

CRIPPLING MASCULINITY

Queerness and Disability in U.S. Military Culture, 1800–1945

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In the spring of 1945 Walter Reed Army Hospital in Washington, D.C., sponsored a series of weekly revues, featuring big band orchestras and singers, comic vignettes, and other vaudevillian residue from wartime USO shows, to entertain veterans undergoing rehabilitation in nearby hospitals and convalescent centers. Among the most popular and memorable that season were performances by a group of veteran amputees from a convalescent center in Forest Glen, Maryland, who called themselves the Amputettes.¹ Dubbed the "high-kickers on artificial legs," the Amputettes apparently did dance routines with Rockette-like precision in Carmen Miranda–inspired outfits or in full "Gay 90s" regalia (figs. 1–2).

Forest Glen, an elite nineteenth-century women's finishing school converted to a hospital by the armed forces during World War II, would have been an ideal setting for the rehabilitating Amputettes. They reportedly "stole the show" at Walter Reed, while their antics decidedly revealed "what rehabilitation can do." The pleasure that servicemen and veterans experienced at the sight of the Amputettes must have derived not simply from seeing the men in drag (an image not incompatible with military service) but from seeing artificial limbs, usually associated with the solemnity of rehabilitation, peeking out incongruously from beneath billowy skirts associated with the frivolity of cross-dressing camp.

The frequency with which cross-dressing has entertained homosocial communities underscores a long-standing and visible component of queer activity among putatively heterosexual men.² Typically, such traditions have taken root at elite institutions such as Harvard University's Hasty Pudding Club or the University of Pennsylvania's Mask and Wig Club. But they are visible even in less privileged circles, such as drag balls and fraternity parties, as well as in supposedly homophobic institutions such as the U.S. military. For example, in the journals of

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High-kickers on artificial legs are these six Forest Gien convalescents. Dubbed the "Amputettes," they stole the show at a recent Walter Reed performance. Pvt. Edward Van Arsdale, of the Bronx, N. Y. (third from right), who lost both legs at Anzio, conceived the can-can routine. Lip-sticked "beauties" with him are, left to right, Pvt. Earl Thomas, Pvt. Victor Thomas, Pvt. Edward Bertash, Pvt. Arsdale, Pvt, Victor Vallera and Corp. Morene Cairo. Their antics reveal what rehabilitation can do.

Figures 1–2. Amputettes in performance in the Washington, D.C., metropolitan area, February or March 1945. Undated newspaper clipping from the Donald Canham Collection, Otis Historical Archives, Armed Forces Institute of Pathology, Walter Reed Army Medical Center, Washington, D.C.

George Washington DeLong, lieutenant commander of a military expedition to the Arctic Circle between 1879 and 1881, one finds several entries describing one of DeLong's officers as a "young lady, in an after-piece" and another shipmate wearing a dress "made out of our calico . . . [who] found means to construct a beautiful wig of long blonde hair." DeLong comments without irony or explication that one seaman "transformed himself into a very comely young English miss, quite calm and self-possessed. A feature of the evening was presenting each guest, on entering, with a little buttonhole bouquet of colored paper leaves."³



Whether these displays and affectations represented same-sex eroticism or merely the conventions of late-nineteenth- and early-twentieth-century popular culture, such as fancy-dress balls or *tableaux vivants*, is difficult to ascertain.⁴ How, then, might we begin to unravel the multiple implications of veteran amputees performing in Carmen Miranda drag for soldiers at U.S. military hospitals in the mid-twentieth century? Amputees, especially veterans of war, were rarely overt objects of humor, let alone of self-effacing ridicule, in the nationalistic culture of a country at war.⁵

The Amputettes have much to tell us about social constructions of disability, masculinity, and military culture in the mid-1940s. Their performances included, presumably, self-mocking attempts to engage with and displace the awkwardness associated with amputation and with rehabilitation in general. In figures 1 and 2 we see the deliciously camp personas of the Amputettes, especially their exaggerated gestures and facial expressions. Theirs is an assured, if not calm, pride of performance. Yet the congenial newspaper descriptions are refreshingly lacking in irony and disapprobation, contrary to the claims of most contemporary historians of gender who insist on understanding the 1940s as an era of

heightened male insecurity about appropriate gender roles and normative sexual behaviors.⁶ Neither the photographs nor the descriptions of the Amputettes reveal these insecurities. In addition, their performances, like those by DeLong's Victorian sailors, do not seem all that different from those by gay soldiers and sailors during World War II. During wartime both straight and gay soldiers, to the affirming cheers of their straight comrades, actively participated in drag shows, at which they were authorized to push the envelope of conduct permissible under the rubric of heterosexually protected behavior.⁷

Annie Woodhouse writes that "outside of the closely demarcated boundaries of the drag act or the fancy-dress party, men cannot appear in any item of women's clothing without immediate loss of the superior status attached to the male and [without suffering] the full imposition of ridicule and censure."8 Yet the success of the Amputettes' performances *depended* on their ability to perform in drag. It fulfilled an image of competence without intentional irony and served as proof that they were making progress in their rehabilitation; it showed how far they had moved toward self-sufficiency. While their prosthetic legs made possible some semblance of able-bodied activity, they also enabled the Amputettes to engage safely in what some might have perceived as queer behavior. Such behavior, far from being the antithesis of military culture, represented a fluid, morphological category within military culture that the institution's private codes of behavior reinforced. Like the traumatizing ceremonies that constitute so much of normative homosociality between men-from fraternity hazing rituals, to the homoerotic violence of professional football and wrestling, to the physical and psychological humiliation endured by military recruits during basic training—the Amputettes' performances made visible the mechanisms by which certain queer acts gain tacit heterosexual approval. By watching the Amputettes in action, perhaps the convalescent veterans and their supporters shared a collective moment in which they witnessed the things they most loathed and the things they most loved, though not necessarily in that order.

This essay examines how military culture in the United States has exploited and reinforced conceptions of both heteronormative masculinity and ablebodiedness from the late eighteenth century through the mid-1940s, when the Amputettes first performed. By looking at the rise of certain types of bodies deemed worthy of military investment, we can see how normative concepts of male behavior and able-bodied activity form the invisible threadwork that protects homosocial institutions like the military. This essay assumes that individuals like the Amputettes do not possess either fixed gay or straight identities but instead represent men who are inherently open to the dynamic potential of queer practices. Rather than read their performances as evidence of gay men in the military, this essay proposes that their antics raised a host of confounding (and conflicting) questions about the relationship between the unspoken rules of heteronormative behavior and the material evidence of disability.

