

*Navigating Transsexual Identity in Post-Revolutionary  
Iran: A Critique of Be Like Others (2008)*

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This paper centers transsexual Iranian subjects undergoing sex-change surgery within the Islamic Republic of Iran via Tanaz Eshaghian's (2008) documentary *Be Like Others*. The documentary outlines the empirical struggles faced by Iranian citizens navigating educational, socio-religious, and medical institutions in Tehran—while analyzing how trans persons reconcile with societal stigmas regarding their gender and sexuality. There is limited vocabulary in the difference between the categories 'homosexual' and 'transsexual'.<sup>1</sup> Trans Iranians are pressured to abide by a strict gender heteronormative appearance according to their biological sex.<sup>2</sup> Labelings of 'transsexual' and 'homosexual' are influenced by ubiquitous Islamic rulings (*fiqh*) on transsexuality, and Iranian literature on psycho-sexology.<sup>3</sup>

The documentary dissects practices of a gender reassignment clinic in Tehran, run by one of the top sex-change surgeons in the country, Dr. Bahram Mir-Jalali of the Mirdamad Clinical Center. He greets patients and family in the visiting room with a hospitable tone, and his surgeries are approved by the government, with hundreds of operations performed. Cameras take viewers into the crowded metropolitan city of Tehran where religious apparatuses are illustrated on public walls—Ayatollah Khomeini, and the Shi'a predecessor after Khomeini's untimely death, Khamenei. The overarching god-like power of the leaders—as exemplified by Khomeini's fatwa, bears an imperative political influence after his death. The Islamic Republic of Iran views sexual abnormalities as an illness that can be cured. This abnormality referenced in the documentary is reminiscent to Rubin's (1984) "Thinking Sex: Notes for a Radical Theory of the Politics of Sexuality." There is a definite hierarchy of gender and

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<sup>1</sup>Najmabadi, *Professing Selves: Transsexuality and Same-Sex Desire in Contemporary Iran*, 242.

<sup>2</sup>Saeidzadeh, "Transsexuality in Contemporary Iran: Legal and Social Misrecognition," 17.

<sup>3</sup>Najmabadi, "Verdicts of Science, Rulings of Faith: Transgender/Sexuality in Contemporary Iran," 17.

sexuality—with cisgender sex at the top tier of heteronormative acceptance.<sup>4</sup> The lower the one is in this hierarchy, the more vulnerable they are to police and clinical surveillance. Sexual identities that do not fall within heteronormative societal patterns, and gender practices that fail to abide by assigned sex are automatically regarded as negative in character, perverse in practice, and associated with a pedophilic identity.<sup>5</sup> Similar to Rubin’s analysis of the concrete hierarchical ladder of sexualities, Iranian de facto laws criminalize male homosexuality as “violent, akin to rape, prone to murder, and almost always aimed at the underaged.”<sup>6</sup> These perverse identities are bridged with leading perceptions of male homosexuality, as the government legislates identities accepted in society. Subsequently, this annexes a pathologizing taxonomy for those deemed morally deviant.

The religio-societal barriers contended by transexual patients are unraveled by Khomeini’s fatwa<sup>7</sup> — a religious ruling allowing sex-change surgery to remedy and ‘cleanse’ citizens of sinful tendencies. Clinical spaces that allow gender reassignment surgery in Iran and historical critiques of sex and gender embedded in heteronationalism present the non-normative and pathologized experiences of subjects via overarching themes of queer theory. When I correlate this writing to queer theory as a discipline, I also raise discussions of the criminalized sexuality of embodied populations residing under a heteronormative society—one influenced by queerness as a shared experience of vulnerability.<sup>8</sup>

Movie director Eshaghian takes audiences into the holy city of Qom, a religious centre for Shi’a studies. As a Shi’a cleric on Islamic law and transexuality mentions, ‘Islam has a cure for people suffering from this problem’.<sup>9</sup> The insinuation that the problem—homosexuality, is an illness that augurs suffering, allows religious and state institutions to watch for deviant practices. The discourse of sexology historically positions itself as the privileged knowledge when in relation to homo- versus heterosexuality.<sup>10</sup> Just as sexologist ‘experts’ held de facto autonomy to label individuals as sexually abnormal, Shi’a clerics find religious faults and cures for those in need of surgery to relieve ‘unnatural’ and ‘immoral behavior’.<sup>11</sup> Same-sex desire is deemed a capital crime, with punishments of stoning due to forbidden sex acts—such as sodomy. From the government’s support for pious behavior, to the compulsory view of sex-

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<sup>4</sup>Rubin, “Thinking Sex: Notes for a Radical Theory of the Politics of Sexuality,” 1

<sup>5</sup>Cappelli, Renu. “Queer Theories.” *Queer Theories*, San Francisco State University. January 30, 2018. Class Lecture.

<sup>6</sup>Najmabadi, “Verdicts of Science, Rulings of Faith: Transgender/Sexuality in Contemporary Iran,” 6.

<sup>7</sup>Saeidzadeh, “Transsexuality in Contemporary Iran: Legal and Social Misrecognition,” 2.

