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**Normality, Mental Health and Medicalization in
Jeffrey Eugenides' *Middlesex*.**

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Abstract:

The aim of this dissertation is to analyse the vicious circle created between normalization, medicalization and mental health as exemplified in Jeffrey Eugenides' *Middlesex*. Following the introduction of several topics associated with the novel, the analysis will include a brief contextualization of the history that surrounds the narrative and how that is important for the stories of the characters. Along with this, a short section dealing with the theoretical background of mental health and medicalization during the 20th Century will be presented. The main body of this paper will focus on the medicalization Eugenides' protagonist Cal experience due to his abject state and the effects this exerts on his mental health. Finally, it will be concluded that *Middlesex* in this way provides a neat demonstration of the disastrous effects of the words normal on those who it doesn't encompass.

Key Words: *Middlesex*, medicalization, abject, mental health, normal.

Resum:

L'objectiu d'aquest treball és analitzar el cercle viciós existent entre la normalització, medicalització i la salut mental exemplificat en l'obra de Jeffrey Eugenides, *Middlesex*. A partir de la introducció dels temes tractats en aquesta novel·la, l'anàlisi inclourà una breu contextualització de la història que envolta la narració i la importància que això té en els personatges que la constitueixen. Conjuntament, s'inclou una breu descripció del context mèdic, en relació amb les practiques sobre salut mental, en el segle XX. El cos principal del treball es centrarà en la medicalització a la qual Cal, protagonista de la novel·la, està sotmès a causa de la seva condició de "abject" i els conseqüents efectes sobre la seva salut mental. Finalment, es conclou que *Middlesex* demostra els desastrosos efectes de la paraula "normal" en aquells que no cauen sota la seva definició.

Paraules Clau: *Middlesex*, medicalització, abject, salut mental, normal.

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1 Introduction

“This year, then, instead of considering the mechanics of the disciplinary apparatus, I will be looking at their effects of normalization, at what they are directed toward, the effects they can achieve and that can be grouped under the rubric of ‘normalization.’” -(Marchetti et al, 2017, p. 49)

According to the Cambridge dictionary, “normality” means “the state of being normal” and “normal” is defined as “usual and ordinary”. Thus, there seems to be no reason for “normal” and “abnormal” to be used socially to create any distinction beyond that of commonality. In the statistical branch of mathematics, the word normal is used simply to describe a distribution in which the mean average of a population lies at the top of a bell-shaped curve describing the most common form of any characteristic of that population. The tails of the curve on either side of the peak reduce symmetrically to describe decreases in the occurrence towards either extent of that characteristic showing the extremes to be less common. For example, the peak of the normal distribution will show the most common height of a population, with the tails representing the decreasing numbers of people possessing taller and shorter heights. It therefore denotes nothing other than how frequently any form of a characteristic has been adopted or is expressed by members within a population. However, through the use of the word normal over time, it has come to be associated with a much more judgemental meaning, used more as a label than simply a description. Through this use of the word, the normal or usual behaviour is perceived to be the normative, which means that that community has created a rule - usually likened to behaviour or appearance- that must be followed in order to be recognised as a “normal” member of that society. The creation of patterns of behaviour that must be adopted by individuals who wish to be regarded as normal regardless of their true affinity towards those behaviours can be explained by John Stuart Mill’s idea of the “tyranny of the majority”. Struan Jacobs who works with Mill’s concept claims that “the social ascendancy of one type of 'human nature,'” (Jacobs, 1993, p. 309) is what lies at the centre of this concept. This idea is that the influences that lead to any one type of behaviour dominating over the, often many, possible others are “exercised more over minds than bodies” as “tyranny asserts itself in the almost irresistible spread of the

standards, tastes, and opinions of the middle class.” (Jacobs, 1993, p. 310). Jacobs goes on to point out the fact that Stuart Mill recognized that the imposition, of this behavioural rule was not only exercised by political powers -law making- but also via the influences of “social power by which citizens enforce opinions and conduct through the application of non-legal, as distinct from illegal, pressures of criticism, stigmatisation, and taboo.” (1993, p. 307). It is perhaps then unsurprising that this word may have profoundly negative effects on those who fall outside society’s definition of it which paints such people not only as unusual but also as non-normative in such a way as to appear to denounce their behaviours. In other words, the abjection of the “abnormal” individual comes from the rules of behaviour imposed by the majority, who impose the dominance of their usual onto others by means of both legal actions, such as passing discrimination laws and non-legal actions, such as emotional bullying. In this way, the word “normal” has frequently exerted its effects on my own life and, as such, has served as inspiration in deciding the focus of this dissertation as the idea and connotation of this word sits at the core of this paper’s main topics; Mental Health, Medicalization and abject identities in the context of Jeffrey Eugenides’ world of *Middlesex*.

Throughout his novel, Eugenides’ protagonist, Cal¹, is deeply affected by the aforementioned connotations and stigmatizations that exist in relation to the word “normal” as he struggles with his gender and sexuality from a young age and worries that his physical condition, that being intersexual, and feelings of attraction towards other girls at a young age will leave him ostracised and unable to fit in as a “normal” girl/man. His body then, could be seen to be an example of one carrying within it, Judith Butler’s discursive process of “abjection”. The Oxford English dictionary describes abjection as a state of being “cast off or rejected” as an “outcast” or “exile” which is exactly the fate Cal fears he will meet as those around him become aware of his differences. According to Butler in her extensive collection of philosophical works, “when addressing human bodies, goes beyond a simple tick box and it relates to all kinds of bodies whose lives are not considered to be ‘lives’ and whose materiality is understood not to ‘matter’” (Meijer, 2019, p. 281). So, the term becomes considerably more complicated as Butler makes it clear that her notion of the “abject body” in *Bodies that matter* (1993) is deliberately

¹ When referring to Cal(liope) Stephanides, I will be using throughout the paper male pronouns as it is Cal’s conscious decision to live his adult life as a male. The quotes from the book will not be modified and thus, will refer to pre-second birth Cal, as female.

ambiguous and “in no way restricted to sex and heteronormativity” and cannot be exhausted by examples of such bodies (1993, p.281). Whilst several examples of “abject bodies/ identities” may be observed in Jeffrey Eugenides’ novel, and these will be discussed over the course of this text, these are of course by no means the only examples of bodies/identities that would fit within the bounds of Judith Butler’s term. Similarly, for the sake of the analysis that will follow, relating to the different ways in which the members of Eugenides’ fictional household in *Middlesex* represent different forms of abjection that can be found in society, perhaps facilitated by Stuart Mill’s tyranny of the majority, it will be necessary to comprehend such abjection in a less ambiguous manner. Therefore, in this essay abject bodies will be understood to be those whose identities are regarded as insignificant due to their position outside of the standards established by the majority. Nevertheless, even though it would be impossible to write this text without doing so, imposing a way to understand abjection seems to reinforce the creation of the dichotomy between those who are normative and thus, matter, and those who are not and therefore, don’t. The imposition of these taxonomies such as abject/ non-abject or normal/ abnormal, is born out of the simplicity of language, which is, in itself, reductionist. Using language to reduce complex individuality into words and categories that often encompass many dimensions of that individuality in a relatively unidimensional way, is necessary to make sense of our world and express features of our environment in conversation. In other words, Judith Butler’s ambiguity regarding the concept of abjection is essential to avoid the entrapment of language asserting yet more categories in a discussion aimed at suggesting this is precisely what leads to the very thing it is discussing – abjection – yet it becomes very difficult to discuss without ascribing such terms.