To understand the parallel stigmas of queerness and disability in the military, this essay pays scrupulous attention to the history of diagnostic techniques exploited by institutions of power to distinguish queer or disabled individuals from normal ones. By examining recruitment manuals, military reports, case studies, and popular discourses of red-blooded American manhood, this essay tries to chart the material basis of military masculinity rather than simply invoke ideologies of difference and normalization as a set of diffuse, ill-defined power relations. The study of diagnostic approaches and procedures permits us to see how the distinctions used to create categories of normativity and able-bodiedness are as much contrivances of culture as they are exploitations of medical authority.⁹ Such issues are tied inexorably to the U.S. military's image of itself as an institution of normative values and bodies.¹⁰

The story of the Amputettes also demonstrates clearly how disability studies and queer studies can overlap, extending recent scholarship that emphasizes the social-constructionist basis of identity as well as a continuum of nonnormative bodies and sexualities. The exploitation of normalcy by institutions like the military shows us how categories like "queer" and "disabled" share similar features, as though different notions of human identity were singular or reducible to a single social category (disabled, black, female, etc.). Many influential disability studies scholars, such as Douglas C. Baynton, Lennard J. Davis, Simi Linton, Paul Longmore, and Rosemarie Garland-Thomson, argue precisely this point: the experience-to say nothing of the representation-of disability, like that of gender or race or sexuality, is indeed as socially constructed as any other lived form of social experience.¹¹ This is not to deny, through a reductive dematerialization of the human body, that disability exists or has a history; indeed, it has many histories, just as gender and sexuality have. But in the same way that we cannot project the term gay into the distant (or even the recent) past without qualifying the language we use, we cannot project *disabled* or *able-bodied* into the past without acknowledging that we can only render the historical tenets of normalization tendentiously. Like their counterparts in queer studies, scholars in disability studies should strive to lay bare the historical and cultural roots of such constitutive concepts as "normal" and "healthy" as they seek to destignatize the conceptual differences implied by those terms.

Furthermore, in the same way that the concept of queerness disrupts assumptions that there is a static and historically defined thing called lesbian and gay history, so the concept of disability disrupts assumptions that what constitutes ability or disability, or one's experience of them, is static and historically defined. Eve Kosofsky Sedgwick, for example, discusses the disruptive power of queerness, in both its positive and its negative forms, as a Jewish woman who sees the entire edifice of normalcy configured in the concept of Christmas. Mourning the dominant culture's suppression and/or co-optation of anything that does not fit the Christmas paradigm, Sedgwick observes that "they all-religion, state, capital, ideology, domesticity, the discourses of power and legitimacy—line up with each other so neatly once a year, and the monolith so created is a thing one can come to view with unhappy eyes."¹² Henri-Jacques Stiker makes a comparable claim by establishing a relationship between the demands of social conformity and those of rehabilitation medicine: "Rehabilitation marks the appearance of a culture that attempts to complete the act of identification, of making identical. This act will cause the disabled to disappear and with them all that is lacking, in order to assimilate them, drown them, dissolve them in the greater and single social whole."13 In this sense, theorists and activists in both queer studies and disability studies advocate a scholarly and political confrontation with normative ideas and institutions that exclude individuals according to their physical, sexual, or ideological expressions of selfhood.

Over the past two centuries the ideal male military body has represented the suppression, or disavowal, of anything that does not comport with hyperpatriotism, military values, rehabilitation protocols, or conventional heterosexual masculinity. These ideals often have had the propensity, in Sedgwick's language, to "line up" and become an impenetrable web of rationalized institutional activity. Their very impenetrability has profound implications for our understanding of the queer and/or disabled body as a locus of social meaning against which to measure the norms dictated by military culture.

The Amputettes were undoubtedly a product of their era. Their appearance in the mid-1940s, however, also marked a departure from earlier conceptions of physical normalcy and able-bodiedness. During the nineteenth and twentieth centuries, military doctors turned away recruits if their physical or psychological makeup contradicted the ideal of the soldier's body, which was—and remains—a constantly shifting category of embodied experience. The inspection and recruitment process relied on fantasies and fears about race and nation as much as it relied on fears of nonnormative physical bodies and inappropriate gendered behaviors to maintain its own integrity as an institution.

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With the Amputettes, however, what one might have expected to be the paradigmatic case of inappropriate military behavior became instead a personal and institutional affirmation of the perquisites of heterosexual masculinity and the championing of the discourses of rehabilitation. The patriotic fervor of rehabilitation during World War II lined up neatly with the popular appeal of the Amputettes' performances, allowing soldiers and therapists alike to absorb their putatively queer content. To understand this shift, from the demonization of queer bodies of any kind to reverence for a particular kind of queer body, we need to understand how the military has continuously refashioned its own definitions of queerness so as to position itself in relation to political, economic, and cultural expressions of heteronormative masculinity. In the culture of the 1940s, when rehabilitation became a nationalistic enterprise, these disabled cross-dressers were just what the doctor ordered.

Inspecting the Troops

Since the eighteenth century draft officers in the U.S. military who meant to build a well-trained military force sought the advice of medical professionals at inspections of potential recruits. In turn, the military became sensitive to those who evidenced untenable physical and mental differences, from flat feet to debilitating illnesses to antisocial tendencies to, of course, homosexuality. Initially, disability could be rooted out by sight, with relative ease. Beginning in the early nineteenth century, however, when scientific medicine underwent rapid development in methods and applications, recruitment committees devised new diagnostic procedures to divide the normal from those perceived as abnormal. This period also gave rise to the pseudosciences, such as phrenology, anthropometry, and eugenics, which dominated American and European science in the late nineteenth and early twentieth centuries.

Taxonomies of physical difference became, in effect, strategies used by the military to rationalize assumptions about queerness and disability that prohibited the so-called unfit from military service. By World War I the military had begun to apply the tools of psychiatry and anthropology to root out other forms of unfitness, including perceived feminine physical features that were not only essentialized as unfit but, in many cases, condemned as un-American. The influence of psychiatry on twentieth-century military culture cannot be overestimated, especially because of its ability to provide conceptual models for delineating those behaviors and activities in which healthy recruits should properly engage.¹⁴

In the late eighteenth century George Keatinge, a retired army officer resid-

ing in Baltimore, published an instructional manual to teach young men eager to join the new nation's volunteer army "all that is requisite . . . for a private soldier, from his admission till he is perfect for a Review . . . with a full explanation of the Manual Exercise . . . laid down in so simple a manner, that, without any other direction, a Recruit can perfect himself."15 This passage from Keatinge's 1794 manual is not much different from Michel Foucault's description of the "docile bodies" of institutionalized correction, which clarified the boundaries of the ideal French soldier's public identity. Quoting a French military ordinance of 1764, Foucault observes that "by the late eighteenth century, the soldier has become something that can be made; out of a formless clay, an inapt body, the machine required can be constructed; posture is gradually corrected; a calculated constraint runs slowly through each part of the body, mastering it, making it pliable, ready at all times, turning silently into the automatism of habit; in short, one has 'got rid of the peasant' and given him 'the air of a soldier.'"¹⁶ In Keatinge's own estimation of the attributes of the perfect soldier, the presentation of self through dexterous displays of competence-cleaning, loading, and firing a rifle; achieving precise marksmanship; marching in line; wearing a respectable uniform-fit the early republican mythos that claimed that Americans could modify their appearances so that the basest street urchin could become a civilized man by professionalizing himself for military duty.

