


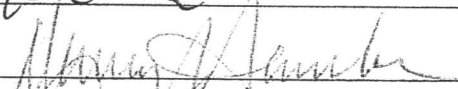
"MEDIA MESSAGES ABOUT BISEXUALITY ON PRIMETIME TV"

by

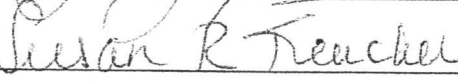
Cyndi E. Rowan
A Thesis
Submitted to the
Graduate Faculty
of
George Mason University
in Partial Fulfillment of
The Requirements for the Degree
of
Master of Arts
Sociology


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Media Messages about Bisexuality on Primetime TV

A thesis submitted in partial fulfillment of the requirements for the degree of Master of Arts at George Mason University

By

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Spring Semester 2011
George Mason University
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DEDICATION

I dedicate this work to everyone who supported me during this process. This work is especially dedicated to bisexuals everywhere. Here's to challenging taken for granted notions of gender and sexuality!

ACKNOWLEDGEMENTS

Heartfelt thanks to Dr. Karen Rosenblum for being the most supportive and motivating thesis advisor in the world! I would like to thank the rest of my thesis committee, Dr. Amy Best and Dr. Nancy Hanrahan. A special thanks to the Gay and Lesbian Alliance against Defamation (GLAAD) for their dedication to increasing awareness of alternative sexualities in the media, especially through their annual “Where We Are On TV” reports. I would also like to thank the online fan community of *House, M.D.* on Live Journal, “Clinic Duty”, for the detail transcription of the series.

I am thankful to my Mom, Sue and Barry Taylor, Caroline Shewmaker, Hedison “Becks” Doe, Blamette “Tae” Kun, Jaysen “Mort” Goodwin, and Meghan Pope. Thanks for your motivation and for listening. You’re all awesome and I seriously couldn’t have done this without you!

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ABSTRACT

MEDIA MESSAGES ABOUT BISEXUALITY ON PRIMETIME TV

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George Mason University, 2011

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The purpose of the study is to investigate how bisexuality is portrayed on scripted fictional primetime American television. To do so, this study focuses primarily on the following: explanations of bisexuality offered by primetime American TV, characteristics of bisexuality being portrayed, how bisexuality is defined in relation to gender, and how bisexuality is presented in regards to perceptions of sexuality. The study shows that though bisexuality is featured on television, it is featured in ways that maintain heteronormative views of sexuality.

INTRODUCTION

Most sexual minority youth grow up in primarily heterosexual communities and therefore have no firsthand experience on how to construct their identity. Visual media representations of sexual minorities can be useful to the formation of adolescent sexuality identity because they provide information on how to be homosexual in the absence of the availability of other sources of information (Fisher et al 2007; Meyer 2003). In light of this absence of information, youth often turn to visual media representation to provide a guideline from which to learn how to perform their non-heterosexual identity. Visual mass media representations are particularly important for sexual minority youth because television characters provide models for youth who may not have much firsthand experience with sexuality, yet are starting to solidify sexual identity and become interested in beginning sexual relationships (Fisher et al 2007).

According to sociologist Rob Cover (2000), there is an urgent need to explore the “mainstream” production of discourse on sexuality for two reasons: first, in the case of youth sexual identity development, youth are more likely to look to mainstream films to provide iterative sources for the production of sexuality-based identities, and second, avant-garde films that provide evidence that disrupts the heteronormative categories of

identities are not accessible to youth because they tend to attract a specific audience already culturally knowledgeable to make the necessary interpretations such ‘non-realist’ viewing requires (73 – 74). Queer youth, with no other resources from which to obtain information about sexual identity, look to mainstream media as they are unaware that there are alternate, resistant, academic, or textual reading discourses. With mainstream media, they are constantly and predominantly confronted with heteronormative messages about sexual identity. This is the case even when mainstream media specifically addresses issues of sexual and gender nonconformity. Sociologist Joshua Gamson (1998), in his study of reality television shows that specially focus on gender and sexual nonconformity, found that these shows may appear, on the surface, to provide alternative representations of gender and sexual minorities but, in actuality, tend to reaffirm heteronormative notions of gender and sexuality.

In his article, “*Premodern Sexualities*,” English professor and author Bruce R. Smith (2000), asserts that “sexuality has proved to be a strategically important object of study for two reasons: first, because it seems to be one of the most natural, most universal of human traits, sexuality provides an exemplary case of how identity is in fact a function of cultural history. Second, sexuality presents a particularly striking intersection between external forces and internal consciousness between society and the individual” (319).

For sociologist Eoin Devereux (2007), it is important to analyze media content because the means by which we determine and frame our perceptions of the social world occur within media content. Media are important because it is very influential in shaping

public views, opinions, and attitudes. Since we live in a mediated society, much of our knowledge, our concerns, and what we think is important are shaped in part by what we see in the media. (Lind 2004). Media is also important because it can provide firsthand knowledge and experience of certain aspects of the social world (Lind 2004). Most of these media content transmit values, social norms, discourses, and ideologies at a very unconscious level, playing a significant role in the construction of social reality.