These categorisations, introduced subtly through language by any society, result in stark differences between either extent of any behaviour that is categorised by the population and highlight the extremes of that behaviour, allowing links to Stuart Mill’s idea that one form of any human behaviour becomes the norm to follow as one “normal” behaviour becomes realised as the most popular, and thus, the imposed. Along with Mill’s idea of the imposition of the one accepted nature of humanity by means of both political and social power, follows the way in which this has been translated to each individual experience. People whose body or behaviour belongs to the unusual minority outside of the established normative, have often been treated with complete disregard throughout history. The abjects whose lives are perceived not to matter have been either murdered,

prosecuted or institutionalized according to the “treatment”, often as either law breakers, physically ill or clinically insane, applied to them in each century and particular case. In the situations in which the “abnormal” was deemed as “treatable” in order to achieve normality, a correction of the individual’s nature, either by means of “normalizing surgeries” or mental “conversion” has commonly been imposed, in most cases backed up by the political power -laws- without recognition of the individual’s right regarding their own body. The social and political insistence to differentiate and treat the normative and the non-normative in different manners has resulted in the internalization of this discourse by both the majority and the minority alike. To be conscious of one’s “abnormality” in society’s eyes might produce a mirror effect, by which one adopts that cruel gaze upon oneself, abandoning all perception of self-love and respect, which deteriorates mental health and might drive one to believe that, indeed, one’s place in the world is not habitable.

These beliefs, from both the majority about individuals composing a minority and that the minority have about themselves, and the resulting actions be they legal or illegal, imposed or self-inflicted, from a philosophical viewpoint, may have far-reaching effects over the life processes of man as an individual body and over man as a species. Therefore, there is a strong link to be made here to Foucault’s social theory of biopolitics. Biopolitics is a theoretical concept, developed and studied since Foucault, which aims to understand the intricacies of the mechanisms and technologies used by a body of power to exert control over human biological and life processes via the means of subjectivation. One of Foucault’s concerns when referring to this form of power is the way in which it has evolved since the 17th Century and its relation to the sovereignty of power. Lemke claims that Foucault understands the difference between the sovereignty of power and biopolitics in the particular way in which they treat life; biopower being that which “fosters life or disallows it to the point of death, whereas the sovereign power takes life or lets live” (Lemke, 2011, p.35). Following this, Lemke states that the sovereign power of deciding upon life and death, operates “on the basis of the binary legal code, whereas biopolitics marks a movement in which the ‘right’ is increasingly displaced by the ‘norm.’”. Which means that power is no longer sustained by one individual ruling the rights and wrongs from the perspective of their personal natural law, but rather, power has been placed on the “normalizing society” (2011, p. 39). This transfer of power from a sovereignty to biopower is particularly interesting when relating this to sexuality;

“Foucault is interested in sexuality because of its position ‘at the pivot of the two axes’ between both forms of power (1980, 145). Sexuality represents a bodily behaviour that gives rise to normative expectations and is open to measures of surveillance and discipline. At the same time, it is also important for reproductive purposes and as such part of the biological processes of a population (cf. Foucault 2003, 251–252)” (Lemke, 2011, p. 28)

This connection becomes essential in the analysis of Eugenides’ novel, as in this context, the concept of the norm regarding sexuality and the control exerted by the labelling of this norm by this particular 20th Century society, affects not only Cal, but every character. Each provides an example of an abject identity and each pays the price for that abjection in the form of being exiled from a life within the norm and the habitability that comes along with that. Sourmelina Zizmo, née Papadiamandopoulos, “was one of those women they named the island after” (p.86). Born in a small Greek village, she is cast out by her father who, upon the discovery of her “abnormal” sexuality, which deemed her a “defective bride”, struck a deal regarding his daughter’s life, negotiating “the amount of the dowry in the formal language of a barrister” (p.86) in order to send Lina away. This reduction of her persona to a tradable good, represents the price she had to pay in order to live a more “habitable” life at the outskirts of society. Desdemona and Lefty Stephanides, the grandparents of the novel’s protagonist, and siblings to each other. Already potentially perceived as abject due to their immigrant status, they also paid for their incestual love through the paranoia accompanying their realisation of themselves as unusual, abject bodies. Lefty, who always talked his way into and out of things and loved his sister like a wife, lost her due to her belief, that they would be punished for their sins in the same way that Minos was punished by Poseidon. He then died speechless as a result of a stroke, having returned to infancy during the last days of his life as his illness causes him to regress. Desdemona met a similarly lonely end, never able to fully love her brother as a husband, terrified at the idea of giving birth to a monster, she finally wasted away in a room, consumed by grief and guilt. Their uninhabitable space in life, seems to be passed down to their offspring just as their genes themselves are. Tessie and Milton Stephanides, both lovers and cousins, lost their parents and -temporarily- their children, due to their internal conflict between wanting to conform to the “normal” or follow their desires. This conflict led Milton to his death as a father unable to confront the reality of his “daughter’s” non-normative body and a prideful man

who drove his car into water crying because he had not been able to save his “daughter”. As for Cal, his abjection and the price he had to pay for it will be the bedrock of this paper, as the grandchild of a daughter who lived her life terrified of the consequences of breaking the established norm, was the one with the highest price to pay for his “abnormality”.

Here, Cal(liope) Helen Stephanides’ journey is the one that will be followed to showcase how Eugenides’ *Middlesex* encompasses all of the aforementioned themes relating to abject bodies and queer identities and how such nonconforming people have been marginalised and medicalised throughout the 20th Century. Through the four sections that compose this paper then, the aim will be to analyse the role played by the social construct of the “normal” and its effects on the body and identity of Cal. Firstly, the study will offer a brief contextualization of the historical period in which the Stephanides family are living in order to explain the normal expectations placed on individuals within society specifically at that time. This will be followed by a theoretical background of mental health and medicalisation also particularly within the 20th Century. This will lead to the core of the paper in which mental health and medicalisation will be linked to gender and sexuality over two subsections; the first describing Cal as an intersex body and the eagerness to normalize such body through medical practises, and the second suggesting how his state of abjection prompts profound effects on his mental health.

