Psychology's Feminist Voices Oral History Project

Interview with Leonore Tiefer

Interviewed by Leeat Granek
Toronto, ON
October 31, 2005

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LT: Leonore Tiefer, Interview Participant
LG: Leeat Granek, Interviewer

LG – I'm going to ask you questions about your feminist identity, questions about your career, and how those two merge together and that's basically going to be most of the interview.

LT – Ok.

LG – So if there is anything that I don't ask you, or anything that you want to expand on, please feel free to do it. So just a first very general question: How and when did you first develop your feminist identity?

LT – That's an easy question to answer because, you know, I'm in the second wave, so, for me, it's very clear what was before and what was after. I guess it's in two parts: one is when I got feminism, but the other is – and feminist identity tends to evolve – the Fall of 1972, October, I would say. I got my PhD in 1969 and I got a job at Colorado State University in Fort Collins, Colorado. And when I got there, I was the only woman in a 27-person department of psychology. And there was no feminism. I didn't know about feminism in 1969 and certainly there was nothing to read and teach. I was just hired to teach experimental and physiological psychology. I set up a lab, an animal lab for research, and three years passed. And, you know, it's hard for me to remember why I didn't relate to the things I must have known about.

I know I was very busy because I was a new professor and I had no training to be a professor. I had training to be a graduate student and do research, so I spent like 20 hours a day in my office preparing my lectures and exams and all kinds of stuff. Plus, I had a boyfriend who was in Missouri and I kept driving back and forth to Missouri. I had a full life, between owning a house, not the first year, I guess, I rented, but then I had to buy a house because the apartment was totally unsuitable and they didn't have very many apartments. Anyway, I was busy. But I'm sure I read about these marches and things that were happening, but I just didn't get it. I just didn't feel like it had anything to do with me and I didn't understand it.

But to my eternal gratitude, in the Fall of 1972, another woman was hired in the psych department named Pamela Pearson. She was a lesbian clinician from Chicago. She came and instantly we became like blood sisters because we were the only two women in the department, plus, she was a feminist. She said, "Hey, don't you know what's going on out there?" And I said, "What's going on out there?" And she said, "Read this!" And she gave me all these mimeographed things that were being passed around. And I was totally knocked over! And I just could relate to it right away and understand that it had everything to do with me. And, during that year of '72-'73, my whole life kind of became organized around being around this brand new feminist.

I made friends with other women professors in the university, which I hadn't done before. And we just started all these organizations together: a Fort Collins Chapter of NOW, a campus Commission on the Status of Women, Faculty Women's Council. All three of those organizations were started in that first year and we had conferences. We actually brought in Gloria Steinem in the Spring of '73. You know, so we went from 0 to 60 overnight and it was like a full time passion and obsession. So that was when [I developed my feminist identity]. Then I started trying to teach psych of women and trying to write things that might have a feminist perspective. I just gradually kind of shifted my professional thinking. The most important thing was in the year '75-'76. I had a sabbatical, so I kind of think of my career like before and after because I took my sabbatical back in New York at Bellevue Psychiatric Hospital and decided to give up animal research because I could see from all of this feminist writing that it was completely useless and irrelevant to any understanding of sexuality. So…

LG – The animal studies?

LT – Yeah, the animal studies. So, you know, I don't think that would have happened if I hadn't had those three years before of reading and trying to teach new things. I remember very clearly.

LG – Do you remember if there was this one moment, or what was it about feminism, or Pamela Pearson – something that she said to you that made you realize?

LT – I think it was the things that she gave me to read. She game me these pamphlets and mimeographed articles and they were about sexism and I… I had no words. I had not had a word, but I could immediately produce a hundred thousand examples of sexism. But, you know, there are no words. I mean, you could say, why didn't you just think of it as prejudice against women? And we just didn't think of it – it was just the way it was.

LG – It was a new concept.

LT – I mean, the story that I tell is hard to believe, hard for me to believe. When I got my PhD in 1969, in June, prior to that time I was looking for jobs and I was a student of a really big guy at Berkeley- Frank Beach. And he was, you know, a member of the National Academy of Sciences and everyone knew him everyplace and so he was supposed to help me get a job, but he didn't do much because he didn't believe that women stuck it out. He thought they quit, got married, and had babies. He didn't want to stake his reputation on getting someone a job who wasn't going to fulfill it. So, he was kind of lukewarm. But even so, he did hear about a job at John Hopkins. I was a Phi Beta Kappa student; I was like crème de la crème in the brains department and so he did write a letter to the chairman at John Hopkins and said, "You know, I've got this student graduating that could really be good for your program," and we got a letter back which I still have, saying, "The student sounds great, but we don't hire women."

