰ But more specifically, Jenny's rage and despondency activate whenever she is reminded that her body is not what she wants it to be: not only when she is misgendered, but also when she puts on a one-piece swimsuit and realizes that her penis is visible through the fabric. She fantasizes that one day she will have erased every trace of her assigned sex at birth—including the destruction of any photographic evidence of her early childhood.

For Saketopoulou, the alternation of dysphoria with fury is Jenny's reaction to the loss of control inherent in the experience of a discordance between sex and gender: "In the case of the transsexual patient, this omnipotent control has sometimes been installed in the first place as a way of keeping at bay the pain of the body/gender disjunction" (p. 782). Trans analysands with experiences like Jenny's will find that "mourning the fact that their natal body does not fluidly map onto their gender is a crucial part of the therapeutic process" (p. 781). Saketopoulou's role in all of this is "to help the patient delink gender and body" (p. 782), and indeed, this appears to be what happens for Jenny. Over the course of Saketopoulou's work with Jenny, the analysand progressively reveals her wishes about her body through drawings of animals transforming into other animals. Jenny eventually reports a dream of an ostrich burying its head in the sand with the hopes of emerging headless. In a twist, the dream concludes with the ostrich developing into an ostrich-chicken hybrid, which Jenny jubilantly dubs "an ostricken" (p. 798). The case material concludes with

²⁰Saketopoulou refers to this as "massive gender trauma," or the combined impact of constant misgendering and "gender-inflected body dysphoria" (p. 779).

an apparent transformation, as Jenny is more capable of incorporating the knowledge of her sex assigned at birth into a viable trans identity.

Saketopoulou notes that “[a]nalytic authors have traditionally approached the body as bedrock,” in the sense that these authors “unequivocally located gender as a factual truth residing in anatomical difference” (p. 791). The transgender psychoanalysis which Saketopoulou practices, in contrast, does not assume that trans analysands must give up their wishes for medical transition in order to be considered well analyzed. At first, then, there appears to be no immutable bedrock in Saketopoulou’s account. Or, if anything is bedrock here, it would be the past: “[I]t is the mourning of the unconscious fantasy that the past can be excised that best facilitates adaptation in one’s identified gender” (p. 793-794). The trans analysand must accept the past, synonymous with sex assigned at birth, in order to move forward into a transgender future. But for the child analysand, this past is also present: “I felt it would be crucial for Jenny’s penis to become thinkable for her before she could shed her reliance on fantasy-based, omnipotent solutions” (p. 794). The body is not bedrock, except when it is. Jenny’s penis must become thinkable to her *as a male organ* so that she can “mourn” the lost vulva she was never born with.

This spectral past-ing of the bedrock “natal body” (p. 773 and *passim*) which somehow still sticks around into the present appears to apply as well to the history of body-as-bedrock. In a response to comments on her paper which expressed some concern over the threat of psychoanalysis losing this bedrock, Saketopoulou writes, “Insofar as the natal body can no longer be accepted as gender’s guarantor, it can no longer be treated as bedrock” (Saketopoulou, 2014b, p. 830). I identify a slippage here between a description of that which was once doxa (“the natal body was once assumed to be gender’s guarantor”) and a psychoanalytic commonsense that this doxa indeed once held true (“once upon a time, the natal body really guaranteed gender”). This slippage is anchored by the clause, “it can no longer be treated as bedrock.” But could—should—the body-assigned-at-birth ever be treated as bedrock?

I draw the reader’s attention to the points in Saketopoulou’s writing where the bedrock of sexual difference seems to both vanish and reassert itself. This does not so much catch Saketopoulou in an error as it does foreground a tension in efforts at a trans-affirmative reframing of the ideas which Anglophone analysts today see themselves as having inherited from over a century of psychoanalytic thought. I choose to examine Saketopoulou’s writing precisely because her work with Jenny strikes this non-analyst as impeccably sensitive to the child’s needs, as well as to the rich overdetermination of her speech and play. Yet we should be curious about the disciplinary effects of an analytic discourse which frames the body as a bedrock imposed upon us by the past (of psychoanalytic tradition or of childhood). Might the presumption of this legacy itself become an imposition? Although Saketopoulou emphasizes the need for analysand and analyst alike to “mourn” this bedrock body, unarticulated assumptions about both bedrock and body predetermine what it is trans analysands are expected to mourn.

3.2 | “The king’s two anuses”: bedrock as infinite plasticity

Before turning to Freud and Laplanche to detail what I take to be a tradition of psychoanalytic misreading of this “bedrock,” it is useful to explore a more recent deployment of the term. Lavery’s essay, “The King’s Two Anuses,” ranges many more topics than can be summarized here. The relevant section of the article is a critique of Lacanian approaches to sexual difference, which Lavery alleges are incompatible with a trans political project. In fact, parts of her argument diverge from the liberal psychoanalytic approach to trans experiences which Saketopoulou (a relational analyst rather than a Lacanian) can be taken to represent. Lavery, not beholden to a psychoanalytic tradition in the same ways as Saketopoulou, asks what it will take for a trans woman to be considered a woman:

Must my argument be essentialist (but then you will tell me that the ‘essence’ in question is one of those

I don't have, rather than any of those I do; perhaps you will tell me that a woman is made from cHrOmO-sOmEs), or must it be constructivist (in which case you will tell me that the construction in question is nothing to which I could have been subjected, rather than anything to which I have been)? Must I find some negative formulation to satisfy your demands ("I am not a man" or "I am no longer a man")? But then you will either tell me that there are many ways to be a man, so that perhaps nobody is really a man (goodness, you do love to make that argument, as though patriarchy were a coincidence); or, you will tell me that I simply have a desire to be a woman (perhaps you will also tell me that everyone does) and that desires, we all know, possess no ontology for anyone who has passed through the barrier of the reality principle. At some point, you will be obliged to confess that, in your view, I am simply conducting an elaborate subterfuge.... (Lavery, 2019, p. 140)

Saketopoulou's transgender psychoanalysis never endorses anything like the badgering to which trans women are routinely subject, and which Lavery reproduces in painstaking detail. Yet there is a peculiar resonance between Saketopoulou's ambivalent embrace of mourning the body as bedrock and Lavery's imagined (but not fictive) transphobic interlocutor who insists that the trans person come to grips with reality. Where must the trans analysis ground their claim to gendered realness in order to convince the analyst that they are capable of sane transness?

