

[0:00:00] Intro Music

Timothy Neale: Welcome to Technoscience. Podcast recorded at 2019 Society for the Social Studies of Science Annual Meeting in New Orleans. Produced by Timothy Neale

Laura Foster: and Laura Foster. This podcast is a new initiative to share the exciting work being done in Science and Technology Studies, or STS, with wider audiences who are curious about the field. It's here to offer an approachable way to learn more about this interdisciplinary and engaged field.

Timothy Neale: Before we begin, we would like to acknowledge that this podcast was recorded on unceded Indigenous land. We recognize the first peoples of Louisiana including the Chitimacha tribe, Coushatta Tribe, the Jena Band of Choctaw Indians, and the Tunica-Biloxi Indian Tribe.

[0:00:52] **Laura Foster:** In this podcast series, you'll hear interviews with STS scholars about a range of issues including what the field means to them, some of its big debates, and what its future yet might be.

Timothy Neale: To quote the feminist philosopher Donna Haraway, "Technology is not neutral. We are inside of what we make and it's inside of us. We're living in a world of connections and it matters which ones get made and unmade."

[0:01:17] **Laura Foster:** With those guiding words, let's go to this episode's interview.

Intro Music

[01:34] **Konstantin Georgiev:** My name's Konstantin, I'm a PhD student at Rice University and I am here today J. R. Latham who is a post-doctoral fellow at Deakin University. Thank you for joining us today!

[01:46] **J. R. Latham:** Thanks! It's great to have the opportunity.

[01:49] **Konstantin Georgiev:** We've been starting these interviews, a bunch of them, with a fairly speculative question: what do you think would've happened if you didn't come to academia and then what actually brought you to academia?

[02:04] **J. R. Latham:** Ah, what do I think would've happened if I had not come into academia? I don't know. I don't have an answer for that. I have been really lucky that I have been able to pursue this career so far, that it's kept on going and I guess why did I become an academic—because I was always interested in theory, I was always interested in how the world operated according to particular structural systems. I grew up somewhere really racist and homophobic and I was really aware of that at a very young age. And I was always compelled to try to understand how and why that was happening and how and why so many people were fine with it.

[02:50] **Konstantin Georgiev:** And then how did this interest into understanding better those systems, how did that kind of lead you to the particular discipline or field of STS?

[03:04] **J. R. Latham:** Yeah, I guess because I'm interested in power. I mean, that is how the world operates. So I did an undergrad in women studies and I did some work in philosophy and indigenous studies as well, as a route to thinking about these questions — what is it that creates particular conditions, in which women get treated differently than men, indigenous people get treated differently from settlers, and in what kinds of ways we can intervene to make those systems different. So I guess that's how I came into science and technology studies and thinking about feminist science studies. I started my PhD research in health care practices and thinking about medicine, particularly transgender medicine, I read Annemarie Mol's book, *The Body Multiple*, and that really changed the whole direction of my project at that point, into thinking how particular practices produce particular possibilities in the world that are really material in the sense that they make particular bodies and lives possible, and they make others impossible.

[04:28] **Konstantin Georgiev:** Would you just explicate a little bit what exactly that research entails and just give a short info on you past and present research?

[04:40] **J. R. Latham:** Sure. So my PhD research looked at practices of transgender medicine so I looked at how transgender people experience the processes of going through a sort of clinical transition, what their experiences with medicine are and I looked at how trans people look at these processes and how doctors look at these processes, and I analyzed the texts in which they explain those experiences. So the way the doctors think about what transgender medicine means, and the way trans people think about that, it was incredibly obvious how diverging and contradicting, and clashing those difference paradigms often were.

[05:20] **Konstantin Georgiev:** And since you mentioned that you were interested in power and the interventions into these dominant discourses and systems, were you able to find ways in which you could also pursue such process of intervention with your academic research—within or outside of academia?

[05:40] **J. R. Latham:** Yeah, absolutely. Part of my work really tries to think about how to make medical practices different, how to make more possibilities for different ways of experiencing transition for trans people, so I've worked with health practitioners, I've done non-academic work that tries to think through those problems on the terms of medical practitioners. So they think very differently from us, you know, philosophical STS scholars. Working on the terrain on kind of ethical systems that doctors think through to be able to ask some of the questions on their terms of how it is that we produce a sort of narrow trajectory of treatment for trans people that's incredibly specific.