1.1 Contextualizing the novel

Middlesex could be considered a contemporary novel owing to it being built around a fictional character narrating the events that brought him to exist, as well as the process each character, including himself, underwent whilst growing up, confronting personal and social problems. However, due to the novel’s use of real historical events and real historical figures, its genre could also be argued to include that of historical fiction. This creates the need to contextualize the given period of time in which the three generations explored in the plot are developed. It is also vital to take into account within this section, the migratory element central in the story of the first generation, which later affects the second and third as they gradually become less unfamiliar with American culture as they

are more immersed within it. As Samuel Cohen states in his essay on *Middlesex*; “the novel displays a particular historical imagination, as all historical novels do, it depends on a set of notions about the relationship between past, present, and future, about cause and effect, and about the possibilities and problems that attempts to understand and represent the past entail.” (Cohen, 2019, p.371). Therefore, in order to understand what drives the actions of the family and their interactions with one another, it becomes essential to understand their roots and their experience as, amongst other dimensions to their identity, Greeks, Americans, immigrants, citizens, poor, wealthy, male, female or neither one nor the other.

The novel, set mainly in two different timelines – present and past from the point of view of the narrator- starts off with the first person narrator establishing himself as the axis around which these two timelines revolve as an immediate declaration apprises the reader that the voice I -Cal(liope) Stephanides- “was born twice: first as a baby girl, on a remarkably smogless Detroit day in January 1960; and then again, as a teenage boy, in an emergency room near Petroskey, Michigan, in August of 1974.” (p.3). Ensuing this initial remark, that not only situates the reader in the midst of the 20th Century but also swiftly introduces the topic of a non-normative gender identity as Cal reveals to the reader the existence of a published medical work in which he is featured. Thus, he promptly reinforces his existence as an “abnormal”, medicalized body through his suggestion that “Specialized readers may have come across me in Dr. Peter Luce’s study, ‘Gender Identity in 5-Alpha-Reductase Pseudohermaphrodites,’ published in the Journal of Pediatric Endocrinology in 1975”. Therefore, in just these opening lines, Cal asserts his identity as an abject one as he immediately introduces as a subject in the medical literature of the 20th Century above any other dimensions of his identity. However, as important as Cal’s births are, these mark only two landmark dates in the long Stephanides’s journey during which each character- not only Cal- flirts with the borders between abjection and acceptance. For a more complete understanding of the entire century in which the novel is set then, we need to take into account Desdemona and Eleutherios “Lefty” Stephanides. These older members of this unusual clan begin their journey in Bursa, a small Greek village situated in Asia Minor, right before the start of the Greco-Turkish War of 1919–1922. This military conflict forces brother and sister to abandon their tranquil life as siblings to become war refugees, fleeing the Great fire of Smyrna (1922) towards the

United States of America, allowing to express their love for one another and marry enroute. Fresh out of Ellis Island, the newlywed siblings settle down in industrial Detroit with their cousin Sourmelina "Lina" Zizmo, a closeted lesbian married to Jimmy Zizmo, described in the novel as an "amateur herbalist; antisuffragist; big-game hunter; ex-con; drug pusher; teetotal" (p.88) all of which contribute to his eccentric personality that make him an ideal solution for such a "despondent" bride as Lina. Throughout the novel, Zizmo takes on the shape of many different characters, as he keeps faking his own death. The first of these characters that the reader and the first generation Stephanides are presented with is "An Arab" (p. 89) as Desdemona realises in disbelief at the idea of sharing a roof with someone who has "Turkish blood" (p. 89). Adult Cal, narrating the story, never completely informs the reader about Jimmy's history, and as such, the reasons behind his unsettled lifestyle are unknown. In a way this may be seen to represent a character who is in some way abject as he feels the need to run away from society, but the exact nature of his abject identity is well-hidden, even from Cal and the reader.

Moving forward, the Stephanides, who, before moving to the States, enjoyed the socioeconomic status of being two single siblings, living alone in their late parent's house, in a small village where everyone knew each other and making a living out of silk, suddenly found themselves in the position of Greek war refugees/immigrants in the States, struggling to learn a foreign language whilst adapting to an unfamiliar culture. The young couple received yet another blow when the golden twenties abruptly came to an end as the Great Depression took hold (1929-1939). This time with the second generation already present, Lefty Stephanides, pressured by the social idea that men should be the provider of the family takes on different economic activities, ranging from industrial worker and to alcohol smuggler to opening his own bar in the middle of the Prohibition time. Thus, up until this point, not even halfway through the novel, the reader has already encountered several historical moments and geographical differences worth keeping in mind in order to understand the century and the state of mind in which the protagonists move in and out of different social positions of normativity and abjection. In terms of the second generation – first cousins; Theodora "Tessie" Stephanides (née Zizmo) the daughter of Lina and Jimmy and Miltiades "Milton" Stephanides, the son of Desdemona and Lefty, their story takes place over the course of years encompassing the Second World War (1939-1945) and the Korean war (1950-1953). At the end of the second of these wars, Tessie and Milton, become parents of the third Stephanides Generation; Calliope

Helen Stephanides and older brother Chapter Eleven. With the arrival of the 1960's the Detroit riots (1967) hand in hand with the Cold War (1947-1991) Milton's pre-existing "identification with Nixon only grew stronger as the President's troubles mounted. In the long-haired war protesters Milton saw his own shaggy, condemnatory son" (p. 362). While Milton moves to one extent of the American political view of the mid-late 20th Century, Chapter Eleven moves in the opposite direction, and Tessie becomes isolated, occupying the only space left for her, that of a caregiver, abandoned lover and worried mother.