<sup>8</sup>Cappelli, Renu. “Queer Theories.” *Queer Theories*, San Francisco State University. January 30, 2018. Class Lecture.

<sup>9</sup>Eshaghian, *Be Like Others*.

<sup>10</sup>Somerville, *Queering the color line: Race and the invention of homosexuality in American culture*, 9.

<sup>11</sup>Eshaghian, *Be Like Others*.

change surgery as a legitimate treatment to cure homosexuality, the existing laws requiring medical operation leads to a ‘heteronormalization’ of the Islamic republic.<sup>12</sup>

*Be Like Others* offers audiences a post-revolutionary account of characters encountering sex-change surgery, while magnifying core gender binary themes and representations recurring in contemporary Iranian society.<sup>13</sup> Anush is a biological male considering sex-change surgery. After being pressured to leave school for her feminine image and conduct, her mother Shahin, and boyfriend Ali influence Anush’s decision to follow through with the surgery. Patients are expected to follow obligations of relatives and institutions—including culture and mainstream society that prefers heterosexual imagery. Progress is associated with normative heterosexuality, and non-normative identities are viewed as causing social dysfunction due to deviant ways of being. Transnormative identities fall susceptible to monitoring by the regime via omnipresent homophobic policies.<sup>14</sup> The requirement of homosexuals to perform sex-change surgery as a religious requirement ensures a concrete heterosexual relationship between an identifiable man and woman. As same-sex practices characterized Iran as backward in the 1800s, the revolution was marked by the ‘heterosocialization of public spaces’, producing gender as a binary construct.<sup>15</sup> This crystallization of gender as dual leads to the misrecognition of other gender identities and an increased likelihood of disobeying the country’s gender norms.<sup>16</sup>

The special attention paid to familial views is prominent throughout *Be Like Others*, as one of the patients becomes destitute and joins the underground labor market after the lack of family approval. ‘Family affirmation (*ta’yid*)’ by those considering sex-change surgery is deemed paramount as patients face ‘denial (*inkar*)’ from their kin. Parents therefore attempt to keep their child’s sexual and gender identification hidden.<sup>17</sup>

The Transsexual Support Conference in the Tehran Health Ministry is an event for those considering sex change surgery.<sup>18</sup> Since the nineteen forties leading up to the revolution, gender reassignment medical interventions were considered ‘advancements in surgery’<sup>19</sup> due to studies done on ‘gender identity disorder’ in the sixties. This drew its association with sex-change operations during the time.<sup>20</sup> The cleric of the conference stated that those considering the surgery must gain support from Islamic law. As the religious cleric states, Khomeini

<sup>12</sup>Najmabadi, “Verdicts of Science, Rulings of Faith: Transgender/Sexuality in Contemporary Iran,” 3.

<sup>13</sup>Najmabadi, *Women with mustaches and men without beards*, 1.

<sup>14</sup>Najmabadi “Verdicts of Science, Rulings of Faith: Transgender/Sexuality in Contemporary Iran,” 2.

<sup>15</sup>Najmabadi, *Women with mustaches and men without beards*, 3.

<sup>16</sup>Saeidzadeh, “Transsexuality in Contemporary Iran: Legal and Social Misrecognition.”

<sup>17</sup> Najmabadi, *Professing selves: Transsexuality and same-sex desire in contemporary Iran*, 243.

<sup>18</sup>Eshaghian, *Be Like Others*.

<sup>19</sup>Najmabadi, “Verdicts of Science, Rulings of Faith: Transgender/Sexuality in Contemporary Iran,” 4.

<sup>20</sup>Saeidzadeh, “Transsexuality in Contemporary Iran: Legal and Social Misrecognition,” 2.

stands behind the deliberate changing of one's gender, making the sex-change operation not sinful. The cleric's religious validation of surgery is reminiscent of Karimi-nia's text titled "Sex-Change" (*Taghyir-e jensiyat*). The changing of one's gender from FtM (female-to-male) or MtF (male-to-female) is seen as not a matter of altering one's biological sex,<sup>21</sup> but as changing one's status of being. The asymmetries of religious doctrine intersects with medical apparatuses of daily life by valorizing complacent heteronormativity.<sup>22</sup> If this holds true, the question that remains is whether urban Iranian society surveils sexuality through institutionalized Islamic jurisprudence or via medical technology.<sup>23</sup>

Anush satisfies the governmental obligations by requesting formal permission from a local government official to publically dress as a woman before the sex-change operation. Upon entering the office to obtain a permit to dress as a woman, the Health Department labeled her as 'transsexual'. Upon receiving her new identification, Anush is required to abide by Islamic law to veil in public. As the government attaches a transsexual label to Anush, the 'legal misrecognition' by the regime is perpetuated—thus creating narrow understandings of gender and sexuality within interpretations of religious law.<sup>24</sup> These linear deliniations of gender and sexuality are elaborated by Annamarie Jagose in her explanation of the two sex model. This model directs social attention to a dual sexual orientation—that is, straight or queer.<sup>25</sup> Equivalent to how 'queer' encompasses an overarching umbrella term for all homonormative sexualities, Iranian society recognizes 'transsexual' as an all-inclusive term. The institutional vehicles of Islamic jurisprudence understands transsexual-gender identity in sparse terms, and as a juxtaposition to heteronormativity.<sup>26</sup> The misidentification of the term 'transsexual' requires a socialization and educational awakening to differentiate between homosexual and transsexual subjecthoods.<sup>27</sup> Gender labelling furthers Anush's vulnerability when negotiating with Islamic laws and cultural apparatuses, as she is required to abide by the womens' Islamic dress code.