So it tends to have particular steps that are expected to go in a particular order and really clearly that's what medicine really thinks of transgender transition and trans people. Some trans people think of it like that and a lot of people think of it really differently, they think of all kinds of different possibilities, of ways they want to change their bodies or live their lives in much more diverse terms. So I think about how to talk to doctors, how to talk to clinical practitioners about how they can think in a less narrow way about what gender means for their patients in order to offer not just a better treatment plan, but an experience of care in that process.

[07:19] **Konstantin Georgiev:** And how often did you have to explain what actually STS is to the people you were working with, and how did you go about that?

[07:26] **J. R. Latham:** Yeah, that's a good question. Mostly I didn't, that's how. So yeah, I think a lot of what we do even within STS, we can have a lot of different terms and a sort of different vernacular and language while we're talking about the same kinds of concepts in different ways. And I think that those nuances and complexities are really helpful in an academic context to be able to debate what these things mean, but I don't think that they translate outside of this particular context. I wouldn't introduce myself as an STS scholar or anything like that. I guess in that context I'm like a bioethicist or a medical ethicist, that's what I would say.

[08:06] **Konstantin Georgiev:** And if you had decided to just explain it in a couple of sentences, what do you think you would say?

[08:17] **J. R. Latham:** I guess that I would say... I mean people ask me more about my work and I guess I would say I'm interested in thinking about how all of the ways of thinking we have don't come from nowhere. They come from particular histories, they're contingent on particular economic and political climates, and that STS is interested in thinking about those contingencies and that that's really useful in a medical context because patients' cares should be individualized. And so being able to understand the broader contexts of what not just people's own individual experiences are, but how it is that we have come to understand this concept of gender, or this concept of transgender in a particular specific way, doesn't make it universal; it's just how it is at the moment and I think that STS is really helpful for being able to point at what those contingencies are.

[09:14] **Konstantin Georgiev:** And what would be a significant debate that influenced your way of thinking? Anything you currently say, it also probably doesn't come from nowhere, so at which debate would you point as something that... I mean, it could be anything, historical debate within STS, or something that's currently going on, but just anything that you would pin point as very influential on your own way of thinking?

[09:39] **J. R. Latham:** I suppose I'm interested in the ways that different fields in STS sort of set themselves up to be kind of particular about when speaking of each other, because of the ways they use those different terms. So often people would say to me, "Oh that's actor-network theory, that's not new materialism," or they'll use this jargon which is really specific to STS and that has particular purposes for sure. But I think there are ways in which in a philosophical sense we're addressing the same questions, and I think that often people will not engage with the literature from those other areas of STS because they think of it as doing something different—which it is, I'm not saying it's the same, but I'm saying there's still a lot in common that's useful to engage across those different sort of fields across STS. And I don't think that happens much, so I'm interested in that

[10:44] **Konstantin Georgiev:** So earlier on you brought up this idea that—and we talked a bit about interventions, but then you spoke also about having to always translate between different jargons and maybe even having to kind of conceal the STS label. So how have you tried to, and probably managed to, intervene or disrupt, or translate certain things between disciplines through your publishing strategies, I guess I should call them.

[11:16] **J. R. Latham:** Sure. Yeah, I do have an example I'm not sure it's a particularly successful one, but that tells us something too. But yeah, I mean I've published in, I wrote a letter in a journal that was a surgical journal, aesthetic plastic surgery to try to bring up some of these ethical questions of how is it that we treat patients differently based on what their understanding of their sex is, and then offered them particular trajectories of treatments.