It could be argued that at the time the plot of *Middlesex* starts, with Desdemona and Lefty at the beginning of the 1920's, marks the end of what has come to be described as "the long 19th Century". This is a period in time in which the western world saw a huge increase in the speed in which both mindframes and technologies were undergoing changes, and consequently communities, and the individuals within them, were required to adapt at a faster rate. Along with all of these changes, the 20th Century seemed to bring with it a series of traumatic events which may be seen to have affected the way in which the characters in Eugenides' story developed themselves over the course of the narrative. Again returning to the work of Samuel Cohen, he refers to the word *trauma*, stating that this is a concept Freud borrowed from the Greek word, "wound", to "name the phenomenon of a shocking event that proves unassimilable to consciousness" which "gets repressed or lost in memory, and presents itself symptomatically in various disruptive ways unless brought to the surface and confronted" (Cohen, 2019, pp. 374-376). Cohen continues by clarifying that the concept of trauma does not only apply to a violent event occurring at a personal, individual level, but that it is also a "useful tool for thinking about the collective experience of historical catastrophes, events that occur on a mass scale or receive wide public attention (and so have widespread effects, both immediate and dispersed in space and time)" (2019, p. 376). By this multifaceted definition of the word *trauma*, each of the characters in Eugenides' novel may be viewed as having undergone some form of trauma or another relating to their abject identities and the challenges they face as a result of such an identity. These traumas, experienced by the characters may be seen to be precipitated by the fast-developing world of the 20th Century in which they live. This world is one in which the advancement of communication technologies such as the radio and the television made it possible for people to be aware of events taking place further away than just a few kilometres, and thus, the inscription of traumatic events into

society became facilitated. Thus, an understanding of the historical baggage the Stephanides carry upon their shoulders becomes essential to understand the battle the family members fight between destiny and free will.

1.2 Theoretical background on Mental Health and Medicalization

Due to Cal's gender identity, which is central to both the novel and this essay, a brief summary of the understanding of mental health and medicine, regarding gender related topics in the 1960's onwards becomes necessary to further contextualize the characters' experiences and understanding of "normality". The World Health Organization (WHO) published for the first time in 1949 a collection of classified diseases known as the ICD (International Classification of Diseases) and in 1952 the American Psychiatric Association (APA) published the first Diagnostic and statistical manual of mental disorders (DSM). The official publication of these medical manuals which implied that bodies or identities outside of the majority, were "abnormal" and should be medically treatable. The social impact such implications made in these publications, that reinforced the foundations for society regarding certain identities as being a mental disorder, and therefore, "wrong" and to be corrected, can be exemplified by their suggested treatments for homosexuality. The 1968 DSM edition classified this sexual orientation as disease of the mind, an idea that wasn't challenged until 1973, when an APA convention compromised and modified the definition of homosexuality as a "sexual orientation disturbance" for people "in conflict with" their sexuality. However, it wasn't until the 1992 version of WHO's ICD that homosexuality was completely eliminated as mental disorder. Owing to this, Neel Burton argues that "the evolution of the status of homosexuality in the classifications of mental disorders highlights that concepts of mental disorders can be rapidly evolving social constructs that change as society changes" (2015). Nonetheless, homosexuality has not been the only behaviour categorized as an "illness of the mind". The ICD's latest edition (2016) lists, in block; "Mental and behavioural disorders (F00-F99)", under the section, Gender identity disorders F64, the following terms; 'Transsexualism', 'Dual-role transvestism', 'Gender identity disorder of childhood', as well as two more unspecified subclasses of related gender disorders. All of the aforementioned terms share in their description the fact that the individual suffering

from this disorder is of a given biological sex whilst preferring to “behave” as “of the opposite sex”, which as Neel Burton highlights, shows how deeply rooted the social construct of gender and the “normal behaviour that should come with it” are still present in today’s society. Therefore, the understanding of the close relationship between what is regarded as medical issue -whether mental or physical- and the way in which the majority perceives them, affect one another. In this way, they may to some extent, be seen to engage in a symbiotic relationship, whereby, as mentioned in the introduction of this paper, the political and the social powers feed off one another in order for the majority to dominate over the minority. In other words, the social constructs and judgements surrounding gender and sexuality and the way in which the existence of individuals who behave in ways beyond the realms of the norm is perceived and understood by the individual themselves and through the eyes of others, can either empower or diminish the individual’s apprehension of their worth and self and impact upon the ways in which they interact with the world and form relationships within it.

As a consequence of the medicalization of certain identities or bodies which society considers to be of an “abnormal/non-natural behaviour or appearance” and thus, have to be corrected, individuals who fall within this category are forced to pay a price simply for inhabiting a place in society. This becomes a burden on their mental health, situating LGBT+ people as one of the “high risk groups” in terms of suicidal tendencies and homelessness. This particularly applies to the younger members of the LGBT+ community (Haas et al., 2011). The same paper states that “in the population as a whole, mental disorders constitute the single largest risk factor for suicidal behaviour, and studies have also reported a generally strong association between mental disorders and suicide attempts in LGB adolescents and adults” which links to the fact that “they found that elevated rates of reported suicide attempts in youth who identified as LGB were associated with significantly higher rates of depression, generalized anxiety disorder and conduct disorder than were observed among heterosexual youth. LGB youth were also six times more likely to have multiple disorders.” (Haas et al., 2011, p. 20).

In other words, the categorization of someone’s understanding of their identity as a medical issue, most generally into “normal” or “abnormal” behaviours, justified by regarding people displaying certain behaviours as patients in need of treatment, could be argued to drive these individuals towards a feeling of abjection. This feeling of being an unlovable, defective outcast could lead to the formulation of the internalised belief that

their lives don't matter and that there's no habitable place for them in society, and thus, lead to various, individual spirals of deteriorating mental health, creating the perfect environment for actual medical conditions such as depression or anxiety to manifest themselves. In this way, it is a vicious circle internalising the social and political discourse that one's life "doesn't matter".

2 Mental Health and medicalization linked to gender and sexuality

2.1 "Just a little cosmetic procedure. Like getting a mole removed"

In chapter 5 of *Rereading Heterosexuality*, Rachel Carroll points out that Cal's opening of the novel, with its "arresting, proleptic prelude to the action of the narrative, correctly raises an anticipation that Cal's identity will be medically mediated" (Carroll, 2012, p.114) leading the reader to briefly wonder about the "sickly" nature of Cal's childhood. However, in due course, one comes to learn that, at his first birth, Cal(liope) Stephanides was declared "A beautiful, healthy girl." (p.216). Cal's rush into society's binary perception of sex and gender was caused by Dr. Nishan Philobosian. At age seventy-four he was too busy sharing a moment of flirtatious tension with his assistant to unfold the "inflated, swollen with hormones, saltwater mussel of the female genitalia" (p.216), and properly inspect the baby before him. Due to this moment, Cal states that at 5 minutes old it was already possible to recognise the presence of two themes that would become the core of his existence; chance and sex. It was inadvertent then, that Cal's physiology at birth didn't raise any alarms, which would have been the case if a thorough examination of his body had been conducted. In this vein, Rachel Carroll states that in the case of delivering an intersex baby, such as Cal, due to "the appearances of ambiguities in, or discrepancies between, genetic, hormonal and anatomical definitions of sex", doctors who suddenly find themselves outside the established zone of the comfort created by normativity, "warrant rapid and radical surgical intervention, even though the intersexed condition does not necessarily in and of itself pose a threat to the baby's immediate or even future health" (Carroll, 2012, p. 432). This reaction -of confusion and discomfort- also relates to the paperwork completed at birth as in most countries is required by the government administrative systems in hospitals, which demand that the

newborn be assigned to a sex -male or female- that can be reduced to a simple tick-box, and thus being officially reported as such (Australia, 2013).