LG – Wow!

LT – And, I mean, I remember feeling sad about that, but like, "Oh well, ok. We've got to find a school that does hire women." The idea of being outraged or doing something about it was just not part of the brain. It was too bad that that was the way the world was, but that was the way the world was!

LG – Yeah.

LT – And taking that letter and going someplace to complain, that just wasn't an option.

LG – Well, where would you go?

LT – Where would you go? There was no Equal Opportunities Commission. I mean, think about it. That was 30, 35 years ago. That was not that long ago.

LG – Not at all, not at all.

LT – Right!

LG – Ok so…

LT – When I started reading, I had the experiences, see, but I just didn't have the words for them, so that's why it made sense to me right away.

LG – And what was it that attracted you to psychology originally?

LT – That's more complicated. I don't know. I'm a kind of rational problem-solving person. What attracted me to physiological psychology, you know, just a complexity of human behavior and the mind and the idea of understanding how it all works – and having good professors. I was interested in experimental psychology for several years and did a lot of research there, but then I got bored watching rats in shuttle boxes, giving them shocks and things. I sometimes look back on my decisions with total bemusement. In some ways, I had the mind of a social psychologist, why didn't I go into social psychology? I don't know. I'm not a very good decision maker in my own life. It's all kind of accidental.

So, why did I go into psychology? I started out as a history major and somewhere along the line someone said that you can't making a living as a history major, that you have to do something you can make a living in. And I don't know why that made a difference to me. I don't really remember the details, to tell you the truth. I was married while I was in college and my husband was a philosophy graduate student. He was several years older than I was and so I think I liked the ideas of philosophy, but we never solved anything. We never answered anything and that seemed really frustrating to me. I wanted to answer things, so maybe psychology was the closest thing. It was combination of particular professors and the influence of my husband's friends and his field and the books he was reading.

LG – You started out doing experimental research on animals – sex research on animals?

LT – No, it was learning theory.

LG – Learning theory, ok, and so how then did you start to merge your work in psychology with feminism? When did that start coming together and how?

LT – Well, I was already a sexologist because I got my PhD with animal sexual behavior.

LG – Ok, so you were doing learning behavior?

LT – I was doing learning theory the first two years of graduate school and then I shifted to physiological stuff. I think I had a course that was just much more interesting. I think a couple of

new people were hired in the department and I think that, at the time, solving electrical stimulation of the brain was beginning to shed light on motivation for eating and drinking. It was an exciting field. It was like what neuroscience became ten or twenty years later, very exciting and you had a sense that big problems were going to be solved and that big questions were going to be answered. And sex, you know, sex was an interesting area and Frank Beach was probably the best-known person in the department. He never, I mean, this was another aspect of the sexism of the situation that I only looked back on later, but he never had research assistants that were women. He never paid women. If you wanted to work with him and you could earn money as a TA for someone else, fine. And that's what I did; I TA'd for a whole bunch of people while doing this animal research with Frank Beach.

LG – But he was hiring men presumably to do the same thing?

LT – Oh tons, tons. He later apologized. I mean we had a whole rapprochement ten years later. It was very moving in many ways, but he didn't get it either, you know? So, I was in animal research. I was a physiological psychologist. I taught, you know, motivation and emotion and learning, sensation and perception, things you do as a physiological psychologist and it was really interesting. I had graduate students and I had a lab of rats and hamsters. That was sort of a challenge. That was sort of interesting. So then this feminism stuff got me. And I think I was also beginning to realize that I didn't have the patience or the creativity or, I'm not sure what it was, to have a career in just physiological psychology. You had to have a quality of obsession. You know, physiological psychologists, they do a lot of programmatic research, like modifying the amount of hormones you give the animals or the age of the animals or the length of time you test the animals and you do a lot of, you know, variations on a theme and you do a huge amount of statistical analysis and that's what your publications consist of. And I began to realize I wasn't good at it. And I didn't enjoy it. I mean I enjoyed the teaching and the reading and theory, so when this feminism came along, it was easy for me to kind of let that slide and start reading this feminism which was all about theory and big ideas. And I think I have always been a kind of big idea person.