By the early nineteenth century, however, the early republican notion of mutable appearance had been replaced by a precarious middle-class ideology centered on the "cult of sincerity."¹⁷ In an urban, commercial world of increasingly depersonalized social relations, innate goodness or its appearance was best preserved by the performance of simplicity and integrity, not by constant change; to alter or affect one's appearance was less a method of improving it than a strategy for deceiving one's social betters. In 1840 Thomas Henderson, an assistant army surgeon and a professor of medicine at Columbia College in Washington, D.C., published a manual for the inspection and selection of recruits that was predicated on the notion of a sincere, naturally superior male body. Henderson recommended that officers be

particularly attentive in the examination of recruits, and [cause] each recruit to be stripped of all his clothes, and to move about and exercise his limbs in their presence, in order to ascertain whether he has the free use of them; that his chest is ample; that his hearing, vision and speech are perfect; that he has no tumours, ulcerated or extensively cicatrized legs; rupture, chronic cutaneous [infection], or other disorder or infirmity, mental or physical, which may render him unfit for the active duties of a soldier, or be the means of introducing disease into the army; and they will ascertain, as far as practicable, whether the recruit is an habitual drunkard, or subject to convulsions of any kind, or has received any contusions or wounds of the head, which may produce occasional insanity. With any of these defects the man will be rejected as unfit for service.¹⁸

Henderson's criteria for military inspection reinforced the idea that verifiable evidence of physical efficiency and masculine competence was marked on the ablebodied recruit. He described the perfect recruit, moreover, in terms that have a certain sexual impetus: "A tolerably just proportion between the trunk and different members of the body; a countenance expressive of health, with a lively eye; skin firm and elastic; lips red; teeth in good condition; voice strong; chest capacious and well formed; belly lank; limbs muscular; feet arched and of a moderate length; hands rather large than small" (19–20). In a diagnostic model of medical health based solely on confirmed appearances, the mandate for a solid recruit barely disguises the titillating quality of this description of a beautiful male body. Henderson's evocation of a soldier with "firm" skin, "red" lips, "capacious" chest, and "lank" belly might well be taken from the leaves of Walt Whitman's diary.

In the milieu of early-nineteenth-century medical inspections, male competence for military service was defined both by the examiners, who were fully vested in the logic of the examination process, and by the recruits themselves, through whose naked features able-bodiedness and male beauty were combined. "Serving" in the military, then, clearly signified not only being a male specimen of an idealized type, free of physical imperfection, but being able to evaluate the worthiness of another superior male specimen. The examination process attempted to normalize even as it tried to erase the erotic. This was the very logic later used to judge popular cultural events such as beauty pageants and beautiful-baby contests. The central difference between beauty contests and recruitment examinations is that, while the beauty of young women and infants might be ascertained by male judges openly and with confidence, the physiques of men must be appraised in a sophisticated diagnostic vocabulary, under the rules of an arcane social institution, so that the male inspectors might measure the aesthetic competence of these other men without themselves being stigmatized.

The tacit understanding in Henderson's manual was that the perfect soldier embodied the obvious correlation between superior physique and superior morale: "Let the Surgeon reflect for a moment on what is required of a soldier. *Physical energy*, *sound mind*, *quick senses*, and *suitable stature*, are indispensable. From

these elements, and from such alone, discipline elicits or directs *moral courage*, that other requisite for the perfect soldier."¹⁹ Henderson believed that if "moral courage" was generated and maintained by the physical body, then only ablebodied individuals could achieve moral perfection. The most highly visible forms of physical beauty enabled the surgeon to use external criteria to gauge the recruit by the rubric of the perfect soldier, which implied something about male beauty and able-bodied normalcy in addition to the constitution and endurance of a privileged class of men. This was especially true of recruits from "Native American" stock, the epithet with which many New Englanders identified themselves as late as the 1930s.²⁰

In this sense, the sexualized language used by recruitment officers and the racialized language used by auctioneers have a striking resonance with each other. The erotics of inspection run parallel with those of capitalism and the racist ideology that traditionally has supported such love affairs. Inspecting goods, like inspecting troops, enables one to scrutinize an object—a farm animal, an Afro-Caribbean slave, a young handsome soldier—according to a set of fetishized characteristics organized around the erotic impulses of consumer desire. Henderson's model of physical inspection was necessary, he argued, since "subjects for enlistment are, particularly in time of peace, very often drawn from an inferior class of men, too frequently the intemperate, indolent, if not the vicious... the proportion of foreigners in our ranks is very great ... [and] every variety of *physique* and *morale* is presented for examination."²¹

When Henderson was writing, a disproportionate number of the "foreigners in our ranks" would have been recent Irish or Italian arrivals.²² After the 1860s, when waves of immigrants began to come from eastern and southern Europe, Central America, and Asia, recruitment strategies were increasingly dominated by an anti-immigrant worldview that scrutinized foreign bodies with the penetrating gaze of an imperial power. By the latter part of the nineteenth century the politics of racial identification and subordination in the United States had become intertwined with the military's recruitment process. In the meantime, between established republican notions of the soldier as entrepreneur and emerging notions of the soldier as Anglo-American defender of nationhood, Henderson's criteria for rejection from military service were governed by observations of disability or difference. Such difference included "unsound health, scrofula and its marks, muscular tenuity, diseases of the eye, loss of teeth, deformed spine, narrow chest, defective condition of the extremities, hernia and relaxed abdominal rings, varicose veins of the chord and legs, ulcers and cicatrices of ulcers, flat feet, marks of corporal punishment."23

Henderson also cataloged a series of bizarre, often dangerous attempts by soldiers to *feign* disability by self-mutilation so as to earn their discharge papers. One soldier induced his own blindness by putting silver nitrate on his cornea; another overstimulated his heart by inserting garlic into his rectum; a third, more crafty, simulated ulcers on his leg by vigorously rubbing sand on it.²⁴ As these examples show, Henderson understood disability as deviation from normal internal functioning as well as from normal external appearance.