In order to further understand why an intersex body is deemed as “an emergency” that it requires medical treatment as soon as possible to avoid undesirable human characteristics/ behaviours, yet still nothing more serious than a “little cosmetic procedure. Like getting a mole removed” (p.432), Foucault’s biopolitics, and its relationship with sexuality must be considered. As mentioned in the introductory section of this paper, Foucault stated that “sexuality represents a bodily behavior that gives rise to normative expectations and is open to measures of surveillance and discipline. At the same time, it is also important for reproductive purposes and as such part of the biological processes of a population” (Lemke, 2011, p. 28). Sexuality is a broad term that has varied throughout history, as medical and social disciplines have explored the concept in order to understand, to which extent it affects different aspects of human life. It could be said that sexuality englobes the biological, emotional, physical and social way in which people understand and express themselves. Traditionally, patterns of normative behaviour were established by the measures of surveillance and discipline mentioned by Foucault, that is, for example, the idea that a body born biologically female, was expected to be female in gender, express themselves as such and feel emotional and physical attraction towards the opposite sex. As sexual attraction to the opposite sex enables reproduction -a biological process- this links to the idea that Foucault’s authorities, termed “biopowers”, have control over the population. This could be argued to be the reason that the norm is that behaviour which enables this biological process as it becomes a technology by which these structures of biopower can exert control.

Bearing this in mind, the medicalization of a body whose biology defies the established patterns becomes dangerous for these structures of biopower. It is a body that from birth resists undergoing a process of normativization and consequently, is deemed as being in extreme need of a correction in order to establish it within a normative sex and thus, to remove the ‘danger’ of it being ‘uncontrollable’. This brings up the question of whether “normality” in sex is “normal” or just a social construct that has become normative. As Judith Butler (1993) proposes, “the category of ‘sex’ is, from the start, normative”. This makes reference to the fact that sex, socially trapped in its binarism, is only necessary to be imposed on a human body due to the associations linked to it, that is to say, the “regulatory practices” and the “biological processes”. One of the ways in which

Butler exemplifies this notion is via the need of reiteration. She remarks that this necessity, is a “sign that materialization is never quite complete, that bodies never quite comply with the norms by which their materialization is impelled.” (Butler, 1993, p. 2)

An intersex body is neither this nor that, one gender, nor the other, and therefore, never materializes as a normative body and automatically becomes abject. That is to say, that the body of an intersex individual is relegated, from birth, to the “‘unliveable’ and ‘uninhabitable’ zones of social life” (1993, p.3). Considered an abnormal body, it defies the structures of power established by the binary constructs of sex and gender. These constructs become a blurred uncategorizable grey, creating a breach that allows an exploration of the self-outside of social boundaries. In this way, the chromosomes of a new born child become in society a guide that the parents -as well as everyone else- will use to raise that child as a “boy” or a “girl”, educate them on basis of their sex and consequently, impose the social constructs of the “natural” behaviour of each “sex”.

As for the connection of this idea to *Middlesex*, as already elucidated at the beginning of the section, Eugenides’ protagonist, Cal, narrates his experience as intersex, and thus, as someone who has had to deal with the implications of social and medical perceptions of normality;

But I was beginning to understand something about normality. Normality wasn’t normal. It couldn’t be. If normality were normal, everybody could leave it alone. They could sit back and let normality manifest itself. But people —and especially doctors—had doubts about normality. They weren’t sure normality was up to the job. And so they felt inclined to give it a boost. (p. 446)

The quotation above is narrated by Cal whilst running away after reading Dr. Luce’s medical notes and having found in the dictionary that the words he overheard at the clinic to refer to himself which, synonym by synonym, led to “monster”. However, before reaching the moment of understanding that he was in no way a monster, fourteen years of feeling different to the rest had gone by, with the culmination of it being an accident that brought him to a hospital and later to Dr. Luce’s Clinic. Through Cal’s relationship with Dr. Luce, as well as in the way Tessie and Milton deal with the discovery, the exemplification of how intersex bodies are treated and understood become apparent in the novel. Doctor Peter Luce, head of the Sexual Disorders and Gender

Identity Clinic at New York Hospital, was thrilled at the idea of “treating” Cal. Even before the young teenager had stepped into his office, Dr. Luce had already erased in his mind, any perception of Cal as a “normal” human being. As Cal himself puts it; “He [Dr. Luce] was trying to act casual, but I could see he was excited. I was an extraordinary case, after all. He was taking his time, savoring me. To a scientist like Luce I was nothing less than a sexual or genetic Kaspar Hauser” (p.408), nothing, but a “living experiment dressed in white corduroys and a Fair Isle sweater” (p.408). Cal’s impression of Dr. Luce, could be argued to suggest that Cal was already starting to assimilate his identity as an object of medical interest due to its “abnormality” as he recognises Dr. Luce’s eagerness to discover his “real nature” and thus, prescribe the surgical eradication of his queer body.

Prior to Dr. Luce’s delivery of Cal’s diagnosis to Tessie and Milton, he forces the young protagonist to undergo a long and excruciating “barrage of tests” (p.20), which mostly included the study of traits socially attributed to the behaviour and manners expected of each gender. In Cal’s own words: “Luce even analysed my prose style to see if I wrote in a linear, masculine way, or in a circular, feminine one” (p. 20). This highlights Dr. Luce’s means of deciding upon Cal’s gender identity as mostly based on scientifically unfounded, social ideas. While being questioned as part of diagnostic testing, Cal, who had identified as a girl up until that point, is aware of the behaviours associated with “normal or “abnormal” for his sex and gender, is determined “to convince Luce of the normality of her gendered identity by concealing the truth of her emotional life as a teenage girl; principally, she conceals her attraction to other girls and her sexual experiences with her female best friend” (Carroll, 2012, p. 117). As previously mentioned in section 1.2, homosexuality was, at the time of Cal’s stay at the clinic, still considered an illness of the mind and therefore, the insistence by which “Calliope” denies having feelings for and sexual relationships with other females, becomes an indicator of a desperate shot at avoiding complete abjection. Adult Cal recalls his lies as an act of necessity by which he could “produce an identity contingent on the needs of a specific moment” (Carroll, 2012, p. 117).