This question does not lead Lavery to conclude that Freudian psychoanalysis is inhospitable to trans analysis. Instead, she organizes her grounding of trans embodiment and experience through a retrenchment of classical Freudian objections to later Lacanian deviations from orthodox interpretations of Freud. While this unexpected turn in her argument is compelling, there are significant moments where Lavery's defense of Freud from Lacan ironically becomes a defense of Freud from Freud. When she writes that Lacan "bases his theory of the drive on a reduction of sexual identity to an opposition of active and passive," and, again, that "Lacan's theory of the drive depends on the reduction of sexual identity to hydraulic force, a gesture that bypasses and, by bypassing, eradicates, trans identification" (Lavery, 2019, p. 148n11), Lavery omits that Freud himself not only propounds a "hydraulic" conception of the drive, but also conflates masculinity and femininity with, respectively, activity and passivity.²¹ That Freud's speculative work on the drive and sexed being is a heuristic rather than a strict ontology of men and women makes this claim of his provisionally useful and also open to revision. Furthermore, it is not facially obvious why the drive's entanglement with the sexed psyche makes Lacan (or Freud, for that matter) incompatible with the reality of trans people's genders.

For the time being, let us say that Lavery's reclamation of Freud from the Lacanians is arbitrated precisely over both sex and the drive. In a critique of Joan Copjec's work on sexual difference,²² Lavery writes, "[W]hat is clear is that an object called sex is being moved [in Copjec's writing] from one part of the psyche ('the terrain of culture') to another ('the terrain of the drives')" (Lavery, 2019, p. 141). Here, Lavery alludes to Copjec's reading of a dispute between social constructivist and Lacanian psychoanalytic theorists of sex: while the social constructivists construe sex as the outcome of cultural processes, one Lacanian argument situates sex at the psychic level of the drives and, therefore, beyond political or (conscious) individual intervention. For Lavery, not only does the Lacanian claim make sex "a matter of something like human essence" (p. 141), and thus useless for trans politics, but it is contradicted by the very thinker to whom Lacan claimed to be instantiating a return. As she puts it, "Freud has installed another category—*biology*—into the position that Copjec, along with many of Freud's readers, reserves solely for the drive" (p. 142, emphasis in original). Lacanians like Copjec, in Lavery's reading, make it impossible for a trans person to speak

²¹ See the following footnote appended to *Three Essays on the Theory of Sexuality* in 1915: "It is possible to distinguish at least three uses [of the terms masculinity and femininity]. 'Masculine' and 'feminine' are used sometimes in the sense of activity and passivity, sometimes in a biological, and sometimes, again, in a sociological sense. The first of these three meanings [i.e. activity and passivity] is the essential one and the most serviceable in psycho-analysis" (Freud, 1905, p. 219n1).

²² See Copjec, 1994

of their gender's realness without being reconstituted in analytic discourse as a dupe of gender, something nowhere near as real as the ineffable and intangible drives.

The solution, for Lavery, is a recourse to Freudian biology—with a dash of plasticity. “[B]iology exists on the terrain of culture... *biology* can be changed and indeed is continually being assigned new meanings; and... it is indeed infinitely negotiable by any number of regimes of bodily modification,” writes Lavery (p. 145, emphasis in original). The biological body, unlike the stubborn drive, is readily available to trans subjects who “exert our will... to transfigure what is merely manifest into what might, finally, count as latent” (p. 146). While Saketopoulou's bedrock, though abolished, comes back to haunt the trans analysand who has tried to escape it through fantasy, Lavery's bedrock avails itself to the trans subject's will (but *not* drive). In both cases, a transgender psychoanalysis is only articulable by avoiding the possibility of taking seriously a driven, transgender fantasy about the body.

3.3 | Lavery and Saketopoulou together: assuming a bedrock

Although Lavery and Saketopoulou produce radically different arguments about the status of trans subjectivity, they nevertheless arrive at their conclusions by the same route: an encounter with (one version of) a Freudian sexual difference. Paradoxically, then, Saketopoulou and Lavery approach the bedrock of sexual difference from opposite angles and still conclude together that the psychologically healthy trans subject is one who has accepted the irrevocable nature of their body in order to change it. In Saketopoulou's essay, as noted above, this means a critique of the classical psychoanalytic claim that “the body spells gender's reality” (Saketopoulou, 2014a, p. 791). While Saketopoulou grants that “a new bodily materiality *can* be created that conforms better to the contours of [a trans person's] psychological experience,” she also insists that “[p]sychologically healthy transitioning... *hinges on* a foundation of solid analytic work around mourning the pain brought by the natal body” (p. 793, emphasis mine in second quotation). Thus, despite dismantling the legacy of the anatomical bedrock in psychoanalytic thought, Saketopoulou's assumption that such a bedrock ever existed outside of the minds of the North American and British appropriators of Freudian thought entails a sexual ontology where an originary “natal body” must be killed off in order for the trans person to be truly born. Although I will not disagree with the potential applicability of this narrative schema to an analysand like Jenny, Saketopoulou's language shifts rather easily from particularizing to universalizing about trans analysands.