The injuries that many recruits and active soldiers and sailors thus inflicted on themselves tell us much about social constructions of disability in the early nineteenth century. For some soldiers, painful rituals may have produced disability, but those who underwent a full inspection were sometimes subjected to assumptions concerning physical difference that approached the medieval. Henderson described, for instance, a "man with a crooked back [who] was placed in a cask of warm water, and water was gradually added so as, ostensibly, to give him the option to drown or to straiten [*sic*] his back. The latter being preferred and the man placing himself erect in the cask, he was restored to the ranks as an impostor."²⁵ Like supposed witches of earlier centuries, the "impostor" had been forced to submit to a trial by water and to demonstrate his own guilt by surfacing, as it were. Having flushed him out and expelled him, the medical examiner could join triumphantly the ranks of the savvy nineteenth-century social observers who had learned the art of reading people's physical characteristics and could unmask a confidence man whose only goal was to fool the public.²⁶

Using diagnostic technologies beyond the human senses, physicians and recruitment committees could discover whether or not a recruit had concocted a ruse to excuse himself from military service. As Henderson suggested, however, the goal of military physicians was to search out not only the authentically disabled body but men who might exploit the mere appearance of disability. These men, it was thought, constituted an inferior grade of American manhood. Such a narrow understanding of the physical characteristics of American masculinity remained intact for decades. Yet there is nothing simplistic about the definitions of masculinity embodied in either sincere or duplicitous recruits. Long before the Civil War divided Americans of different political loyalties, men seeking to be discharged from military service or to avoid it altogether had developed a queer arsenal of tricks that called into question the normative parameters of the male body under the medical gaze.

New Recruits, New Values

By the time the Civil War began in 1861, the criteria of able-bodiedness for military service had changed. The U.S. War Department's new surveillance protocol, developed for Union soldiers, was expressed both by increasingly populist notions of patriotic duty and by the codification of physical inspection methods. The War Department initially recruited

any free white male person above the age of eighteen and under thirty five years, being at least five feet three inches high, effective, able-bodied, sober, free from disease, of good character and habits, and with a competent knowledge of the English language. . . . The board will state in the report [i.e., the present document] whether the disability, or other cause of rejection, existed before his enlistment; and whether, with *proper care and examination*, it might not have been discovered.²⁷

From these characteristics, one may surmise how the concept of unconditional physical health, without duplicity, was concomitant with patriotism and moral dedication to the Union. The South having seceded, a Northern army composed of healthy, free white men of good character would underscore, for any Northerners in doubt, the need to reestablish the egalitarian principles on which the country had been founded. The converse must then also be true: disability or disfigurement, particularly if it derived from duplicity or concealment, was concomitant with a failure to perform one's civic or national duty.

The moral imperative of the Federal military objective, to restore the Union, indiscriminately collapsed together a range of questionable physical disabilities and social stigmas. A quarterly recruiting report from 1862, for example, gave such reasons for rejecting recruits as "under size, over age, moral disability, appearance of intemperance, mal-formation, unsound constitution, mental disability, impaired vision, deafness, rupture, varicose veins, brand of letter D [for 'deserter'], extreme ignorance, married."²⁸ This range of bodily conditions assumed that preexisting disabilities (including both "moral" and "mental" ones) prevented one from participating fully in military activity, especially combat, as many of those ultimately maimed or killed during the war discovered soon enough. Interestingly, being married was enough for even the most perfect recruit to be barred from military service—a poignant, however inadvertent, redefinition of marriage, that most sacred of heterosexual institutions, as a kind of social disability.

Disability acquired on the battlefield, however, was another matter altogether. For many veterans of the Civil War, the amputation stump, the artificial

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limb, or any other overt physical evidence of injury became shorthand for military service. In certain ways, disability became part of a uniform worn by both participants in and spectators of the brutalities of war. Medical photography, and portrait photography more broadly, helped transform the popular image of soldiering and military culture in general. The material evidence of physical wounds blurred with tacit forms of democratic participation and sacrifice.²⁹ Throughout the nineteenth and well into the twentieth century, medical photographers developed an increasingly sophisticated lexicon of poses for representing able-bodied and disabled soldiers and veterans. This was especially true immediately after the Civil War, when viewers might have read the images of Confederate and Union amputees sitting graciously for photographs as rhetorical expressions of philosophical principle distilled into visual form.³⁰

To an extent, photographic representations of amputation during the 1860s and 1870s symbolized the ascent of modernity as much as, if not more than, the accidents and warfare responsible for such injuries.³¹ What, after all, could be a greater expression of anomie under industrial capitalism than the worker or soldier who, after losing his or her arm or leg, gets a replacement fabricated of synthetic materials? And what could be more symbolic of the recuperative processes of modern rehabilitation than a photographic record of all those wounded on the battlefield?

Even so, these images of military uniforms and military bodies have a queer resonance to them. By being no longer whole, those veterans whose bodies manifested physical damage—prima facie evidence—were men for whom disability suggested a certain level of incompetence. Yet Civil War medical photographs were sophisticated enough to capture the brutality of amputation and at the same time preserve the genteel conventions of Victorian portrait photography.³² This must explain why in such photographs the male body is often regarded both as disabled spectacle and as erotic object. Photographs of handsome young men with horrific flesh wounds, radical amputations, or artificial limbs were material reflections of the photographer's desire to recuperate the soldiers' lost masculinity. Like those examined by physicians, those forced to undergo the humiliating rituals of medical photography did so with the implicit understanding that such objective techniques of surveillance might neutralize the emasculating potential of such cold penetrations into the intimate spaces of the male body.

The technology that enabled photography to become an official diagnostic science performed one more important function for military administrators: it helped maintain the cultural distinction between the "tragically" disabled and the congenitally "deformed." This delineation relied in part on the difference between

disability induced by modern technology or warfare and disability induced by heredity or illness, a premodern model of judging disabled bodies by invoking the medieval "monstrous birth."³³ The former kind of disability confirms one's service to the modern state, to industrial capitalism, to warfare: it helps the veteran's body preserve patriotic values and masculinity. The latter kind of disability marks one's rejection from competent service to society: it confirms that the disabled body is hopelessly queer and inimical to patriotic value or normative manly competence and productivity. In the industrial and market-driven world of the mid–nineteenth century, an unproductive body without veteran status occupied a conspicuously low rung on the social ladder. Disabled veterans and amputees constituted a superior category, reminding us that hierarchies of disability are constructed even *within* categories of the disabled.