Then, when I started applying these ideas to my own area of research, I was a little appalled and I thought, you know, I can't really continue doing this. Not only am I really not good at it, but the foundation of it is not really valid. You know, this whole thing about mammalian principles, animal sex researchers, yes we studied hamsters, yes we would study rats, but we were really studying mammalian principles that were going to work and I would go to these meetings of the West Coast Sex Society, dozens of labs up and down the West Coast. I've been going to those since 1966 and listening endlessly to the papers, a lot of primate papers, but also a lot of bird papers, and other animals, rodent papers. And there were never any human papers in these conferences. I had a very hard time when I started reading this feminism, thinking, what did any of this have to do with sexism? That was the thing that I was really so turned on with. So, at first, I tried to teach human sexuality, but I realized that I didn't know enough and that's why I had to take a sabbatical and learn about human sexuality and then I thought, "Well, what kind of research can I do in human sexuality?" And I wasn't sure, but I did different kinds of things. I did interviews of women who went to the campus health center about pelvic exams, what they got out of it. I don't know what kind of research you would call this, maybe applied research?

LG – Qualitative research.

LT – Community research… it was questionnaires, it was sort of mushy. I think the problem was that I switched fields and I was lost. I didn't have a methodological grid to apply to my new

areas of interest. I couldn't study them physiologically which was really the only thing I knew anything about. So, ultimately, I went back to graduate school and re-specialized as a clinician. I could have gone back, I suppose, and re-specialized as a social psychologist or a community psychologist or something else and applied the feminism to that, but I had to do something other than what I was trained to do.

LG – Yeah, that seems really obvious …

LT – I didn't know how to do the physiological psychology as a feminist. I might know how to do it now. Now I know how to ask questions better, I think, but anyways…

LG – So, you re-specialized in clinical psychology and then?

LT – Well, meanwhile, I had left Colorado. The first thing I decided was that I had to get out of academia. Well, let's not say that. The first thing I decided was that I had to get a job where I didn't have to do this physiological stuff. The only thing I knew anything about was sex. And even to this day, 35 years later, it's really hard to get a job in academia if you specialize in sex. There are no departments of sex. So the only people really interested in sex were people in the health world and I had done this year at Bellevue. So I was introduced to a lot of people in the health world and they were interested in sex. It was 1974 or 5 or 6, you know, Masters and Johnson, and sex therapy clinics were opening up all over the place. So I got a job in a hospital in New York as a sex therapist, which was totally fraudulent, because I'd never taken a course in abnormal [psychology] in my life. But I administered it and I did some sort of stupid research with patients and I began teaching medical students. I liked the colleagues and I liked the energy, but I felt more and more fraudulent so that was when I went back to graduate school. So then I just kept working in the health world. I worked in psychiatry departments and urology departments until 1996 when I went off on my own. So from '77 to '96, I worked in hospitals and medical schools.

LG – And what were the primary things you learned from those experiences? Was there one message that led you to 1996 where you branched off?

LT – The medicalization. Medicalization was basically what I learned during those experiences. Let's try to figure out how I got from feminism to medicalization. I mean there were a number of steps. I tried for many years, I guess I'm still doing it, what I tried to do was apply feminist principles, feminist political insight, to sex therapy, sex theory, sexuality theory and I think I was successful. I published a lot of stuff and I think I have made a contribution to showing how if you tried to put women at the center of the analysis of sex therapy, you ended up with several important things that weren't obvious.

LG – Ok, like what?

LT – Well, the most important one always is that women's lives are influenced by social factors and that you can't just do sex therapy in a vacuum. You have to take into account the gender realities that influence women's lives. Masters and Johnson just sort of treated people as people without any sense of power or social context and that was, it seemed liberating, but it really wasn't. It wasn't thorough. It certainly wasn't thorough and it was really deceptive and incorrect because you can't just treat people as people, as if they were interchangeable. You can't, a white man and a black man, you know, a white man and a white woman, a conservative Christian and a Hindu immigrant… I mean it was ridiculous. So throughout the '80s and '90s, as psychology

was getting more multicultural, I was trying to do a lot of those things in sex therapy, which was definitely unpopular because most of the people in sex therapy had a real medical model going on in their minds and they thought of these kinds of social things as influences.

LG – Like, variables?