Lavery's theory of the bedrock allows her to make a case for the psychological efficacy of surgical transition to realize transgender will, in opposition to Lacanian doxa about gender's falsity and sex's unrepresentable realness. Here, Freud's (per Lavery's paraphrase) belief in “sex difference as the ‘bedrock’ and the ‘rock-bottom’ of the psychic field... on the grounds of ‘the biological factor’” (Lavery, 2019, p. 142), together with a belief in biology's infinite plasticity, is actually what permits the trans subject to bypass the question of the drive's relation to reality, a question which normally gives both classical Freudians and Lacanians license to equate medical transition with “acting out.” In this inventive rereading of Freud, the fact that one can surgically alter sex means that the bedrock is itself alterable.

Like G. Salamon's influential work in trans theory, *Assuming a Body* (2010), Lavery produces a theory of the psyche (or, for Lavery, the will) as capable of unlimited flexibility in how it appropriates the body's morphology. The difference between Lavery's and Saketopoulou's arguments lies in Saketopoulou's conviction that the bedrock is a past which must be mourned in the present. Nevertheless, both Lavery and Saketopoulou organize their investigations around the trans analysand's conscious gender identification and the immediately visible material of genital configuration. Curiously, their arguments do not seem to conclude with what might be the natural outcome of such reasoning: that there is no bedrock of sex difference in the first place, since an infinitely plastic bedrock is not much bedrock at all. Rather, Lavery and Saketopoulou reproduce a psychoanalysis which assumes the bedrock.

3.4 | Bedrock reread through Freud, Ferenczi, and Laplanche: confusing the sexes

What, then, is this bedrock—and how does it originate in psychoanalytic theorizing? One understanding of sexual difference is reflected in Lavery's definition, "the anatomical shape and function of the sexual organs" (Lavery, 2019, p. 143). It is here where most psychoanalysts might turn to a parable in Freud's notorious essay, "Some Psychological Consequences of the Anatomical Distinction between the Sexes": the proverbial little boy²³ witnesses the girl's lack of a penis and "disavows what he has seen," eventually developing "horror of [what appears to him to be] the mutilated creature or triumphant contempt for her"; the little girl sees the boy's penis and "makes her judgment and her decision in a flash," knowing now "that she is without it and wants to have it" (Freud, 1925, p. 252). The shape and function of the genitals are lived as a real, fundamental, even traumatic difference for children, who must produce an *ad hoc* psychic solution to the real loss which threatens them or which they feel they have already sustained. The important matter here is the *thing of* sexual difference which intrudes on the child's world, rather than the object of scientific knowledge to which adults refer when we speak of "sexual dimorphism" (or "the social construction of sex").²⁴

This view is, however, not dominant even in Freud's own writing. In the same essay, he in fact grants that this claim about the significance for children of the shape and function of the genitals is a departure from an assertion earlier in his career "that the sexual interest of children, unlike that of pubescents, was aroused, not by the difference between the sexes, but by the problem of where babies come from" (Freud, 1925, p. 252n2). His allusion here is to "The Sexual Theories of Children" (Freud, 1908), which documents the florid explanations that children produce to account for the creation of yet more children (birth through the anus, conception through ingestion, intercourse as sadism, and delivery via stork). But an even older essay, "The Sexual Enlightenment of Children" (Freud, 1907), declares that the question of "where babies come from" emerges only after the child notices the difference between those who have penises and those who, in a specular economy, do not. The difference between "where do babies come from" and "what's the difference between mommy and daddy" turns out to be significant insofar as the answer to the first might entail all sorts of nonce taxonomical (Sedgwick, 1990, pp. 23-24)²⁵ answers not permitted by the binary premises of the second.

Perhaps the closest one could get to a final word on the issue comes in "Analysis Terminable and Interminable" (Freud, 1937), where it is noted that parents' attempts to explain to children both sexual dimorphism and sexual reproduction are always futile. This is not due to children's ability to disavow sexual difference, like the little boy who pretends not to have seen the lack between his mother's or sister's legs. Instead, Freud writes that children reject their parents' attempts at sexual education because they will not give up on "the sexual theories which might be described as a natural growth and which they have constructed in harmony with, and dependence on, their imperfect libidinal organization" (Freud, 1937, p. 234). This account bestows a chronological primacy upon, not a glimpsed and then disavowed penis or lack thereof, but those sexual theories which children are subsequently asked to abandon "like primitive races who have had Christianity thrust upon them and who continue to worship their old idols in secret" (p. 234).

Possibly the most that can be argued about a Freudian conception of sexual difference, then, is that Freud himself seemed undecided about whether it (whatever "it" is) really was a bedrock after all. His willingness to reverse

²³ I reproduce here Freud's terminology rather than what we might consider to be a more descriptive language, like "cisgender boy" or, more neutrally, "the child assigned male at birth."

²⁴ A reasonable objection here could point out that the repressed or disavowed thing of sexual difference is itself a cultural and scientific production rather than something which precedes the machinations of the social. Conversely, psychoanalysis might rejoice that it is the childhood fascination with and anxiety about sexual difference that invests cultural and scientific explorations of "sex" with such passion, fear, and trembling.