Divide and Conquer

By the early twentieth century the military had developed new analytic tools to measure the physical and social viability of potential soldiers. The army, for example, institutionalized the search for sexual deviance as part of the process of distinguishing the bodies of normal soldiers from those of their abnormal counterparts. During the draft for the Great War in 1917, gloved physicians tested recruits' sphincter muscles to see if they had lost the proper resistance due to unnatural activities. Furthermore, trained examiners applied the tools of the emerging academic discipline of anthropology to determine the fitness of potential soldiers, marking a huge methodological shift from the ways that medical treatises had exploited ideas about able-bodiedness. Henderson's 1840 manual, for example, made distinctions between urban and rural recruits, surmising that only the latter had the much-desired male body:

Certain pursuits in the country are particularly favorable to physical and moral developments so requisite for the soldier. . . . The hunter and tender of plows . . . have the spring of muscle, flexible joint, the certainty of step, the strength and keenness of sight and of hearing, that make the perfect soldier. . . . Men from mountain regions are firm, compact, hardy, have activity and enterprise, with the boldness of mind and valor, that constitute them natural soldiers.³⁴

The quaint nineteenth-century preference for rural types who were "firm, compact, [and] hardy" was no longer valid for educated military leaders, who operated under new intellectual and scientific principles of applied knowledge. By the early twentieth century the concept of "race," for example, was no longer used merely to designate national or ethnic origins but was used to distinguish superior from inferior national or ethnic groups. This process was deemed especially important as newly arrived European immigrants rushed to join the ranks of "white" ethnic stock. A wave of domestic and international migrations and subsequent legislative acts and judicial rulings, such as the Chinese Exclusion Act (1883), *Plessy v. Ferguson* (1896), and the National Origins Act (1924), circumscribed access to citizenship according to new definitions of national identity and ethnic affiliation. As Matthew Frye Jacobson has argued, "A pattern of racially based, Anglo-Saxonist exclusivity dominated the years from 1840 to the 1920s, whereas a pattern of Caucasian unity gradually took its place in the 1920s and after."³⁵

The shifting concepts of race and the rise of nativist politics exerted a powerful influence on military recruitment, as they did on all aspects of government activity. "Hardy" masculine types, like Teddy Roosevelt, held enormous allure for middle-class men and great promise, in their eyes, for the promotion of white civilization, but rural men, once the wellspring of American soldiery, were increasingly associated by urban reformers with disease, depravity, unhygienic living, and abject poverty.³⁶ Writers and advocates for the eugenics movement exploited extensive imagery of Appalachian families like the famous Jukes and Kallikaks to prove that disease, alcoholism, and pauperism were hereditary among rural Americans. Many recruits from the agricultural South could be discriminated against, just as urban men from the ranks of newly arrived immigrants (especially, during the Great War, those of German extraction) were antithetical to the national image of the ideal American soldier.

After the war ended in 1918, the War Department commissioned Charles B. Davenport and Albert G. Love, both famous for their intellectual leadership in the American eugenics movement, to mobilize data about racial and ethnic groups for future use. By measuring and comparing the physical characteristics of recent immigrants against those of old-stock Americans, they produced such notable manifestos of institutional surveillance as *Defects Found in Drafted Men* and *Army Anthropology*.³⁷ New, putatively neutral regimes of scientific measurement were used explicitly to demonstrate how the armed forces could privilege certain physical types over others for leadership positions, much as Binet intelligence tests were used to measure the psychological traits of suspect civilians, including defective children, juvenile delinquents, prostitutes, paupers, and adult criminals.³⁸ Such studies made vivid the distinctions between soldier material and officer material, the latter typically the exclusive purview of good "Native American" stock. Following Davenport's and Love's endorsements, social scientists working

for the U.S. military began to measure the physical and psychological characteristics of both able-bodied and defective recruits.

By the mid-twentieth century the social criteria for recruiting young soldiers were still defined by ideas that linked masculinity to racial hierarchies, but ideas about what constituted able-bodiedness had shifted dramatically. T. D. Stewart, a prominent Washington, D.C., anthropologist, contended in 1946 that studies of physique among recruits conducted during World War II demonstrated that "[physical] types with somewhat of a feminine body build could not achieve a high level of physical fitness. This information was useful in the selection of men for different military roles and might be more generally applied."39 Stewart's contention was based on two studies done during World War II of recruits and military officers, William Woods et al.'s Selection of Officer Candidates and Clark W. Heath's What People Are.⁴⁰ These studies in turn relied heavily on formulations put forth by William H. Sheldon, a Harvard University physical anthropologist who had introduced the concept of the somatotype in the 1930s. Somatotyping-the scientific study that measures one's physique as an accurate gauge of one's temperament and social standing, a neo-eugenic interpretation of anatomy as destiny-was created partly in response to fears that certain physical types (e.g., immigrants and the physically or mentally disabled) were polluting the human gene pool.

Sheldon identified three somatotypes with distinct physical characteristics: tall, thin, or wiry body types, or *ectomorphs*; short, heavy, or stocky body types, or *endomorphs*; and symmetrical, classically proportioned, naturally sculptured body types, or *mesomorphs*.⁴¹ This typology complemented and effectively articulated the military's own conception of physical competence (and its implied antithesis), much as the typologies used by contemporary psychiatrists and sexologists to diagnose the modern homosexual fleshed out their a priori conceptions of the scientific subject.⁴² In Stewart's view, for example, the endomorph's "feminine body build"—its soft, rounded hips, fleshy buttocks, and gynecomastia (breast tissue deposits)—did not exhibit the masculine character commensurate with a position of power. In fact, not only would the endomorph never attain officer status, but he also threatened the homosocial sphere of military activity. While ectomorphs were simply scrawny and undernourished, endomorphs were menaces to be rooted out and discharged.

The appearance of endomorphic men gave military doctors a means, they supposed, by which to read accurately a man's nascent and/or overt homosexual identity.⁴³ Since the paradigm of military masculinity honored virile male beauty but stigmatized the visible characteristics of the ostensible male homosexual, the endomorph embodied the recruit who, while competent to fight for his country, seemed too queer to represent the public face of military life. To codify military masculinity in the public imagination, the War Department depended on widely disseminated images of the mesomorph, the idealized type whose physical dimensions not only signaled male perfection but confirmed the link between ablebodiedness and heteronormative values.

The mesomorphic body was not, however, simply an invention of the twentieth century; it was a composite of all of the idealized masculine characteristics that someone like Henderson might have described a century earlier, only now it had been assembled under the auspices of social science's objectivity and the military bureaucracy's need for administrative coherence. If mesomorphs alone were officer material, then it followed that queer endomorphic bodies were akin to disabled bodies in that their mobility in the military needed to be curtailed, if they were not rejected outright. Yet the image of the hypermasculine mesomorph was not exclusively based on able-bodiedness. Disability and queerness were no longer necessarily linked, since a mesomorphic physique was proof of natural superiority, independent of one's relationship to disability.