LT – Like, superficial, right. All you had to do was be sensitive as a clinician and that would deal with it. And I think it's much more serious than that. So that's really what I was doing and you know, I just kept publishing things. Then, from '83 to '88, I worked part-time in a urology department and then, from '88 to '96, I worked full-time in a urology department and I began to see that outside of psychiatry, people dealing with sex in the medical world were very disrespectful of mental factors of any kind whatsoever. And that was horrifying to me.

LG – Disrespectful in what way?

LT – They felt that the most important thing about sex was the mechanical operation of the genitalia or hormones or something like that. And you know how you never feel like an American when you're in America and when you are out of America, you feel more like an American? When you are out of New York, you feel more like a Jew? Well, when I was out of psychiatry and psychology, I felt more like a psychologist. I think it was the same thing. When you realize that no one around you shares your world view, your world view becomes more visible to yourself. I began seeing the lack of any sort of psychological awareness or interest on the part of the urologists.

LG – Was it the psychological world view? Or was it also the feminist world view that had…?

LT – I have to say those were two separate things. See, when I said I was writing all of this stuff about feminism, feminism and sex therapy, this was kind of like before the urological part of my career started to be so obvious to me. I did a lot of that and then I got this full-time thing in urology staring in '88 and, at that point, the psychological issues became very relevant because it seemed like that was a really big problem. Most of the people in sex therapy are psychologists or social workers or psychiatrists. I mean, all of them [are]. And what happened was that the urologists had never been involved in the field before, but in the '80s urologists not only started to get involved in the field of sex therapy, but started to take over the field of sex therapy because they ran the clinics.

Psychiatry was shifting to biological psychiatry and was closing down sex therapy clinics throughout the '80s and '90s. Sex therapy was dying. Urology was growing. Urology was running the sex clinics. They didn't call them sex therapy clinics; they called them male sexual function clinics or sexual health clinics or something like that. They were running them with this very medical model approach, huge diagnostic workups with all sort of tests and this and that and that change seemed like a calamity.

Then the sort of the final straw was Viagra in 1998. I had left urology in '96 because the shift had already occurred. I mean Viagra was the final straw, but it was the tip of the iceberg. The big iceberg had basically started in 1984 with injections into the penis for the treatment of impotence. Once urologists had that, they opened these clinics; they took over the journals; they hired the people, but then, as the '80s gave way to the '90s, they began feeling like they didn't have to have colleagues. They could do it all themselves and Viagra proved that they were right.

LG – Well…

LT – For them!

LG – Yes.

LT – And so a lot of people like me were either fired or were made to feel like they weren't wanted and drugs were it.

LG – So, 1995, which was around the time that you published, *Sex is Not A Natural Act*. How was that received? What would you say, in your own words, was the main premise of the book? And then the second question, how was it received?

LT – The main premise is that sex is a social construct and that a feminist perspective on social construction is a really good way to look at sex. So that was what I was after. And how was that book received? I think it was received very well in sociology.

LG – It was received well by the academic community? Was it received in the public? Or by your colleagues?

LT – Well, we got some nice reviews in the public. My colleagues, not only in medicine, but also in psychology, didn't like it because the social construction notion was very unfamiliar. I should say, in the introduction to *Sex is Not A Natural Act*, that I learned about social construction from my humanities and social science colleagues. During the '80s I went to this seminar on my own, for grownups. You know, it was just like a salon. I don't know what to call it – it was just journalists and English professors and anthropologists and writers of all kinds, novelists even, and the subject of the seminar was sex, gender and consumer culture. And we met every month for 13 years.

LG – Wow!

LT – 12 years:1981- 1993.

LG – Who was it run by?

LT – It was run by an English professor named **Ann Stepal** at the New School who is still there and it was out of a think tank called The New York Institute for the Humanities. They gave her a little budget for xeroxing and that was it. We all just came because it was the smartest people and it was the '80's and the '90's and it was social construction and Foucault had just arrived and then AIDS on top of it. So it was quite clear that sex was a really important, a matter of life and death topic. And there were all these new intellectual tools.

I don't remember why I went the first few times, but I continued going and I was the only scientist. I was the only health person who ever came. I would bring people from time to time and they would never stay because they didn't understand it. They felt it was, you know, boring. Like a paper about bordellos in the 17th century, what does that have to do with anything? Or art or recipes, they didn't understand and to this day, the vast majority of my colleagues do not understand.