²⁵ Expounding on the insight that "people are different from each other" (p. 22), Sedgwick writes that "probably everybody who survives at all has reasonably rich, unsystematic resources of nonce taxonomy for mapping out the possibilities, dangers, and stimulations of their human social landscape" (p. 23). We could extend Sedgwick's nonce taxonomy to children's sexual theories about the pluriform erotic resource of the body.

the order of primacy between “sexual theories” and “sexual enlightenment” indicates a difficulty in grasping whether a genital-centric culture requires children to disavow sexual unity (everyone has an anus, everyone has a mouth) in the service of a belated sexual difference, or if sexual unity is a defense against a logically and chronologically primary knowledge of sexual difference. This undecidability suggests a structural problem in the theoretical apparatus of Freudian psychoanalysis as it has been imported into the work of psychoanalytically informed clinicians and academics. Freud’s published writing appears to fully acknowledge the confusion, even if the name “Freud” is now often attached to the stubborn figure he projected while defending the theory of castration anxiety and penis envy put forward in the 1925 essay. It is difficult to equate sexual difference with bedrock in the total trajectory of Freud’s work without excising the component of that work which describes sexual difference as a belated, not primary, object of knowledge.

However, Lavery and Saketopoulou both independently reproduce the formulation of either “the body as bedrock” or “the bedrock of sexual difference.” It is not my contention that they are confused in their reading of Freud’s legacy. Instead, I suggest that there is something usefully confusing in Freud. It is, unexpectedly, this confusion about sexual difference which makes psychoanalysis precisely so fruitful for thinking trans experience and embodiment (and for thinking sexed experience and embodiment *tout court*). Where transphobic discourse hails the trans person as one who “confus[es] the sexes” (Hansbury, 2017b, p. 389), the root of psychoanalysis is exactly the impossibility of avoiding such a confusion. Sexual difference is confused because there is never just one sex, but there is also potentially fewer than two: the theories children produce about sex appear to hypothesize an unsexed singular body, but also fracture that body into innumerable sexual organs, from mouth to anus to phallus and beyond (including birds). Freud himself wrote with astonishment that “the actual genital zones... transmit their susceptibility to stimulation to other erotogenic zones (normally neglected in adult life), which then behave exactly like genitals” (Freud, 1905, pp. 183-184). Freud’s student and friend Sándor Ferenczi would radicalize this insight when he argued that “[t]he organs participating in urethral functioning are crucially influenced from the anal sphere, the organs of anal functioning from the urethral, so that the bladder acquires a degree of retentiveness from the rectum, the rectum a degree of liberality from the bladder” (Ferenczi, 1924, p. 12). What Ferenczi called an amphimixis (or mingling, mixing) of anal and urethral libidinal tensions both undermines a theory of sexual difference which grounds the sexual in the genital and makes genital sexual difference possible through the anal erection of the genital monolith. As Ferenczi writes, “The genital would then no longer be the unique and incomparable magic wand which conjures eroticisms from all the organs of the body; on the contrary, genital amphimixis would merely be one particular instance out of the many in which such fusions of erotisms takes place” (p. 12). The sexual theories of children about cloacal birth from the anus come to be vindicated as a sort of anatomical truth in the psychoanalytic confusion of rectum with urethra with clitoris.

When Lavery argues that Freud considers anatomical genital difference to be biological bedrock, she bases this claim on a reading of “Analysis Terminable and Interminable.” We have already seen that this essay actually repudiates Freud’s earlier elevation of sexual enlightenment (i.e., the revelation of sex as genital and dimorphic) over children’s sexual theories (i.e., sex as both fewer than two and more than one). Lavery points us to the essay’s own termination, where Freud concludes, in a stroke of tragicomedy, that the rock bottom of every analysis is the bedrock of penis envy or castration anxiety beyond which no analysis can be done. Freud writes: “We often have the impression that with the wish for a penis and the masculine protest [i.e. castration anxiety] we have penetrated through all the psychological strata and have reached bedrock, and that thus our activities are at an end. This is probably true, since, for the psychical field, the biological field does in fact play the part of the underlying bedrock. The repudiation of femininity can be nothing else than a biological fact, a part of the great riddle of sex” (Freud, 1937, p. 252). Lavery concedes that Freud considers sex to be a “riddle” rather than an answer, but she insists that there is nothing in “the anatomical shape and function of the sexual organs” which “possesses anything like the tropic or motivating force of the drive” (Lavery, 2019, pp. 142-143). In this reading, the shape of sex actually becomes rather flat, while the drive

both contorts the subject through its tropological force and inspires that subject to action.

However, the “riddle” of sex belongs not only to “Analysis Terminable and Interminable” but also to the earlier “Femininity” (Freud, 1933), where Freud writes of “the riddle of the nature of femininity” (p. 113). (Note again that Freud often refers not to the riddle of difference between sexes, but the riddle of one sex.) This latter text attaches a poem to femininity’s riddle—a poem which Jane Gallop has shown itself plays with the tropological power of sex (Gallop, 1982, pp. 56-79). In “Femininity,” Freud writes, “Throughout history people have knocked their heads against the riddle of the nature of femininity,” and then quotes from a section of a poem (“Nordsee” by Heinrich Heine) titled “Fragen” (Questions): “Heads in hieroglyphic bonnets/Heads in turbans and black birettas/Heads in wigs and thousand other/Wretched, sweating heads of humans” (quoted in Freud, 1933, p. 113). Sex is given exactly the tropological power to turn from a question of the genitals to a question of the head—which is, of course, itself a ready metonym for both vulva and glans.