Even before the ascendancy of Sheldon's somatotypes, for example, the conflation of disability and normative models of masculinity was common in the popular media. In the 1920s the graphic artist J. C. Levendecker transformed the handsome "Arrow Collar Man," whom he had created in 1905, into a veteran of World War I. The new Arrow Collar Man, a dashingly masculine character with a signature eye patch, was used to promote the dress shirt as a uniform for welldressed metropolitan working men who had returned from the war to participate in the prosperous pre-Depression economy. Despite his homoerotic allure, the Arrow Collar Man affirmed the quasi-military credentials that made him utterly respectable.⁴⁴ This suggests that by the 1930s the relationship prevalent in the military between disability and masculinity followed a new hierarchy of social values that preferred the disabled soldier who retained his heteronormative status as well as some form of physical competence that could be treated as another element of masculine bravado. Under a conceptual regime that privileged the physical attributes of confirmed masculinity as criteria for selecting recruits and nominating officers, one could represent the mesomorphic ideal even if disabled. A disabled mesomorph was still a mesomorph, no matter how he was sliced, and remained the scientific standard by which all military bodies were judged.

The relationship between disability and masculinity was reflected in mass culture as well. In films of the 1930s and 1940s, shady underworld figures including both ghoulish monsters and gangland killers, with their limps, burn scars, stumps, and menacing prosthetic hooks—coexisted naturally with roguish mesomorphic veterans, the brave blind, and millionaires in wheelchairs.⁴⁵ Of course, many injuries, regardless of the disabled man's rehabilitation status, were thought inappropriate for popular viewing, especially at the end of the 1930s,

when the stage was being set for another world war. The Hollywood screenwriter Dalton Trumbo's controversial best-seller about a faceless quadriplegic, *Johnny Got His Gun* (1939), for example, was a brutal antiwar allegory that many decried as unpatriotic during World War II. The book's subversive use of the amputee as a political icon was so powerful that as late as the 1950s the U.S. House Committee on Un-American Activities used it to help blacklist Trumbo during the McCarthy hearings against the "Hollywood Ten."⁴⁶

The rise of hyperpatriotism in the mass culture of the 1940s ensured the derision of images like those in Trumbo's book, for they not only emasculated but dehumanized the veteran's body to make a political statement. In the heyday of radio and the Hollywood studio system, images of disabled men, even villainous disabled men, preserved at least a modicum of heteronormative masculinity, whether through criminal behavior (surely proof of virility) or through triumphant feats of male competence. Indeed, the recurring image of the masculine veteran parallels that of the "spectacular disabled" in rehabilitation culture.⁴⁷

By the mid-1940s, then, two competing though overlapping ideologies of disability had emerged; both preved on the fear that normative versions of American masculinity were under attack. According to the first ideology, U.S. culture affirmed the military male body as competent, virile, and heterosexual. As Stewart's dismissive attitude toward the endomorph made clear, the feminization of the military was a potent anxiety among many in the armed forces. It seems no accident that the misogynist social commentary Generation of Vipers (1942), in which Philip Wylie coined the term *Momism* to describe the feminization of American men, was one of the first paperback books available to soldiers overseas during World War II.⁴⁸ Furthermore, institutional anxieties about soldiers who threatened the precepts of military masculinity encouraged the armed forces to keep statistics on soldiers excused from military service because of perceived homosexual behavior or otherwise unmasculine psychological or physiological traits. Although the professional focus on effeminate soldiers predated the war, it was consolidated in the public imagination after the 1948 publication of Alfred Kinsey's Sexual Behavior in the Human Male. To root the problem out, army psychologists who feared that one bad apple would spoil the barrel taunted new recruits by directing at them the effeminate mannerisms and code words thought to typify a vast homosexual conspiracy. The military also administered urine tests to determine which soldiers' bodies had appropriate levels of testosterone and rejected those with too much estrogen.49

The second competing ideology of disability also affirmed the disfigured veteran amputee as competent, virile, and heterosexual. Throughout the war, patri-

otic images of wounded soldiers convalescing or undergoing physical therapy occupied a semipermanent place in news reports, feature films, radio broadcasts, and newspapers. Among military and university researchers, rehabilitating the amputee's masculinity, along with his body, was an implicit goal that expressed the military's discomfort with physical weakness and vulnerability as well as its deepseated homophobia.

In the summer of 1944, for example, Americans were captivated by the story of Private Jimmy Wilson, the only survivor of a ten-person plane crash. After he was recovered forty-four hours later from the plane's wreckage, army doctors had no choice but to amputate his arms and legs. After Wilson had returned to his home in Starke, Florida, doctors outfitted him with prosthetic arms and legs, and he became a kind of poster boy for the plight of thousands of amputees who faced a life of unprecedented hardship as civilians. A campaign initiated by the *Philadel*phia Inquirer in 1945 raised over \$105,000 for Wilson, who pledged to use it to get married, buy a house, and study law under the newly signed GI Bill. Wilson's celebrity as a quadriplegic peaked when he posed with Bess Myerson, Miss America that year, in a brand-new Valiant, a car (whose name alone heralded Wilson's patriotic reception) that General Motors had designed specifically for above-ankle amputees.⁵⁰ The following year, war veteran Harold Russell portrayed Homer Parrish, the sensitive paraplegic, in William Wyler's Academy Award-winning film The Best Years of Our Lives (1946). Unlike the able-bodied actors in the film, Russell performs his real-life disability as a profound personal and psychic disturbance even as he copes valiantly with his loyal girlfriend and his two new split hooks, above-the-elbow prosthetic arms.⁵¹

Public appearances by the Amputettes at Walter Reed Army Hospital in 1945, like public appearances by Jimmy Wilson and Harold Russell, were designed to affirm these amputees not simply as normal men but as heteronormative men. The widespread veneration of such men encouraged many to endorse war mobilization—and its domestic concomitant during the Cold War, civil defense training—as a method of maintaining the standards of heteronormative masculinity in the general population. Writing in 1955, the physician George W. Henry saw in the prosperity of civilian life the degradation of masculinity and advocated the salutary effects of military training to tackle the problem of effeminacy among American men:

The hazard in a democratic country of being lulled by an apparent state of peace has been amply demonstrated in our lack of preparedness for the two world wars.... Lack of discipline, passivity, and a desire for comfort

contribute to a state of lethargy in which the nation becomes virtually defenseless. Men are the chief victims of this slump; they are revived only under the stress of another national emergency—the need to fight in order to survive. Then men again become virile, belligerent, and heroic.⁵²

The postwar emphasis on heteronormative masculinity, according to which, for Henry, heroism followed from virility, had profound repercussions for representations of veteran amputees as well. After World War II the rarified realm of medical photography and the populist appeal of mass culture seized on images of disabled male veterans and made them both familiar and sexualized. Photographers at Walter Reed Army Hospital, for example, produced hundreds of images of male physicians, engineers, and prosthetists working with male amputees, who were often naked. By conventional standards, such photographs are unlikely to be considered erotic. Yet these photographs, which mirror the image of the man with the eye patch in Leyendecker's Arrow Collar advertisements from earlier in the century, remain provocative, especially since the style of photography that these medical images exemplify has remarkable overlap with other types of objectified male images generated during this era. A photograph taken in March 1952, for example, was meant to capture the veteran amputee participating in a familiar, ablebodied activity: lighting and enjoying a cigarette (fig. 3). As usual, the central issue was not the vocational or domestic rehabilitation of the veteran but the preservation of his masculinity. The dramatic lighting and crisp graduated shapes used to capture the amputee's coy affectation are techniques of representing the body that seem descended from fashion and celebrity photographers like Cecil Beaton and George Platt Lynes.