LG – In psychology?

LT – In psychology or in psychiatry or in therapy. They do not understand that the culture shapes, influences, and constructs how you think about sex – the meaning of it, the purpose of it, why do you value it. Now, I don't even know now, it seems self evident to me that watching *Sex and the City* changes your sex life and that it does that within these sort of regimes of gender and class and so on and that you interpret it differently depending on who you are. All of this now seems so self-evident to me that I can't even imagine my colleagues don't see it that way, but they don't! They think, "Oh yeah, but basically people have a sexual drive and intimacy needs…" and that whole line of thinking.

LG – So was there a controversy when it was published?

LT – No, there's never any controversy. I am a very well-liked public speaker, so I would give talks to my colleagues every year and to various sex therapists. And I see patients and I would discuss my cases and people just kind of ignored this stuff that I wrote. The people who didn't ignore it were my feminist colleagues, especially in the Association for Women in Psychology, the AWP. I would give papers there every year and people would say, "Yes, this is so good! You are so right! Let's hear more of this! This is great." And I would give the same papers at the Society for Sex Therapy and Research and people would say it wasn't that entertaining. They didn't get it. It is understandable in a certain way. If you are a voice in the wilderness, nobody will get it.

LG – Yeah, but surely the things you say – I mean the things you said in the lecture today resonate. They make sense! They make sense on a personal level, so it's confusing to me that they wouldn't understand, that it's just a voice in the wilderness that doesn't…

LT – Well, people have their own theories. Like, I belong to a peer supervision group of sex therapists who really are not interested in all of this cultural stuff. They have their own theory, by and large, psychodynamic therapy, they have a theory. They believe that early relationships and unconscious processes determine what you do in bed, many years later. And part of me is interested in that too and these people have a lot of good advice on how to handle complicated cases. We talk about systems things and we talk about behavioral things, but we read books. This peer supervision group has been going on since 1991. I tend to belong to things for a very long time! So we have read dozens and dozens of books over the years, mostly therapy books. Every once in a while I want people to read a history book or a society and anthropology book and they find it superficial. It's interesting, therapists who read books about history find it irrelevant and superficial, mildly interesting.

We're meeting this Friday, November 4th, and we're reading Ed Shorter's new book about the history of desire. It's interesting! Well, they read the first two chapters last month and then they said, "This is really superficial. Let's read the whole rest of the book for the next meeting." You know, I'm enjoying it, every footnote, and they just feel like history is telling stories about people that have no relationship to now. What difference does it make who said what to whom in the 15th century? What difference does it make if people had anal sex then and didn't? What difference does it make? And I'm telling them that it's not that it makes any difference, but it's a way of thinking about why people have sex now. Why people have anal sex now is for the same kinds of rules and things that you can only understand if you understand why people had anal sex in the 15th century which was determined by the rules that were operating then. But what they say is that they know that people had or didn't have anal sex in the 15th century and what difference does it make? And I say, "It's a way of thinking," and, I don't know. At any rate, it's a

great example, yet another history book that I managed to get them to read that they feel is much less interesting than reading case examples of, you know, "Jerry is a 51 year old…" where to me, I get a lot out of all of it.

LG – So, I want to ask you a little bit about Instrinsa? Intrinsa, that's what is called, right? I read your remarks to the FDA and I read a little bit about your involvement in the FSD. Can you tell me a little bit about how you got involved in this campaign and what you perceive to be the major problems? Just tell me a little bit about all of it.

LT – Well, when Viagra was approved in 1998, people started talking about where is the Viagra for women? I thought that was a serious mistake. I was self-employed in 1998 and I was in the perfect position to try to analyze this because I knew a lot about clinical sexology and I knew a lot about feminist thinking about medicalization and gender oppression. And I thought I really wanted to do something about it. So I started to write complaints, "New disease is being created for women." Each step led to another step and, you know, I've lectured about this so often, I have slides about this that tell the story in great detail, so it's sort of hard to summarize it.

LG – You can tell me what it means to you if you want because you don't have to go through all the details. You're right; I've read them already. Just tell me what this means to you and what you think is the major issue that needs to be addressed right now.