So for men who are not trans, if they develop breasts for whatever reasons or hormonal whatever, then they are able to access, you know, a surgical intervention in order to have their breasts removed. Because that's understood as totally normalized—that you don't want to be a man who wants to have breasts. But if you're a transgender man it's a completely different trajectory of treatment where there's an expectation or a requirement that you'll go through a psychiatric process to be accessed, diagnosed with a mental disorder and a host of other barriers to access that kind of surgical intervention. So I was interested in questioning how those different differentiations are made if we understand that people aren't easily classified into sex categories in a way that's useful. And so I wrote that in a medical journal and it wasn't even that they were sort of like, "No", the answer to this question of should we treat these people in more similar ways... It's not like they just said "no", they really said like, "This is a terrible question, like, this is not even a question that should be asked because these are categorically different people, so it's just irrelevant to even be talking about them as though they're not." And I think that's one of the ways in which coming from gender studies and having this feminist understanding of gender is difficult to try to translate into medicine. That was really my introduction to just how difficult that is.

[13:32] **Konstantin Georgiev:** Speaking of questions that should not be asked according to certain people... Your work has kind of more unconventional focus in terms of that it focuses on trans men, whereas a vast majority of work that people might know focuses on trans women. And also what I found interesting in your publication list is that you have a couple of publications on the process of aging of trans bodies, whereas we usually see them—especially in media—as this kind of one time event that... You know, we focus on the whole transition and so on, whereas we rarely see this long term process of actually aging in that body. So you're shedding light on things that I guess are usually not asked. Would you mind telling us more about these questions that you are trying to ask and the answers that you are coming to.

[14:35] **J. R. Latham:** Yeah well, I think there's certainly a sort of paradigm of understanding not only just transgender medical treatment but what transgender is, as being a sort of male to female phenomenon and so much of the research and the way people think about it is that that's what it is. That it's men who become women. A lot of the academic work is focused around that as well and it's also often gender neutralizing. So people would sort of talk about trans men as though they are the reverse of trans women. That doesn't make sense on so many levels, but it's also like if you have an understanding of gender which at its simplest is that men and women might be different, then the transition or the change from being male to female, from being a man to a woman, or from being assigned female at birth to becoming a male—these are paradigmatically different from the experiences of being born male and becoming a woman, and a lot of those questions haven't been asked. Yeah, I do try to think about what those differences are. And I do think that they are to the detriment of both populations, right, to trans women and to trans men, that this way of thinking operates.

So in terms of aging, yeah, I think another problem with how trans medicine understands being trans as being a kind of diagnosable disorder also means that it's thought of as always being there. That it's always present and perhaps it's undiscovered, and I just don't think that makes sense of a lot of people's lives. Because a lot of people... I mean people become trans at all kinds of ages, I'm certain that this doesn't mean that they've been trans their whole life and just in denial about it. Which is what the medical model sort of demands. And I think that when you think about being trans—and just gender in general—like that... I mean people's genders change all the time, not just trans people's, we're all growing up, we're all moving with the fashions of the time. It's really important to think about what those differences are, and I think that those differences get left out a lot. What does it mean to transition when you're 70 years old? What does it mean to lose your family, what does it mean to re-constitute a legal category at a different stage of your life... These are not the same things. To be a child where you could grow up into a sort of streamlined gender

and live as a man your whole life is completely different from someone who has lived a different life and makes that change later in their life. I think that so much research is focused on younger people and we really need a lot more research into the experiences of older people not least because we know so little about what the long term effects of taking hormones even are.

[17:54] **Konstantin Georgiev:** And while we're on the topic of blind spots, as a way to wrap it up, do you think there's any blind spots in this interview? Something that I should've asked?

[18:08] **J. R. Latham:** No, not at all.

[18:09] **Konstantin Georgiev:** Well, then thank you for joining us at Technoscience!

[18:14] **J. R. Latham:** Thank you very much! It's a pleasure.

Music outro

[21:16] **Laura Foster:** You've been listening to Technoscience - a podcast recorded at the 2019 Society for Social Studies of Science Annual Meeting in New Orleans. And produced by Laura Foster

[21:26] **Timothy Neale:** and Timothy Neale in association with the Society and with support from Alison Kenner, Teresa Hoard-Jackson, Aadita Chaudhury, Konstantin Georgiev, Juan Francisco Salazar, and Duygu Kasdogan. The intro and outro music is by the Young Fellaz Brass Band from New Orleans, Louisiana. Find them on Instagram and gmail @youngfellazbrassband. That's Fellaz with a Z.

[21:49] **Laura Foster:** Thanks for listening and catch you soon for the next episode.