If the mere shape of the genitals is not enough to produce such an effect, then I must conclude that the culprit is the inseparability of drive from sex in the human being. The drive to know, which both partakes in the drive toward “obtaining mastery” and “makes use of the energy of scopophilia,” is of foundational importance in psychoanalytic research as “the instinct [*Trieb*] for knowledge in children is attracted unexpectedly early and intensively to sexual problems [*sexuellen Problemen*] and is in fact possibly first aroused by them” (Freud, 1905, p. 194, emphasis added). Lavery’s neat separation of drive from sex is confounded by the phenomenon of a drive which is itself provoked by the very riddle of sex. This riddle of sex provokes in the nascent psyche a drive to produce ever-proliferating answers to that unanswerable riddle. Indeed, we might rightly speak of the riddle of the riddle of sex, insofar as it is not quite clear what Freud means by sex. What he writes of as *sexuellen Problemen* appear to an English reader to refer to *Sexualität* (sexual eroticism) rather than to *Geschlecht* (sex as natural kind); yet the section of *Three Essays on the Theory of Sexuality* where Freud first writes of scopophilia and epistemophilia equates these sexual problems with the very riddle of sex to which Lavery draws our attention as the bedrock of psyche and psychoanalysis. Likewise, the conclusion of “Analysis Terminable and Interminable” refers to “the great riddle of sex” with the compound *Geschlechtlichkeit*, or sexedness. This construction could as easily reference the erotogenic quality of the genitals as those genitals themselves: genitals whose component drives are as likely to be conferred upon as derived from the many non-genital zones peopling the infantile sexual theories that the same essay vindicates as psychically originary. Most simply, while *Sexualität* in Freud’s corpus generally refers to libidinality, the word itself can also refer to the existence of sexes, especially in the discourses of natural philosophy contemporary with early Freud. The metonymic sliding of *Sexualität* into *Geschlechtlichkeit*—the sexually driven curiosity about the sexed riddle of the sphinx—indicates that the cleaving of one sex from another is perhaps the precondition of sexuality at all; but it also suggests that it is the drive to suss out the secrets of “sex” which produces this cleaving in the first place. This temporal paradox, where both drive and sex precede and are inseparable from each other, would demand a different thinking of the “bedrock of sexual difference.”

In the first place, the tropological force of the sexual drive must be understood to exist just as readily in the realm of sex. The drive-derivatives which appear in fantasies about losing or waking up to find one’s genitals transformed are not necessarily a disavowal of the reality of sex, but perhaps a creative reading of the riddle of sex. What would change in the treatment of such a fantasist if one were to allow for the psychic productivity of this wish rather than attempting to correct it? Intervention at the level of the body would remain on the table, just as no psychoanalyst would think of telling an analysand that their dream of leaving a bad job or an abusive marriage must only be interpreted and never taken into the register of action. But the dreams, fantasies, and wishes would not need to be grounded in a phenomenological or biological ground of sexed reality in order to be ratified as sane. The analysand would not need to be led by the hand into mourning a body which, in fact, had not died—but instead accompanied in the process of unfolding their singular answer to the riddle of the Sphinx.

This approach to treating trans analysands positions itself against the bedrock of sexual difference. “Against” can certainly mean “in opposition to”: I suggest that psychoanalysts work against the post-Freudian misreading of Freud as a biological reductionist, and instead turn to the places in Freud where sex is most confusing *because* it is confused. But “against” can also mean “leaning upon.” Jean Laplanche calls our attention to Freud’s use of the word, *Anlehnung* (leaning on; *étayage* in Laplanche’s French), to describe the relation of the drive (*Trieb*) to the instinct (*Instinkt*). The drive, which is on the border of the psychic and the somatic, derives its support from (leans on) somatic instincts like hunger and thirst, but fundamentally perverts or diverts the energy it borrows. The instinct of hunger, which is directed to specific objects, is contorted into the sexual drive, which lacks any fixed object. The sexual drive is derived from, but not isomorphic with, the instinct. Furthermore, Laplanche argues that psychoanalysis is itself characterized by this parasitism: “[I]n our view, the slippage that Freud allows to occur within conceptual oppositions that he is perfectly aware of and that even serve as the guiding line in his argument is *nothing else than the slippage effected, within the genesis of the sexual drive, by the movement of anaclisis or propping [étayage]*” (Laplanche, 1976, p. 87, emphasis in original). It is my contention that this movement—of one thing propping itself against, and subsequently subsuming, another thing—characterizes sexual difference.

It is not simply that “gender” is derived from a stable referent called “sex,” but that sex itself is the singular encounter of a driven psyche grappling with the empty riddle of sexuality. Elsewhere, Laplanche defines sex as “*dual... by virtue of sexual reproduction and also by virtue of human symbolization*” (Laplanche, 2011, p. 159)—yet I take this to be missing just the confusion about sexual dimorphism which not only children but Freud himself seems to evince in his shuttling between infantile sexual theories and sexual dimorphism. I take from Freud and Laplanche a model of sex that would be “against the bedrock” in its recognition that the body comes to terms with itself through questions about ultimately enigmatic quandaries. If the line between sexuality and sexual difference is not so firm, then sexuality itself might be the closest we could get to a psychoanalytic bedrock. And if sexuality is bedrock, then it is not merely sexual dimorphism but the to-and-fro of confusing and then dichotomizing sex which is bedrock. Confusing sex, we might say, is bedrock.

4 | CONCLUSION

It is radically impossible to know in advance just how a nascent psyche is driven, and toward what objects that psyche finds itself driven. While “sex” must matter to this psyche, insofar as sex is the excess which the subject attempts and fails to marshal through language, we will only ever know belatedly how sex has come to matter for a subject—and what kinds of matter have mattered. Anus, vulva, penis, clitoris, mouth, skin: the human psyche’s capacity for metonymic displacement makes sex both disseminated, perhaps indefinable, and yet inescapable.