The purpose of the study is to investigate how bisexuality is portrayed on scripted fictional primetime American television. To do so, this study focuses primarily on the following four questions:

- What explanations of bisexuality are offered on primetime TV? What are the narrative themes television offers about bisexuality? For example, is bisexuality depicted as biological and as a choice? Is bisexuality depicted as fixed or fluid?
- What are the characteristics of the bisexual characters as portrayed in the series? For example, are they depicted as promiscuous, confused, or immoral?
- How is bisexuality defined in relation to gender?
- Is bisexuality portrayed as disruptive to the homosexual/heterosexual dichotomous view of sexuality?

THEORETICAL BACKGROUND

Sexuality, in contemporary Western cultures, constitutes the identity of individuals, and the sex of one's sexual partner predicts how one is sexually categorized (homosexual, heterosexual, or bisexual). Sexuality is a matter of social context derivative from discourse and governmentality. That is, understandings of sexuality are configured based on the rules, guidelines, social norms, and practices that function to regulate sexual behavior (Danaher et al 2000). To determine how bisexuality is situated within the interactions of gender and sexuality requires an understanding of how both gender and sexuality are being theorized. The fundamental perspectives on the constructions of gender and how they pertain to sexualities, offered by theorists Michel Foucault and Judith Butler, provide a framework from which to investigate representations of bisexuality.

Power/Knowledge and the Production of Sexuality

Using a Foucauldian framework to understand sexuality requires first determining the relationship between sexuality and power. Foucault, in *History of Sexuality, Volume 1*, defines power as being everywhere. That is, power is not centralized within an institution or structure. It is not something that any one individual possesses. It is, instead,

a complex set of strategies that are situated within a specific moment in a particular society (Foucault 1990). Relations of power are positioned within different types of relationships, including sexual relations. Relations of power produce our concepts of reality and are the immediate results of the disparities, instability, and divisions of these relationships.

In examining the relationship between sexuality and power, sexuality should not be construed as repressed or dominated by power. It is, instead, an instrument of power that can be used to accomplish various strategies. Foucault defines sexuality as a “great surface network in which the stimulation of bodies, the intensification of pleasures, the incitement to discourse, the formation of special knowledge, the strengthening of control and resistance, are linked to one another, in accordance with a few major strategies of knowledge and power” (Foucault 1990:106). This suggests that sexuality is a social construction that is produced by the interaction of power and knowledge and their connection to sex. The social construction of sexuality is constituted on the following: knowledge about sexual behavior, systems of power which regulate the sexual acts, and the discourse from which individuals come to identify themselves as sexual subjects. The deployment of sexuality is then the means by which we connect sexuality to our understandings of social reality (our economy, politics, histories, etc). How we perceive and communicate about social reality is through discourse.

Discourse and the Social Construction of Sexuality

Discourse is a set of rules and structure that constitute and produce a particular way of speaking that is specific to certain cultures, times, and spaces. They are formed in the past and their systems are fundamentally productive as they produce and constrain the ways in which we perceive reality. Discourse “transmits and produces power; it reinforces it, but also undermines and exposes it, renders it fragile and makes it possible to thwart it” (Foucault 1990:101).

Therefore, to understand the discourse on sexuality is to determine what power relations are integral in the formation of discourse and the reasons these relations of power exist. This can be accomplished by first understanding the interconnectedness of knowledge and power. The next phase is recognizing that relations of power are continuously shifting and that “local centers” of power-knowledge are manifested within larger strategies that are conversely dependent upon them. The final phase is to acknowledge that discourse is what unifies power and knowledge and can be both an instrument of and a point of resistance to power (Foucault 1990:101).

For Foucault, it is also imperative to define the regime of power-knowledge-pleasure that sustains the discourse of sexuality. This can be achieved primarily by acknowledging that “sex” is being discussed and who and what is being discussed about sex. The next step, then, is to discover the institutions that prompt these discussions, store, and disseminate what is being said. Therefore, in examining discourse on sexuality, it is critical to investigate “what reciprocal effects of power and knowledge they ensure”

and “what conjunction and what force relationship make their utilization necessary in a given episode of the various confrontations that occur” (Foucault 1990:102).

So how does an understanding of bisexuality fit within this picture? How can bisexuality as a sexual identity be explained within Foucault’s ideas on power relations, knowledge, and discourse? If one of the functions of discourse is to provide points of resistance, what are the social implications with regards to bisexual identities? That is, since bisexuality is neither an element of heterosexuality nor an element of homosexuality, and since it could be said to exist outside of these discourses, how is it depicted and constructed?