Half the time I wrote like bad George Eliot, the other half like bad Salinger . . .
But on that Smith Corona I quickly discovered that telling the truth wasn’t nearly as much fun as making things up. I also knew that I was writing for an audience – Dr. Luce – and that if I seemed normal enough, he might send me back home.
(p.418)

In other words, Cal was aware that his physical condition` was leading him to be perceived as an ill patient even though this was not how he felt, especially as he didn't want the treatment planned for him as he disagreed with the accepted views that his doctors and society held in relation to his condition. These views were that whilst "the surgery may result in partial or total loss of erotosexual sensation", these consequences would pose insignificant effects on happiness compared to a lack of "ability to marry and pass as a normal woman in society" (p.437) which was considered to be impossible without the surgery. This medical view of Cal's body and his attempts to avoid it, stress that the reason behind the treatment of a queer body, such as that of an intersex individual, lies in the notion of sex and gender as fixed, discrete phenomena. These notions are not only binarily defined, but also rely on social constructs to establish the basis for being sorted into either binary category, removing a lot of the control from the individual. In this way, Cal's presence in the novel's fictional world, represents that of many real bodies, whose undeniable existence, both as bodies and identities, come to challenge the notion of "natural" and "normal". The irruption people such as Cal impress upon the established norm, with their ability to open a door to the exploration of a new understanding of human nature due to their not being enclosed within one, produces the medical emergency noted by Carroll. In the novel, as well as in the real world, Cal is marked as in need of undergoing a "feminizing surgery" (p.437), in order to be placed in one fixed category, and become, as Dr. Luce states in *Middlesex*; "a normal girl".

2.2 "A word on my shame"

An adult Cal writing from Berlin, where he works in the Foreign Service Office, sees his "struggle for unification" represented in this "once-divided city" (p.106). Even though many years had gone by since he had filled the position of Dr. Luce's own "Kaspar Hauser" (p.408), adult Cal is still trying to "nurse [his] own wounds" as well as trying his best "to get over" his shame (p.106). This shame, over his intersex body, pushes him to conceal his identity from those around him, allowing only a select few to be aware of his full, unedited identity. Cal himself states that the process of opening himself to others can be rather inconsistent, ranging from telling complete strangers soon after meeting them at night, to remaining silent forever- especially in the case of women he is attracted to. This inconsistency could be argued to stem from an inescapable, strongly ingrained fear

of rejection due to his unusual and ‘monstrous’ state of being. As stated whilst discussing the means by which the norm is forced, one of the mechanisms that sustains the dichotomy between the “normal” and the “abnormal” is the stigmatization, expectations and prejudice amongst other social pressures that establish a “normal” in relation to any behaviour and coerce individuals to fit into that construct of the norm in relation to the majority. With this in mind, Cal’s reticence to share this part of his being with the people that constitute his closer network of human contact, becomes consistent in a society where the love and respect people feel for each other can be easily replaced by prejudice on learning about one’s deviation from “normal”. However, Cal’s shame began long before his adult days in Berlin and even before his days in New York’s Sexual Disorders and Gender Identity Clinic. Cal’s shame over his identity, could be argued to have begun the day he decided not to tell his mother about his kiss with a neighbouring girl, Clementine Stark, whilst he was perceived to be, in appearance and behaviour, as a female too.

In a medieval looking house, a pale seven-year-old girl asked another if she wanted to practice kissing. Cal recalls this scene as Clementine’s “medicine-sweet lips puckering up, and all the other sounds of the world going silent” (p. 264). However, among the silence, one sound became apparent to Cal, his heart beating fast, “that amphibian, moving that moment between two elements: one, excitement; the other, fear.” (p.265). On the one hand, just like Cal’s heart, the excitement of a first kiss, or perhaps even a first love, shows how natural and amazing this experience feels for him. On the other hand, a feeling of fear emerges, arguably at least in part from the knowledge that two girls should not be kissing as to the rest of society this would be an unnatural behaviour displayed only by those of unsound minds. In adult Cal’s recollection of the events, this contribution to that fear may be indirectly inferred as when Cal recounts the events of his visit to Clementine’s parents’ house, he chooses to omit any mention of the kiss to his mother, Tessie. This is probably due to his awareness, even at a young age, that “there was something improper about the way [he] felt about Clementine Stark” (p.265). In other words, even at seven, Cal, who at the time thought of himself as a girl, knew that the feelings he felt for another girl, were not going to be embraced as “normal” and “correct” in society and therefore it was important not to mention these feelings to his mother, as she posed as one of his main representatives, relaying an image of him as a seven-year-old child, to society. As for Clementine, her words, “You are the man”, spoken to Cal during the kissing episode, denote a similar understanding of the situation. In order to

correctly make-believe the situation to be “normal” they had to adapt the heteronormative pattern established by the majority as they saw in the behaviour of adults around them.

Following on from Cal’s first experience with shame due to his feelings towards Clementine, the recollection of another scene highlights, to a greater extent, the feeling of wrongness that Cal associates with liking another girl. A week after that first kiss, Clementine and Cal play together whilst taking a bath. Even though no kissing is involved and the situation is presented as “far less serious, more playful [and] free-style” (p.266) the narrator also comments on the effects Clementine’s body had on his own transient physiological state, which allowed him to gather “crucial information” that he would however, “store away” and not understand “until years later” (p.266). The importance of this second memory in relation to the way in which it affected Cal’s understanding and relationship with his feelings, and thus, mental health, relies on the imminent, subsequent discovery of Lefty Stephanides’ unconscious body in the bathroom. Lefty’s impairment, even though not specified in the narration, could be understood to have been caused by a stroke. Nevertheless, seven-year-old Cal formed his own diagnosis for Lefty’s near-death experience which he believed to be a result of having witness the scene between him and Clementine;

While in the other (room) a seven-year-old girl is also praying, praying for forgiveness, because it was clear to me that I was responsible. It was what I did . . . what Lefty saw . . . And I am promising never to do anything like that again and asking *Please don’t let papou die* and swearing *It was Clementine’s fault. She made me do it.* (p.267)

Therefore, in addition to understanding the improperness of love and desire outside of the heteronormative standard, as aforementioned in relation to the “first kiss” scene, seven-year-old Cal had already internalised that acting outside of the norm carries with it fatal consequences. This scene portrays how the structures of power that support the idea of the normative as the “normal/good” way to behave in opposition to the non-normative as the “abnormal/wrong” can bring a young child to the extent of self-blame and repression as they deny their feelings that render them abject, to conform to society’s rules for how they should feel and behave.