Marginalization of trans Iranians after surgery is alluded to in Fraser's theory of 'recognition'.<sup>28</sup> According to Fraser (2003), there must be an equal distribution of tangible material resources to guarantee a person's economic independence. As trans people are misrecognized by society because of their homonormative personas, the Iranian religio-political atmosphere

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<sup>21</sup>Najmabadi, "Verdicts of Science, Rulings of Faith: Transgender/Sexuality in Contemporary Iran," 16.

<sup>22</sup>Najmabadi, "Verdicts of Science, Rulings of Faith: Transgender/Sexuality in Contemporary Iran," 4.

<sup>23</sup>Saeidzadeh, "Transsexuality in Contemporary Iran: Legal and Social Misrecognition," 12.

<sup>24</sup>Saeidzadeh, "Transsexuality in Contemporary Iran: Legal and Social Misrecognition," 19.

<sup>25</sup>Jagose, *Queer theory: An introduction*, 1.

<sup>26</sup>Saeidzadeh, "Transsexuality in Contemporary Iran: Legal and Social Misrecognition," 18, 70.

<sup>27</sup>Najmabadi, *Professing selves: Transsexuality and same-sex desire in contemporary Iran*, 243.

<sup>28</sup>Najmabadi, *Professing selves: Transsexuality and same-sex desire in contemporary Iran*, 39.

paves the road for inequity in resources and a lack of participatory action within the religious setting. In effect, Iranians are ‘misrecognized’ in their status after the operation, leading to ‘seclusion and unemployment in social life’.<sup>29</sup> Consequently, this may indirectly lead trans people to perform sex acts for an income as a result of inescapable economic deprivation.

The patrolling of transexual Iranians via Islamic law hints at concrete ties between science and religion. The Islamic implementation of religious law (*fiqh*) regulates the health administration—leading to the ‘compliance of medicine’ as psychiatry units abide by Islamic principles.<sup>30</sup> The surfacing of transgender issues, and the government’s specific perception of sexuality that abides by an expectation of gender binary divisions is reflective of pre-revolutionary attitudes on sexuality. Before 1979, the man versus woman dichotomy ‘screened out’ other possibilities of gender, while ‘ignoring the interrelated transfigurations of sexuality’.<sup>31</sup> Leading up to the revolution, the regime began understanding the gender binary relationship through ‘sexual dimorphism’. Due to this terminology, both sexes have contrasting characteristics besides functions based on biological essentialism—such as reproduction. Much of the regime’s succinct understanding of sexuality stemmed from behavioral psychology’s timeless, archaic, and reductive binary-gender rationale. In effect, the Islamic Republic of Iran vehicularized this theory to regulate gender roles practiced by the public. As the cooperation between the behavioral sciences, psychology units, and the government grew potent after the revolution, Islamic jurisprudence was utilized to understand the status of trans individuals.

Power to define Islamic doctrine and religious principles on trans rights in Iran can be understood through the interconnectedness of religion, tradition, medicine, and behavioral psychology. Those who hold autonomy in exercising authoritative power interpret religious doctrine for medical institutions. With the first Congress of Compliance held in the mid-nineties to focus on reasonings of transgender and sexual matters, psychologist Mustafa Najafi asked congress if a transgender person living as their new identity could adapt to a new lifestyle—after considering cultural tradition. Congress drew an answer from Khomeini’s treatise permitting sex-reassignment surgeries. The issue of how patients undergoing surgery would continue their daily lives requires an abidance to practices of Islamic jurisprudence (*fiqh*). As clerical jurisprudence of Islamic law assigns and constructs specific patriarchal duties via cultural assumptions, the possibility for an equal construction of gender rights to be established within the Islamic Republic is finite.<sup>32</sup> Psychologists such as Najafi illustrate how

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<sup>29</sup>Najmabadi, *Professing selves: Transsexuality and same-sex desire in contemporary Iran*, 39.

<sup>30</sup> Najmabadi, “Verdicts of Science, Rulings of Faith: Transgender/Sexuality in Contemporary Iran,” 12.

<sup>31</sup>Najmabadi, *Women with mustaches and men without beards*, 3.

<sup>32</sup>Mir-Hosseini, “The Construction of Gender in Islamic Legal Thought and Strategies for Reform,” 2.

behavioral sciences and psychology units turn to dominant religious authorities for advice regarding trans rights. Ultimately, Islamic law in Iran validates the use of medicalization over trans bodies through life-altering sex-change surgery, while in effect auguring a heteronormative society.

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