LT – Well, I think women are being misled into thinking that drugs are going to liberate them and that the availability of drugs offers a new choice and a new option and that women have something more than they had before. I think that's the thrust of a lot of the media coverage of the new drugs. I think that's certainly the ad campaign coming out of the companies. But I feel that what's being promoted is a very narrow image of women's sexual potential and that it's sort of being promoted as if it were a good thing and a choice and an expansion, but in the context of other things – that women don't have comprehensive sex education, not to mention abortion rights, availability and coverage for contraception, and safe contraception – that, in some ways, it's much more to benefit men than women.

LG – What is?

LT – The Intrinsa and the new sex drugs. Most of them are about enabling women to have better intercourse, rather than more pleasure because a lot of the women using these are heterosexual women in relationships where the sexual techniques are quite limited and the focus is on intercourse. They are in their 40s and 50s and 60s and they are being sold the message that there is something wrong with them for not wanting to have intercourse and orgasm. And, in my clinical experience, if women are able to have a lot of pleasure, they go for it. They do not have any problems, but they are not being given more pleasure; they are being given a job to do. They are being told that if they don't want that job, there is something wrong with them and it will make them want to do the job. I just feel like the whole thing is really twisted in a very profound way. So, I don't know, I had a good time in the last five years using all my organizational skills and power of verbal persuasion and contacts and networking to get people to think about the larger meanings of these drugs for women. Are they really benefiting women? Do they really represent a new choice? Or, are they, in fact, a wolf in sheep's clothing?

LG – So, what would you like to see happening in psychology in terms of research on women?

CHANGE TAPE – SIDE TWO.

LT – Well, maybe we'll wrap it up soon.

LG – So, I asked you what would you like to see happening?

LT – In terms of research?

LG – In psychology and women's sexuality.

LT – Well, I would like to see more qualitative methods and I would like to see more social psychological methods. These are two very different things, but I feel like most of the research is survey research, which gives women choices, gives women words. I feel like what we need to do is get women to think more about what women want in their own words and that's very difficult. I know, as a clinician, that people are often very tongue tied when it comes to expressing what they want, but if you give them time and space, they can do it. Women want to feel vital in their body and they want to feel pleasure and they want to feel wanted and they wanted to feel distracted from other things and they want to know that they are respected and so on. And I'd like to have research that kind of raises that up. I think Sherry Hite did that quite well in the '70s and early '80s and her research was rejected by the sex research community as being a bad methodology. I think we are more sophisticated now and I'd like to see a revival of some of the things she was interested in.

You know, the 80s were full of these anti-porn/pro-porn sex wars. I think we are now kind of past those mores and we can incorporate a more sophisticated understanding of erotic imagery and sexual violence against women. I don't think its so polarized. We now know that everyone is affected by all of this, so I'd like to see research that kind of incorporates a more sophisticated understanding. As I'm listening to myself say this, I know it can't happen because I do still hear a polarization among feminists who write about pornography who are very, sort of, open and shut about it. It's bad; it's exploitative; it's harmful. I mean, that's not true. It's not the whole story by a long shot. What I'd like to see, I'm not sure it can happen, I guess is what I'm saying. I'd like to see a more comprehensive approach to the reality of women's sexual lives which includes sex toy stores and, you know, stupid partners, smart partners… I learned about this clinically, one person at a time. Every person's sexual story is fascinating and complicated and there's got to be a way to include all of those factors in research, but it's not happening. In my sense, it's not happening. So, that I would certainly like to see. I'd like to see that.

LG – Ok, so I'm going to skip a few things. You talked a little bit about some of the barriers and discrimination you faced as a feminist and as a woman. How did you balance your personal life with your academic job or with your role as a psychologist? How did that balance?

LT – I don't talk about my personal life. I've kept my personal very private. And I feel like that's, I don't know, it's a solution to a lot of different issues. I got divorced in the '70s – everybody was getting divorced – and since that time, particularly after I got into a confrontational situation with medicine, that my personal life has always been accused or attacked or – 'speculated about' is maybe a better word – because I'm such a polarizing figure now. People want to say, "Well, this comes from her own personal issues." So I basically don't talk about my private life.

LG – Ok, so I want ask you, I didn't even mean details of your personal life, although what you are saying is really interesting because I wonder if a man in the same situation would have his personal life examined in such a way…

LT – I don't think so! I think it's like Harriet Miers: you always go for the personal with women, or probably people of color.