Returning to Saketopoulou’s work with Jenny, we could take up and redeploy the concept of “mourning.” What Jenny comes to mourn might not be her “natal body” but her erstwhile belief that her answer to the riddle of the sphinx corresponds to something objective or real. It is to the credit of Saketopoulou’s work with Jenny and Jenny’s tireless free association that this mourning did not take the form of an abandonment of this particular answer to the sphinx’s riddle. Instead, Jenny’s answer (being a girl) may be no more real than any other answer, but it is also all that she has in the face of the sphinx’s chimerical demands. Jenny’s girlhood is no longer threatened by the confusion of the sexes which she identifies in the persistence of her penis, and she can now pursue surgical intervention as a choice rather than a flight from anxiety. Saketopoulou construes Jenny’s ostrich/chicken/“ostricken” dream as the child’s coming to terms with the fact that she will never be a cisgender girl. I suggest that instead “ostricken” is the outcome of an unconscious creative process of confusing the sexes. The very “magic wand” (Ferenczi, 1924, p. 12)

which appears to cleave the sexes like Moses's staff striking the rock to bring forth water is revealed to be stricken with the same affliction as Jenny's sex: sex itself is both too much and not enough, shrunken but not gone. Producing the portmanteau permits a bridge between Jenny's rigid but clearly necessary compromise formation ("I am and have always been *this* female sex") and a more infantile confusion of all sexes. This does not entail a stripping away of the compromise formation to get to something more real or true, but a mutation of that formation into something more livable. Just as castration anxiety in a cisgender man cannot be eliminated but may be made less all-consuming in its production of affect, so can Jenny's embrace of an unconscious sexual confusion allow her conscious experience of embodiment to feel freely expressed rather than the outcome of a frantic need to defend herself from others' beliefs that she is not a girl. The trans girl, like the cis girl, has the right to play with (the insufficiency of) sex.

A transgender psychoanalysis would, more than any gender-affirming therapy, grant trans speech the status of being inexhaustibly meaningful. By exploring the unconscious overdetermination of the trans analysand's (and the cis analysand's, for that matter) discourse, psychoanalysis has the potential to accompany and unblock the analysand in the creative process of inhabiting/being/having a body. Within capitalist disciplinary societies which demand gender coherence of all workers, analytic techniques of listening and interpretation can create a third space for analysands to produce a more livable relation to sex—the edge of subjectivity, which capitalism tries and fails to transform into pure productivity. Transgender psychoanalysis can fail in this task when it mistakes unconscious drive for, or subordinates it to, a conscious will, as though a drive behind the wish for body modification must demean the body-modifier. Similarly, trans psychoanalysis might require the trans person to mourn a lost body rather than see a continuity between the inventive work of analysis and the creative process of "confusing" one's sex with another. Thus, transgender psychoanalysis and gender-affirming therapies can both be practiced with more and less attention to the dignity and unconscious richness of the trans person. But there is a potential within transgender psychoanalysis to stay faithful to the original sexual confusion of Freud. This would mean, at its most basic level, a recognition that the one disavowing the reality of sex is the one who refuses to admit to confusing the sexes.

references

- Abelove, H. (1993) Freud, male homosexuality, and the americans. In *The Lesbian and Gay Studies Reader*, 381–396. Routledge.
- Abelson, M. J. (2019) *Men in Place: Trans Masculinity, Race, and Sexuality in America*. University of Minnesota Press.
- Ashley, F. (2020) Homophobia, conversion therapy, and care models for trans youth: Defending the gender-affirmative approach. *Journal of LGBT Youth*, 17, 361–383.
- Bersani, L. (1986) *The Freudian Body: Psychoanalysis and Art*. Columbia University Press.
- Browne, S. (2015) *Dark matters: On the surveillance of blackness*. Duke University Press.
- Cavanagh, S. L. (2017) Transpsychoanalytics. *Transgender Studies Quarterly*, 4, 326–357.
- Chang, S. C., Singh, A. A. and dickey, I. m. (2018) *A Clinician's Guide to Gender-Affirming Care: Working with Transgender and Gender Nonconforming Clients*. New Harbinger Publications.
- Chen, D., Hidalgo, M. A., Leibowitz, S., Leininger, J., Simons, L., Courtney, F. and Garofalo, R. (2018) Multidisciplinary care for gender-diverse youth: A narrative review and unique model of gender-affirming care. *Transgender Health*, 1, 117–123.
- Copjec, J. (1994) Sex and the euthanasia of reason. In *Supposing the Subject* (ed. J. Copjec), 16–44. Verso.
- Crenshaw, K. (1991) Mapping the margins: Intersectionality, identity politics, and violence against women of color. *Stanford Law Review*, 43, 1241–1299.