Nevertheless, the passage of time brought with its Lefty's partial recovery and at the same time, the return of Cal's feelings for, as he puts it, his "Obscure Object of Desire" (p. 325). This is the name adult Cal dubs the girl he views as the love of his adolescent years, taken from the title of a Spanish-French movie, from 1997, about a dysfunctional romance. The narrator, explains that this "was exactly how [he] felt, following [his] own Obscure Object. As though [he] were carrying around a mysterious, unexplained burden or weight." (p.325). Thus, it could be argued that the narrator's nickname choice represents young Cal's fear towards the desire he felt for another woman. No longer a young child, the developments that accompany the teenage years allow Cal to start to make sense of the physical feelings he once felt as he observed the naked Clementine in the bath as these evolve into a more sexual desire for the female body. From Berlin, Cal recalls having the obscure object near him as "hard on [his] organism" as his "nervous system launched into "Flight of the Bumblebee" the violins [...] sawing away in [his] spine. The timpani [...] banging in [his] chest" (p.326) and yet, these feelings however natural and uncontrollable they may be in humans, were in this instance, obscure. The narrator goes on to pose two questions concerning his younger self; "did Calliope feel any inkling of her true biological nature? [And,] Did she ever, while the Obscure Object passed in the hall, think that what she was feeling was wrong?" (p.327). The answer he found to each of the two questions was as vague and obscure as his feelings; both "Yes and no" (p.327). The reason behind such an ambiguous answer and behind the unusual choice to nickname the girl he perceived to be his teenage love, are both due to the "ethos of the school" Cal attended being "militantly heterosexual" (p.327). Cal comments on the fact that even though his "classmates might act cosy during the day", finding it "perfectly acceptable [for] Baker & Inglis to get a crush on a fellow classmate", that was only permitted due to the lack of boys in the school, which caused the high "emotional energy" to be directed toward intense friendships with other girls (p.327). However, this mild trespass on the heteronormative regime was only allowed during school hours, as "any girl suspected of being attracted to girls was gossiped about, victimized, and shunned" (p.327). The way in which Cal defines the attitude adopted by the majority, in the face of someone who breaks the established "normal" rules of behaviour, is reminiscent of the mechanisms of social power explained by Stuart Mill when referring to the enforcement of the "one type of human nature". Consequently, Cal's statement; "I was aware of all this. It scared me" (p.327) as well as the previous reactions he displayed when faced with the reality of his feelings, portrays the way in which social stigmatisation and prejudice

towards abject identities, especially when this is also reinforced by the institutions, can affect the way in which someone looks at themselves. In this instance, a feeling of fear often replaces that of love for who they are.

Up until this point, the discussion surrounding the origin of Cal's shame has been solely based on his sexual orientation, however, going back to the narrator, writing from Berlin, the shame that he carries into adulthood is that of being intersex. This is something he considers to be a "physical predicament" that casts him out of hope and out of love (p.107). Another word by which Cal refers to his intersexuality is "peculiarity", that leads him to wander in a metaphorical maze, "shut away from sight" (p.107) for many years. A clear reference to the mythological figure, this chapter is named after, the minotaur, which may be recognised to relate to the way in which Cal perceives his body as a hybrid monster, half human, half beast. An "unnatural" being, only heard about in fictional stories and myths, around which a giant labyrinth was built to be kept, held away from society. This shame regarding his physique, that ushered both young and old Cal to conceal their body and identity from others, began even before a head bump against a car landed him in the hospital where he would be born for the second time.

Adult Cal informs the reader, quite matter-of-factly, about his 5-alpha-reductase deficiency from the very beginning of the narration. This "condition" affects individuals who are genetically male (XY). In these individuals, due to the shortage of a hormone called dihydrotestosterone, there is a disruption in the formation of the external sex organs before birth, which in some cases, such as that of Cal, produces the external genitalia to resemble that of a female (XX) (Genetics Home Reference, 2019). Furthermore, it isn't until the development of the body during puberty, that an increase in male sex hormones produces the "development of some secondary sex characteristics, such as increased muscle mass, deepening of the voice, development of pubic hair, and a growth spurt" (2019, p. 1). Pre-second birth Cal, however, doesn't possess this knowledge that both himself as an adult and consequently, the reader, have about the condition his younger self first realises he has inherited. Thus, the only tool available to sixth grade Cal Stephanides is to judge his "normality" by comparison, noting how "a year and a half after Carol Horning came to school with brand-new breasts, I was still without any [...] breasts. No period, either" (p.295). These physical differences brought shame to Cal. A clear example of such accompanying embarrassment can be seen in the locker room scene

in the chapter entitled “The Wolverette”. In this excerpt, Cal not only awaits for all of the other girls to leave the room before getting changed, but goes to the extreme of dressing and undressing at the same time, in order to prevent the exposure of his naked body and thus, conceal his “abnormally” undeveloped teenage body. Another example of the way in which his non-normative body effects his mental health can be found in “Flesh and Blood”, where Cal starts to fake his period in order to calm the anxieties felt by both his mother and himself due to the lack of a “normal” development. This deception enables Cal to feel a little more in “charge of things” as if he “wasn’t at the mercy of nature anymore” (p.362) as he is able to make himself feel and appear less abject through pretending to belong to the norm by means of trickery, for example, most obviously, using a push up bra to feign breasts and therefore cause his body to resemble that of a “normal” girl. This deception later shatters as he is “diagnosed” with a 5-Alpha-Reductase Pseudohermaphrodites deficiency.

A short while after this diagnosis, in the final chapters of the book, young Cal runs away from New York in the middle of the night, leaving only a note behind stating, “[I] don’t want to be a problem [...] I know you’ll say I’m not a problem, but I know I am”, accusing Dr. Luce of being a liar as Cal doesn’t believe that he is a girl as the doctor claims, but a boy. His final statement assures that he will be alright but wishes to go to a place where no one will know him, as in Grosse Pointe - their hometown- he will become the centre of gossip when everyone finds out (p.438). This short letter depicts Cal’s state of mind after being dropped off at the library -during Dr. Luce’s meeting with his parents- where he scrolls through the dictionary searching for the words he has heard in the clinic used to refer to himself. ‘Hypospadias’ defined as an abnormality of the penis, synonym; ‘eunuch’ defined as a castrated man, synonym; “‘hermaphrodite’ —1. One having the sex organs and many of the secondary sex characteristics of both male and female. 2. Anything comprised of a combination of diverse or contradictory elements. See synonyms at monster.” (p.430). Many words can be highlighted within these definitions, denoting descriptors one might associate with an unlovable outcast. For example, “abnormality”, “castrated”, “contradictory elements”. However, the one that has the biggest impact on Cal’s mind was *monster*; a word that arguably has remained for a long time at least, as a one which he regarded as the definition of himself (p.431). The Oxford Dictionary offers three definitions for the word “monster”, one of which is “a large, ugly