LG – Can you talk about, without getting into details, the ability to balance all your professional needs with your personal needs? And the reason I am asking is because it's a contemporary problem for women to be able to balance, so one of the questions I always ask a feminist and women is how they have managed to do that in their lives.

LT – I don't know. I mean, I don't spend social time, free time, with people whose politics I don't agree with. I am a very social person. New York is a very social place. I go out three to four nights a week. I hang out with, you know, people who are also involved in feminist kinds of things. I spend a lot of time in the Unitarian Church involved in the homeless shelter; I help direct the homeless shelter. I mean, I have sort of compartmentalized my life in some ways, but everybody I'm involved with is a social activist. And I think that, really, in the last ten years, it has gotten more important. Since Bush was elected, it's like, I'm working all the time on political things and working with people all the time on abortion issues and lectures and marches and so my social life is very integrated with my politics. I just sort of, you know, don't hang around with people who don't share that. I don't know if that answers the question.

I don't have any children. I have nephews and I spend time with my nephews, but, other than my private life, I don't really do anything that isn't involved in one way or another with feminism. But that changed over the years. I mean, that's been true for the last ten years or so, but earlier on, I was more involved. I had more compartmentalization and I guess a lot of things weren't political and that didn't bother me. I think as Republicans have taken over more, and those of us on the left have felt more depressed and angry, there has been more to do and more of my friendships and my social life has been involved with that.

Yeah, I guess as a clinician, as well as a feminist, there are so many ways to live a life. People worry about all of these, children and family and a job, and they never talk about politics, or political activities. To me, my political activities take up most of my time and that's very satisfying because I feel like that's what I'm good at at and that's what's important. The idea of a personal life, maybe that's why I don't like to talk about it, because I don't want to make it sound, I don't want to agree with people that feel that's where the importance of your life is and your personal relationships and … I don't want to make it sound like I don't have any, but I'm living more of a political life.

LG – I was just about to say that most people aren't living a political life and the jobs that they do are just the jobs that they go to in the morning and come back at the end of the day, and it doesn't have very much personal meaning in it. But I think…

LT – Or it's a career.. I mean, I know a lot of people for whom their job is very important, but it's a career; it doesn't have a political meaning. They feel like they are good at it. They are rewarded in it. They fulfill themselves in it and they are serving a purpose, but they are not into social change. That's not what they are up to. That's actually most of my colleagues and that's a big problem I have. They feel that's sufficient whereas I feel like, because of my feminism, and maybe this is the important way to tie it together, that sex is not just a career. It's not just a topic.

This is a political topic/crisis/calamity/opportunity. You know, it's a political reality and people who don't see it as a political reality are part of the problem to those of us who do see it as a political reality. I've spent enormous amount of time trying to get that point across, with god knows what success.

LG – So what advice would you give to a feminist in psychology today? Someone who is coming into it?

LT – Well, I think you should live a politically engaged life. I mean, unfortunately, I really think academia can be a way of draining energy out of political engagement. People become very career oriented and there is endless politics to deal with on the campus. You turn around and 20 years are gone. You turn around and 40 years are gone and what have you done to change the world? I think that's terribly important, that there's something missing if there is no activist component to pedagogy. It's a real mistake because most people, most Americans I'm sure, presumably Canadians as well, are not raised in politically active families, so they don't learn that political life… You know, I'm much more comfortable with the Greek notion that everyone is a citizen and there are certain responsibilities that you have as a citizen. You should be going to meetings twice a week and have your little job that you are supposed to be doing for the betterment of your community and the human race.

LG – And do you think that feminist political aspect has made inroads into psychology? Do you feel that in the discipline?

LT – No, I don't. You go to the American Psychological Association and there's a little division on peace and these people are like 150 years old! By and large, it's not what's happening at all.

LG – So how do you think that can begin to happen?

LT – Well, I think that AWP and the feminist organizations have to be the primary places. I mean, I quit APA a number of years ago. It became clear to me that it was just about career and that I didn't need that because I had already achieved however much I was going to achieve, so it's easy for me to say that. But I think that the reason I didn't quit earlier was because I didn't realize what a waste of time it was. I feel like it has taken me a really long time to realize what is important about life, trying to make a difference, trying to make things better. Being an activist, I feel like I didn't really become an activist until 2000. The whole Intrinsa thing, it was the first time I stepped outside academia. I feel like that was ridiculously late and that we should all be using our knowledge and our skills in the community.