- David, M. (2021) Le retour du clitoris. *Lacan Quotidien*, **928**, 64.
- Duggan, L. (2004) *The Twilight of Equality?: Neoliberalism, Cultural Politics, and the Attack on Democracy*. Beacon Press.
- Ehrensaft, D. (2016) *The Gender Creative Child: Pathways for Nurturing and Supporting Children Who Live Outside Gender Boxes*. The Experiment.
- Ferenczi, S. (1924) *Thalassa: A Theory of Genitality*. Norton.
- Fink, B. (1999) *A Clinical Introduction to Lacanian Psychoanalysis: Theory and Technique*. Harvard University Press.
- Freud, S. (1905) Three essays on the theory of sexuality. In *The Standard Edition of the Complete Psychological Works of Sigmund Freud: Vol. VII* (ed. J. Strachey), 123–246. Hogarth Press.
- (1907) The sexual enlightenment of children (an open letter to dr. m fürst). In *The Standard Edition of the Complete Psychological Works of Sigmund Freud: Vol. IX* (ed. J. Strachey), 129–140. Hogarth Press.
- (1908) On the sexual theories of children. In *The Standard Edition: Vol. IX* (ed. J. Strachey), 205–226.
- (1924) The dissolution of the oedipus complex. In *The Standard Edition: Vol. XIX* (ed. J. Strachey), 171–180.
- (1925) Some psychical consequences of the anatomical distinction between the sexes. In *The Standard Edition: Vol. XIX* (ed. J. Strachey), 241–258. XIX.
- (1933) Femininity. In *The Standard Edition: Vol. XXII* (ed. J. Strachey), 112–135.
- (1937) Analysis terminable and interminable. In *The Standard Edition: Vol. XIII* (ed. J. Strachey), 209–254.
- Galarte, F. J. (2021) *Brown Trans Configurations: Rethinking Race, Gender, and Sexuality in Chicana/Latina Studies*. University of Texas Press.
- Gallop, J. (1982) *Feminism and psychoanalysis: The daughter's seduction*. Macmillan Press.
- Gherovici, P. (2017) *Transgender Psychoanalysis: A Lacanian Perspective on Sexual Difference*. Routledge.
- (2018) Psychoanalysis of poverty, poverty of psychoanalysis. In *Psychoanalysis in the Barrios*, 221–235.
- (2021) Whose desire? a symposium on the desire of psychoanalysis. URL: <https://youtu.be/RFwqc6Dky1E>.
- Gill-Peterson, J. (2018) *Histories of the Transgender Child*. University of Minnesota Press.
- Gilmore, R. W. (2007) *Golden gulag: Prisons, surplus, crisis, and opposition in globalizing California*. University of California Press.
- Goldner, V. (2011) Trans: Gender in free fall. *Psychoanalytic Dialogues*, **21**, 159–171.
- Gozlan, O. (2014) *Transsexuality and the Art of Transitioning: A Lacanian Approach*. Karnac Books.
- Halley, J. (2000) Like race arguments. In *What's Left of Theory?: New Work on the Politics of Literary Theory* (eds. J. Butler, J. Guillory and K. Thomas), 40–74. Routledge.
- Hansbury, G. (2011) King kong goldilocks: Imagining transmasculinities through the trans-trans dyad. *Psychoanalytic Dialogues*, **21**, 210–220.
- (2017a) The masculine vaginal: Working with queer men's embodiment at the transgender edge. *Journal of the American Psychoanalytic Association*, **65**, 1009–1031.
- (2017b) Unthinkable anxieties: Reading transphobic countertransferences in a century of psychoanalytic writing. *Transgender Studies Quarterly*, **4**, 384–404.

- Hidalgo, M. A., Ehrensaft, D., Tishelman, A. C., Clark, L. F., Garofalo, R., Rosenthal, S. M., Spack, N. P. and Olson, J. (2013) The gender affirmative model: What we know and what we aim to learn. *Human Development*, **56**, 285–290.
- Hook, D. (2008) Absolute other: Lacan's "big other" as adjunct to critical social psychological analysis? *Social Personality Psychology Compass*, **2**, 51–73.
- Jakobsen, J. R. and Pellegrini, A. (2003) *Love the Sin: Sexual Regulation and the Limits of Religious Tolerance*. New York University Press.
- Jordan-Young, R. (2010) *Brain Storm: The Flaws in the Science of Sex Differences*. Harvard University Press.
- Joseph, J. (2015) *The Trouble with Twin Studies: A Reassessment of Twin Research in the Social and Behavioral Sciences*. Routledge.
- Karkazis, K. and Jordan-Young, R. (2019) *Testosterone: An Unauthorized Biography*. Harvard University Press.
- Keo-Meier, C. and Ehrensaft, D. (eds.) (2018) *The Gender Affirmative Model: An Interdisciplinary Approach to Supporting Transgender and Gender Expansive Children*. American Psychological Association.
- Kirby, V. (1997) *Telling Flesh: The Substance of the Corporeal*. Routledge.
- Kraemer, B., Noll, T., Delsignore, A., Milos, G., Schnyder, U. and Hepp, U. (2009) Finger length ratio (2d: 4d) in adults with gender identity disorder. *Archives of Sexual Behavior*, **38**, 359–363.
- Kulish, N. (2010) Clinical implications of contemporary gender theory. *Journal of the American Psychoanalytic Association*, **58**, 231–258.
- Landridge, D. (2007) Gay affirmative therapy: A theoretical framework and defence. *Journal of Gay Lesbian Psychotherapy*, **11**, 27–43.
- Laplanche, J. (1976) *Life and Death in Psychoanalysis*. Johns Hopkins University Press.
- (2011) Gender, sex and the sexual. In *Freud and the Sexual: Essays 2000-2006* (ed. . N. R. J. Fletcher, J. House), 159–201. International Psychoanalytic Books.
- Laplanche, J. and Pontalis, J.-B. (1973) *The Language of Psycho-Analysis*. Karnac Books.
- Lavery, G. (2019) The king's two anuses: Trans feminism and free speech. *Differences: A Journal of Feminist Cultural Studies*, **30**, 118–151.
- Lemma, A. (2018) Trans-itory identities: Some psychoanalytic reflections on transgender identities. *The International Journal of Psychoanalysis*, **99**, 1089–1106.
- Lev, A. I. (2019) Approaches to the treatment of gender nonconforming children and transgender youth. In *Families in Transition: Parenting Gender Diverse Children, Adolescents, and Young Adults* (eds. A. I. Lev and A. Gottlieb). Harrington Park Press.
- Lopez, X., Marinkovic, M., Eimicke, T., Rosenthal, S. M. and Olshan, J. S. (2017) Statement on gender-affirmative approach to care from the pediatric endocrine society special interest group on transgender health. *Current Opinion in Pediatrics*, **29**, 475–480.
- Malone, K. (2012) Subjectivity and alterity. *Journal of Theoretical and Philosophical Psychology*, **32**, 50–66.
- Malone, K. R. and Friedman, E. (2015) Does psychoanalysis have anything to say to critical psychology? In *Handbook of Critical Psychology* (ed. I. Parker), 290–296. Routledge.
- Marcus, B. F. and McNamara, S. (2013) "strange and otherwise unaccountable actions": Category, conundrum, and trans identities. *Journal of the American Psychoanalytic Association*, **61**, 45–66.