and frightening imaginary creature” and another is “a congenitally malformed or mutant animal or plant”. Thus, it is perhaps unsurprising that this trail of synonyms, ending in such a word as this, leads Cal to believe that he is an abomination of a human. Someone people will be frightened of and shy away from. Someone heard of only in children’s nightmares. Someone who will never be accepted if he were to allow his truth to be known. However, for Cal, the importance of the word doesn’t lie solely in its definition, but also in the place in which it was found, “in a battered dictionary in a great city library. A venerable, old book, the shape and size of a headstone, with yellowing pages that bore marks of the multitudes who had consulted them before (him) [...] here was a book that contained the collected knowledge of the past while giving evidence of present social conditions” (p.431). This was a book written, and proofread, by academics with the greatest level of knowledge available to a society. A book like this, Cal regarded, must contain only the truth. Furthermore, it is important to him that he had to discover this information in a book in a library by himself. Due to this, it appeared to him that neither his doctors, nor his family, nor anyone else had been able to tell him the difficult truth, perhaps because they were scared of him or perhaps because they no longer cared for such an “abomination”. On finding the definition, he “longed to be held, caressed, [but] that was impossible”. As carefully as he perceived everyone around him had tried to hide the truth, he now understood that he was a monster. He demonstrates his internalisation of this idea of himself as a monster, in his letter to his Mum and Dad, through his insistence that he is a problem and a burden. Later, following running away and finding himself homeless in San Francisco, Cal takes a job as part of a pornographic freak show suggesting that he deeply believes his identity is abnormal and monstrous and fitting for such a position.

In other words, the social powers mentioned by Stuart Mill, describing the way in which the majority imposes their “normal” as the normative rule to follow in order to avoid being outcast, become part of a discourse internalized by all. This can lead to disastrous effects on the beliefs and mental health of individuals who may be deemed to be, in some way, abject identities/bodies, such as Cal. These individuals are jeered at and judged by their societies. They become exiles and runaways, occupying space but not living, not being seen and not mattering. During the chapter “Home Movies” adult Cal wonders; “Can you see me? All of me? Probably not. No one ever really has” (p. 218),

which could be argued to point towards the fact that even in his adulthood, he feels like his identity, when looked at as a whole, is worthless.

3. Conclusions

‘Abnormal’ doesn’t and should not equate to ‘worthless’ or ‘useless’ or ‘lesser’. The definition means nothing more than something that is infrequently seen and therefore, in terms of a behaviour, is some dimension of a person’s behavioural/physical traits that doesn’t apply to the majority. Its antonym, normal, is used in mathematics to define a point on a continuum, ranging from each extreme of a trait, that denotes the most commonly occurring extent of that trait. However, over time and use of the word, it has become associated with connotations of something outrageous, abominable and even monstrous in the eyes of society and the individual themselves as they internalize the structures that sustain the discourse of normativity. Therefore, the normal has come to mean that which is normative and those who stray from it are estranged from the majority as Eugenides’ displays through the characters in his novel. Going back to a mathematical view of normal, if we were to plot many aspects of any person as vectors of a three-dimensional graph and plot points along each one denoting where an individual falls along each continuum, we would begin to see that no-one fits within the normal cluster in every dimension. Everyone’s body or identity may be considered abject in some way or another leaving each of us estranged from society in some aspects just as every character in *Middlesex* is. It is this that Judith Butler attempts to convey in refusing to define what she means by an abject body as there are so many dimensions of a person that cannot be accounted for in a definition, yet are too numerous to be defined by examples. She also remains ambiguous to avoid imposing yet another categorisation upon abject bodies/identities that could ultimately carry with it yet more judgements and stigmatization. *Middlesex* provides just a few of these infinite examples of different aspects of identity that fall outside of the average in each character. These range from Lina’s closeted sexuality, to Zizmo’s unknown, perhaps unexplainable, abject trait that leads him to several shifts in his character over the course of the novel, to the shadow cast over the members of the Stephanides household, especially the first-generation ones, due to their immigrant status. Eugenides’ shows how each of these characters pays the price,

in the form of their mental wellbeing, for the deviations from normal that leave them outcast.

Among all the characters however, Cal(liope) Stephanides represents the most important example, in this essay, of the “abnormal”. This is not only due to his central position as the protagonist of the novel, but also because he exemplifies the way in which medical treatments have often been imposed upon those whose bodies are perceived as abject in certain ways. This medicalisation forms one of the central themes of this text as it is a technology that Foucault’s biopowers have been able to use to control the life processes of such individual bodies and by extension, populations. This biopower, which has changed over the centuries, may take the form of laws and legal actions imposed by governments, or may be imposed by socially constructed rules of normal by those possessing the predominant form of trait. This links then to Mill’s theory of the “tyranny of the majority” where the majority imposes their most common trait as the normative onto others by means of social and political power, therefore outcasting members of the society that don’t fit within that normative. These members, may seek treatment to restore happiness in their lives by fixing that which they perceive to be wrong with them, or, like Cal, medical procedures may be imposed upon them as those around them believe it will restore such happiness, even if the individual disagrees.

In other words, this creates a vicious circle whereby “abnormality” slowly gathers connotations with which people would often rather not be associated as they denote someone whose life matters less than someone who fits within the normal. Each member of the majorities and minorities that make up society internalise these beliefs regarding the word “normal” and its antonym “abnormal” which creates whole new meanings for these words, well beyond the reach of their original definition. For the minority, who don’t adhere to the normal rule for any one aspect of their identity, this can lead to a feeling of being isolated and unlovable and as though their lives do not matter. These are very much the start of a spiral into various mental health problems, particularly depression and anxiety disorders. This leads those who perceive themselves in this way to seek out ways to hide or change these parts of their identity themselves, often running away from society as Jimmy Zizmo does. If not, others around them may find ways, be these via legal actions, social pressures or, as in the case of Cal, medicalization, to “correct” these aspects of identity under the impression that they are helping the abject individual to lead a happier life by enabling them to fit within society’s constraints of normal. Such attempts

to rectify individuals, for example via medicalization, in turn, feed into that ever-warping definition of “abnormal” and “abject” that is associated with these individuals. Here the circle of normality, mental health and medicalisation starts again.

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