The brash gesture and brazen (though vulnerable) gaze of the handsome young veteran, however, are also not unlike those of bodybuilders and underwear models pictured in beefcake magazines of the 1950s and early 1960s. Indeed, the image of a handsome soldier lighting a cigarette may have recalled, for many, the suggestiveness of the query "Got a light?" within gay urban culture during the early twentieth century.⁵³ Such gestures and glances, in the hands of period filmmakers like Kenneth Anger and Andy Warhol, knowingly blurred (if not erased) the lines between heterosexual bravado and gay iconography. After all, nothing could completely prevent a growing gay constituency from drawing associations between the queer and the hypermasculine, as mined by graphic artists like Tom of Finland, which are memorialized in the sartorial excesses of military fatigues, police uniforms, undershirts, jackboots, bomber jackets, Ray-Ban sunglasses, and other accoutrements of power.⁵⁴

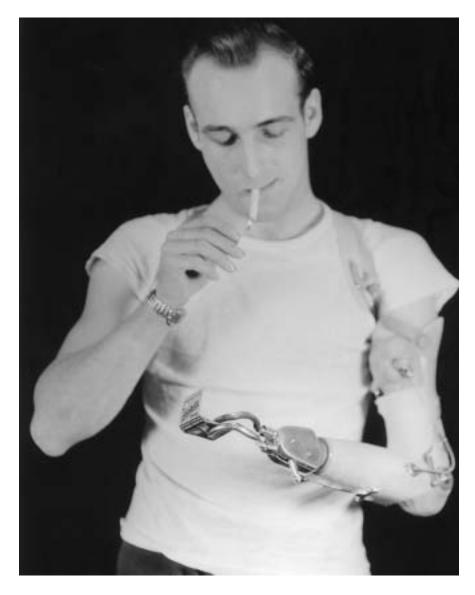


Figure 3. Veteran amputee, looking not unlike James Dean, lighting and enjoying a cigarette, March 1952. From the photographic collections of the Otis Historical Archives

The popularity of such military narratives in pornography aimed at specialized audiences, such as amputee fetish pornography, is not likely to abate any time soon. Indeed, the collision of disability themes with anxieties about male sexuality continues to produce fetishized views of amputation and prosthetics in popular films, from cyberpunk erotica like David Cronenberg's *Crash* (1996) to patriotic gore like George Tillman Jr.'s *Men of Honor* (2000). What, exactly, is it

about the loss or replacement of male body parts that expresses multiple, often contradictory cultural reverberations: Male competence or incompetence? Wounds of honor or wounds of shame? Heterosexual integrity or homosexual panic? Honorable or dishonorable discharge?

Patriotism Can Be a Drag

By historicizing the intersections of disability and queerness in military culture, we come to understand that queerness - or, perhaps more explicitly, the *fear* of queerness-is often not about sexuality at all but about a continuum of physical difference. We also see why the stigma of difference demarcated by disability in the military does not cover the same discursive or ideological ground as the stigma of difference demarcated by homosexuality. Being queer and being disabled may have emerged as equivalent concerns for recruitment officers, but queerness and disability diverged after the military sought to bestow on veterans the privileges of heteronormative masculinity. Since the mid-nineteenth century, the queer body of the wounded soldier or veteran amputee has maintained a high priority and status in civilian culture. The military's continued emphasis on displaced homoeroticism—as evident in recruitment techniques and the rituals of basic training—is, arguably, the only way that the government can accept the contingencies of death or disability among its citizenry. Admiration for the ideal patriot and his body can go hand in hand, until death do them part. When the reverence for death or disability is combined with evidence of queer desire, however, the sentimental appeal or rhetorical potential of the admixture demands another explanation. Under the repressive regimes of military ideology, an openly queer soldier would make the otherwise displaced homoeroticism palpable, and thus something to be rooted out.

The paradoxical relationship between explicit hyperpatriotism and implicit homoeroticism also demands that we try to understand queerness and disability, both separately and interdependently, within the parameters of institutionalized citizenship. In 1955 Henry argued that "at the beginning of [World War II], homosexuality was frankly offered as an excuse for deferment. Toward the end, a larger proportion of homosexuals concealed their homosexuality, and some who had been deferred sought induction because they were becoming conspicuous in civilian life and wished to join their friends who were in service."⁵⁵ Henry's contention that military recruits had successfully "concealed their homosexuality" implies that they had demonstrated, in effect, the absence of physical evidence that marked them as queer.

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Just as the military institution's success depends on the dual displacements of homoeroticism and disability, the state's definition of the ultimate citizen depends on the ideal of the able-bodied soldier as its representative in the public sphere. The techniques of concealment described by Henry unwittingly refuted Sheldon's somatotyping and enabled recruits not only to pursue their desires but to form a military identity that was both overtly patriotic and covertly queer. The modern political discourse inspired by "Don't ask, don't tell" seems, in this sense, to disavow the evidence of homosexuality in military culture, but it also conjures the image of a soldier who cannot even affirm the qualities of able-bodiedness in other men without drawing attention to himself and his own sexual orientation.⁵⁶ In the end, this is what makes the parallel between disability and queerness in a military context so conspicuously homophobic: it is a poignant barometer of our social progress or lack thereof. It gives us a way to understand what kinds of bodies constitute ideal citizens both in military culture and in their civilian manifestations.⁵⁷ As the Amputettes demonstrated so well, expressions of patriotism and queerness in the mid-twentieth century were neither mutually exclusive nor contradictory; in the early twenty-first century they have been officially determined to be incompatible.

Men like the Amputettes, as torchbearers for the arcane rituals of male heterosexuality, entered into a visible male homosocial community that not only enjoyed public drag performances but solidly normalized cross-dressing within the patriotic parameters of rehabilitation culture. The point of the Amputettes' act was to reinforce these men's normal status rather than expose their putative queerness, which would have stemmed more from being unable to dance in formation than from wearing women's clothes. The Amputettes' act was another able-bodied task that proved their masculine competence. The prosthetic legs with which they performed were not simply artifacts of military or scientific ideologies of normalization and able-bodiedness but, in effect, cultural tools that *produced* ideologies of normalization and able-bodiedness, the homoerotic implications of the prosthesis as a "third leg" notwithstanding.