- Miller, J.-A. (2021) *Docile to Trans*. Lacanian Review Online. URL: <https://www.thelacanianreviews.com/docile-to-trans/>.
- Millot, C. (1990) *Horsexe: Essay on Transsexuality*. Autonomedia: Hylton.
- Nash, J. C. (2019) *Black Feminism Reimagined: After Intersectionality*. Duke University Press.
- Nichols, M. (2021) *The Modern Clinician's Guide to Working with LGBTQ+ Clients: The Inclusive Psychotherapist*. Routledge.
- Offman, H. (2017) The queering of a cisgender psychoanalyst. *Transgender Studies Quarterly*, **4**, 405–420.
- Owens, C. (2009) Lacan and critical psychology (special issue. *Annual Review of Critical Psychology*, **7**.
- Parker, I. (1998) Constructing and deconstructing psychotherapeutic discourse. *The European Journal of Psychotherapy, Counseling Health*, **1**, 65–78.
- (2008) Psychoanalysis and social psychology: Historical connections and contemporary applications. *Journal of Community Applied Social Psychology*, **18**, 91–95.
- (2014) Psychotherapy under capitalism: The production, circulation, and management of value and subjectivity. *Psychotherapy and Politics International*, **12**, 166–175.
- (2015) *Psychology after Lacan: Connecting the Clinic and Research*. Routledge.
- (2018) *Psy-Complex in Question: Critical Review in Psychology, Psychoanalysis and Social Theory*. Zero Books.
- (2019) *Psychoanalysis, Clinic and Context: Subjectivity, History and Autobiography*. Routledge.
- Puar, J. K. (2007) *Terrorist Assemblages: Homonationalism in Queer Times*. Duke University Press.
- Pyne, J. (2014a) Gender independent kids: A paradigm shift in approaches to gender nonconforming children. *Canadian Journal of Human Sexuality*, **23**, 1–8.
- (2014b) The governance of gender non-conforming children: A dangerous enclosure. *Annual Review of Critical Psychology*, **11**, 79–96.
- Rafferty, J. (2018) Ensuring comprehensive care and support for transgender and gender-diverse children and adolescents. *Pediatrics*, **142**.
- Riggs, D. W. (2019) *Working with Transgender Young People and their Families: A Critical Developmental Approach*. Palgrave Macmillan.
- Riggs, D. W., Pearce, R., Pfeffer, C. A., Hines, S., White, F. and Ruspini, E. (2019) Transnormativity in the psy disciplines: Constructing pathology in the diagnostic and statistical manual of mental disorders and standards of care. *American Psychologist*, **74**, 912–924.
- Roughton, R. (2002) Rethinking homosexuality: What it teaches us about psychoanalysis. *Journal of the American Psychoanalytic Association*, **50**, 733–763.
- (2003) The international psychoanalytical association and homosexuality. *Journal of Gay Lesbian Psychotherapy*, **7**, 189–196.
- Safouan, M. (1980) Contribution to the psychoanalysis of transsexualism. In *Returning to Freud: Clinical Psychoanalysis in the School of Lacan* (pp ed. S. Schneiderman), 195–212. Yale University Press.
- Saketopoulou, A. (2011) Minding the gap: Intersections between gender, race, and class in work with gender variant children. *Psychoanalytic Dialogues*, **21**, 192–209.

- (2014a) Mourning the body as bedrock: Developmental considerations in treating transsexual patients analytically. *Journal of the American Psychoanalytic Association*, **62**, 773–806.
- (2014b) When the body propositions gender: Reply to commentaries. *Journal of the American Psychoanalytic Association*, **62**, 823–833.
- Salamon, G. (2010) *Assuming a body: Transgender and rhetorics of materiality*. Columbia University Press.
- (2018) *The Life and Death of Latisha King: A Critical Phenomenology of Transphobia*. New York University Press.
- Sedgwick, E. K. (1990) *Epistemology of the Closet*. University of California Press.
- Snorton, C. R. (2017) *Black on Both Sides: A Racial History of Trans Identity*. University of Minnesota Press.
- Somerville, S. B. (2000) *Queering the Color Line: Race and the Invention of Homosexuality in American Culture*. Duke University Press.
- Spade, D. (2015) *Normal Life: Administrative Violence, Critical Trans Politics, and the Limits of the Law*. Duke University Press.
- Spivak, G. C. (1993) Feminism and deconstruction, again: Negotiations. In *Outside in the Teaching Machine*, 134–157. Routledge.
- Stone, S. (1992) The “empire” strikes back: A posttranssexual manifesto. *Camera Obscura*, **10**, 150–176.
- Suchet, M. (2011) Crossing over. *Psychoanalytic Dialogues*, **21**, 179–191.
- Vaid, U. (1995) *Virtual Equality: The Mainstreaming of Gay and Lesbian Liberation*. Vintage Books.
- Wiggins, T. (2020) The pervert on your couch: Psychoanalysis and trans/sexual health. In *Sex, Sexuality and Trans Identities: Clinical Guidance for Psychotherapists and Counselors* (eds. J. C. Niemera, G. J. Jacobson and K. Violeta), 155–181. Jessica Kingsley Publishers.
- Wilson, E. A. (2015) *Gut Feminism*. Duke University Press.
- Winograd, W. (2014) The wish to be a boy: Gender dysphoria and identity confusion in a self-identified transgender adolescent. *Psychoanalytic Social Work*, **21**, 55–74.
- Žižek, S. (2021) Why i oppose historicism and remain a philosopher. a symposium on the desire of psychoanalysis. URL: <https://youtu.be/RFwqc6Dky1E>.