LG – Ok, so I want to respect your time to end, but is there anything else that I haven't asked you about that you feel is really important for me to know about feminism, or feminism and psychology or the work that you do, or anything at all that we have talked about or haven't talked about?

LT – Yeah, well, this last topic we were dealing with is so important. When I think about the feminist psychology journals, for example, there's too much of the 'me too' about them when they are just journals for publishing stuff to get promoted and to expand theory and so on. There should be more of an activist, practical, political, committed component to them. AWP has made an effort to have issues like that, an annual issue, or an issue for three years. People try to get involved in it and see what you can do about it, but even so there is not enough linkage to how

feminism relates to homelessness or to poverty or to the poor. I feel like even now I can't say that I've done very much. I think it's taken me so long to figure this out.

I think so many topics in academia are a waste of time and that there ought to be, somehow, more pressure for people to relate their academic subject matter to the real world. Psychology is, unfortunately, is kind of determined to make a difference in this one tiny, little way. And, you know, where has psychology tried to make a difference in terms of war and peace or poverty and inequality or issues of social justice and so on? The environment? Where is psychology in all of that? Where are psychologists? So, I feel disappointed that I picked psychology as a career if what I really wanted to be was be an activist. I should have stopped somewhere along the way and said, "Wait a minute! Do something else! Go to law school. You know, make a break."

LG – I think that your research makes a huge difference in that sex is psychological subject matter right?

LT – In what way?

LG – Well, it's not just bodies, as you say, it's a whole spectrum of things.

LT – Well, I tend to be hard on myself and maybe, but it remains to be seen if it makes a difference, if it materially makes a difference. But, you know, it's too easy for me to get too overwhelmed with despair. I mean, this whole Bush administration thing has so created a kind of sense of pessimism and irritation about the world. The war in Iraq, that seems totally hopeless. I mean, I find it hard to write anything sometimes. I'm overwhelmed sometimes with thoughts of what the hell difference does it make? The polar ice cap is melting. We are all going to be dead in fifty years. I just feel very gloomy and it is probably not the best frame of mind to try to inspire the youth.

LG – Well, your research has made a difference in my life.

LT – Well, that's good to know.

LG – So it's made a difference. If I can say that, I'm sure that other people can say that, too.

LT – Well, I'm glad. I'm proud of the ideas and I'm proud of being able to write them down and being able to deliver them in a funny way. I really have no question that I've opened up people's minds. So many people have told me that over the years. You know, a million people have said to me, [**inaudible**], but then what did they do with it? That's nice, but that's almost like being an entertainer. I'm saying there is no rabbit in the hat! Oh my god, I thought there was a rabbit in the hat! Wow! Ok! So now you know there is no rabbit in the hat, so now what are you going to do? It's kind of the next step other than opening peoples minds. Ok, so now that your mind is open, what are you going to do about it? So, I never know that.

LG – Well, I think that one of the lessons of feminism for me is that the personal is political and the political, personal. Even if your research has improved only one life and it has made changes in one life, then that is the 'now what,' right? Change doesn't have to be across the board, revolutionary, and I don't think change happens that way, anyway.

LT – Well, that's the psychological approach. That's a very respectful way to be a psychologist. I don't feel that way. I feel like one person recycling garbage isn't going to make a difference.

It's policies, you know, an entire frame of mind that leads to – it's sort of like what happens to Rosa Parks. Everybody is talking about how one person can make a difference and that is the myth of Rosa Parks, right? Rosa Parks was an activist. She had refused to give up her seat on a bus half a dozen times before, it's just that the time wasn't right. The idea that she's now becoming sanctified, rather than, let's say, the NAACP being sanctified… but people don't want to sanctify an angry, litigious group, you know? They want to find one person who showed courage and that somehow changes things, that didn't change a fucking thing! If the NAACP hadn't wanted to find a person who they could use for a lawsuit for a strike, she would have sat there until the cows came home.

So, you know, we have this mythology of one person can start something… that's why I feel like, ok, I tried. I was one person. I said things. Did I make a difference in sexology? I don't think so. I don't think sexology was interested in hearing it. I think sexology was organized to identify with medicine and used the medical model for careerist advantages and my message didn't work with that. Isat down in the sexology class, but it didn't make a difference.

I think we should stop, but it's been really really interesting.

LG – Ok, well, thank you very much.

LT – Thank you very much.