Certainly, one can argue that the Amputettes' performances embodied a sublimated sexual insecurity or inferiority that their amputations made visible. In photographs of the Amputettes, the appearance of their prostheses beneath their skirts exposed the soldier's tenuous relationship to the heteronormative masculinity that defines such drag. Yet the fine line separating the Amputettes' disability from their attempts at able-bodied activity was a far more potent marker of their queerness than their desire or willingness to dress up and perform in drag. For these men, being queer was marked not merely by dressing in women's clothes but

by putatively failing to fulfill the social roles expected of them as soldiers, employees, boyfriends, husbands, fathers, and citizens.

However we finally interpret the Amputettes, we must not forget the historical environment in which their appearances took place. Not long after they had high-kicked up a storm at military hospitals around suburban Maryland and Washington, D.C., a U.S. Senate Subcommittee on the other side of the District met to confirm the alleged infiltration of queers into the hallowed halls of the federal government and the armed forces.⁵⁸ Following its investigation, the Senate published a notorious report on the "employment of homosexuals and other sex perverts in government."⁵⁹ Popular tabloid books like the salacious *Washington Confidential* (1951) began to identify public and commercial sites of queer depravity, such as bars, restaurants, tearooms, and other secret meeting places of known homosexuals in the District.⁶⁰ The gossip about public spaces that catered to subversive elements in society fueled reactionary theories about the potential communist backing of homophile organizations, a point not lost on the House Committee for Un-American Activities during the McCarthy hearings.⁶¹

Yet the activities of the Amputettes, detectable on almost any queer's radar screen, were utterly unremarkable. Their performances, protected within the fold of military culture, were equated not only with asexual male frivolity but with the sober, necessary task of social acclimatization and physical rehabilitation. Although one may wish to see in the campy antics of the Amputettes an early version of queer disabled community based on resistance to the dominant heteronormative paradigm, it is more likely that they presented drag vignettes for the same reasons that their able-bodied counterparts danced and sang in drag for them. They did it because compulsory heterosexuality and able-bodiedness demanded it.

In the behavior of the Amputettes, we see men offering essentially parodic performances, both literally and figuratively, of physical able-bodied normalcy and of the heterosexual male normalcy so cherished by institutional culture. Their bodies were part of a web of rehabilitative pressures that forced men to mimic the normal body. While earlier representations of the disabled male body focused on bodies performing extraordinary feats (such as doing circus tricks and operating machinery), the Amputettes performed ordinary activities, such as kick dancing and singing, well within the expectations of male ritual. Indeed, their performances were, in miniature, precisely the kinds of physical presentations of self to which they had become accustomed in the service. To be a normal American soldier means constantly having to perform what a normal body looks like as well as what a normal male gender role looks like. As always, such performances remain socially and historically contingent practices, caught up in the vanities and insecurities of the era in which they are performed.

To be a normal man in the military in the mid-1940s meant, apparently, possessing the ability to perform the accepted gestures (especially the coy, campy ones) of heterosexual masculinity as well as those of the normal American body, whether by dancing, smoking, or-as the culture decreed-performing in drag. But in performing this normalcy, the Amputettes also betrayed the homoerotic tensions of otherwise masculine behavior, as well as the nonnormative tensions of their queer physicality. Their showstopping antics revealed, ultimately, the state in which bodily panic, whether physical or psychological, always finds itself: the body under medical scrutiny always seems to deny its own affectation. Such rituals as the Amputettes' drag act exposed the essential queer crack in the facade of heteronormativity, revealing the extent to which performing heterosexuality and ablebodiedness means never having to apologize, or show humility, or admit to one's physical limitations. It means having to be vigilantly protective of anything that would expose the artifice of normalcy as a house of cards, in perpetual danger of blowing away. In tracing the military's attitude toward nonnormative body types, we see how the compulsive focus on bodily norms expresses a particular pathology in American culture that valorizes heteronormative masculinity at the exclusion of other possibilities of human experience.

Notes

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- 43. See Terry, American Obsession; for a concise discussion see Terry's fine essay "Anxious Slippages between 'Us' and 'Them': A Brief History of the Scientific Search for Homosexual Bodies," in Deviant Bodies: Critical Perspectives on Difference in Science and Popular Culture, ed. Jennifer Terry and Jacqueline Urla (Bloomington: Indiana University Press, 1995), 129–69.
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- 50. See the photograph of Wilson and Myerson in the Washington Times-Herald, 31 January 1946. Material on Wilson can also be found in Bess Furman, Progress in Prosthetics: A Summary under Sponsorship of the Prosthetics Research Board of the National Academy of Sciences-National Research Council (Washington, D.C.: U.S. Department of Health, Education, and Welfare, Office of Vocational Rehabilitation, 1962).
- See Gerber, "Heroes and Misfits." On the reintegration of veterans into American society after the war see Susan Hartmann, "Prescriptions for Penelope: Literature on Women's Obligations to Returning World War II Veterans," *Women's Studies* 5 (1978): 223–39. See also Jafi Alyssa Lipson, "Celluloid Therapy: Rehabilitating Veteran Amputees and American Society through Film in the 1940s" (B.A. thesis, Harvard University, 1995); and David Serlin, "Engineering Masculinity: Veterans and Prosthetics after World War Two," in Ott, Serlin, and Mihm, *Artificial Parts, Practical Lives*, 45–74.
- 52. George W. Henry, Society and the Sex Variant (New York: Collier, 1965), 118.
- 53. See, e.g., George Chauncey, Gay New York: Gender, Urban Culture, and the Making of the Gay Male World, 1890–1940 (New York: Basic, 1994), esp. chaps. 1–3. Thanks to Robert McRuer for making this excellent observation about the photograph.
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- 56. For a powerful discussion of the discursive limits of "Don't ask, don't tell" in relation to the construction of gay identity see Janet E. Halley, *Don't: A Reader's Guide to the Military's Anti-Gay Policy* (Durham: Duke University Press, 1999).
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- 61. See Lee Edelman, "Tearooms and Sympathy; or, The Epistemology of the Water Closet," in *The Lesbian and Gay Studies Reader*, ed. Henry Abelove, Michèle Aina Barale, and David M. Halperin (New York: Routledge, 1993), 553–75. For a larger contextualization of these themes in the 1950s see John Howard, *Men Like That: A Southern Queer History* (Chicago: University of Chicago Press, 1999).