Psychologist Gurevich and her colleagues (2007), in their study of bisexual identity, interviewed twenty-two self-identified bisexual women to determine what it meant to openly identify as bisexual and how bisexual identity is constructed. They found that a bisexual identity is difficult to maintain not only because of the stigma associated with identifying as bisexual, but also because of the persistent disbelief in the existence of bisexuality. They discovered that these women constantly struggled with the need to categorize themselves, despite the negative connotations and lack of definition, as bisexual while simultaneously rejecting the rigidity categorization implies. Though establishing a cohesive definition of bisexuality (a fixed bisexual identity) renders bisexuality viable, it also threatens to re-inscribe the power relations bisexuality seeks to undermine since a fixed identity, within the existing discourse of sexuality, reinforces the legitimacy of the current binary sex/gender system. Bisexuality is further hindered by the

lack of its own alternative method of perception and expression, because popular discussions about bisexuality are situated within those of the dominant culture whose stability and legitimacy are threatened in many ways by the possibility of a bisexual identity. These findings not only demonstrate the complexities of identifying as bisexual, they also emphasize the necessity of establishing a bisexual perspective.

Performativity and the Discourse of Sexual Identity

The discourse surrounding sexuality in American culture presumes that sexual identity is predicated on gender, which is assumed to be based in natural, essential concept of biological sex. For Judith Butler (1999), sex is already gendered and gender is not a stable, pre-discursive entity, inherent in individuals but is something constituted, organized, and negotiated through the enactment of discourse. That is, there isn't a body that exists without already having been culturally inscribed a gender. From this perspective "gender proves to be performance –that is constituting the identity it is purported to be... gender is always a doing, though not a doing by a subject who might be said to pre-exist the deed" (25).

According to Butler, gender or sex is fluid. The function of discourse is that it restricts how sex and gender are presented, understood and performed in social reality. That is, gender acts performatively to constitute the subject and is the result of discourse rather than the motive of it. Butler asserts that "the gendered body is performative suggests that it has no ontological status apart from the various acts which constitutes its reality" (Butler 1999: 136). Gender, in this sense, is a form of discourse in that it is a

repeated and regulated practice, a system which structures how gender is perceived in social reality.

These restrictions are set within a hegemonic cultural discourse which emphasizes the dichotomy of gender and sex and makes inconceivable the perception of sex and gender outside of these binary structures. “The heterosexualization of desire requires and institutes the production of discrete and asymmetrical opposition between “feminine” and “masculine” where these are understood as expressive attributes of “male” and “female” (1999: 24). However, for Butler, it is impossible to be a sex or a gender, since neither sex nor gender can be constituted in a metaphysical “self-identical being,” but is presented in hegemonic discourse as such.

Hence, gender should be seen as something fluid and independent of sex (and sexuality should be seen as independent of gender). This means, “when the constructed status of gender is theorized as radically independent of sex, gender itself becomes a free floating artifice, with the consequences that man and masculine might just as easily signify a female body as a male one and feminine a male body as easily as a female one” (Butler 1999: 6). Consequently, gender is a performance and is socially constituted in a specifiable context. Thus, gender identity is not biologically predetermined but is something achieved through repeated performance.

The cultural model through which gender identity is articulated requires that certain kinds of “identities” are not supposed to “exist”. The kinds of identities are, “those in which gender does not follow from sex and those in which the practices of

desire do not “follow” from either sex or gender” (Butler 1999: 24). Therefore, according to Butler, gender (and sexuality) is regulated by the institution of a compulsory and naturalized heterosexuality where a binary structure of gender, in which masculinity is presented as essentially and coherently different from femininity, informs the practices of heterosexual desire.

Gender is “ a construction that regularly conceals its genesis; the tacit collective agreement to perform, produce, and sustain discrete and polar genders as cultural fictions is obscured by the credibility of those productions – punishment that attend not agreeing to believe in them; the construction “compels” our belief in its necessity and naturalness” (Butler 1999: 190). That is, society is very invested in the perpetuation of the belief of gender polarity and naturalizes, enforces, and regulates this belief about the innateness of gender identity. Gender, in this sense, is the result of this “truth” of a discourse of primary and stable identity (Butler 1999). Gender is presented as an inherent identity even though there is nothing inherent about gender. That is to say, “acts and gestures, articulated and enacted desires create the illusion of an interior and organized gender core, an illusion discursively maintained for the purposes of the regulation of sexuality within the obligatory frame of reproductive heterosexuality” (Butler 1999: 186).

Using Butler’s perspective on sexuality, bisexuality as a form of sexuality may be said not to follow from either homosexuality or heterosexuality and perhaps not even to “really exist” because it cannot be explained within the hegemonic cultural discourse of a binary sexual structure. Applying Butler’s analysis of gender and sexuality to the

exploration of representations of bisexuality seems appropriate because of the following: bisexuality exists outside of the binary structures of discourse on sexuality; it destroys dichotomous perceptions of gender, it does not adhere to the notion that sexuality follows from gender, and it illustrates the fluidity and instability of sexuality. The lack of discussion of bisexuality thus illustrates the extent to which a hegemonic cultural discourse of compulsory heterosexuality is invested in constraining, reproducing and constituting binary sexual identities.

Media Representations and Sexualities

Discourse has a material dimension and productively constitutes objects, individuals, and social realities. As a result, non-heterosexual subjects constitute their specific identities and realities against and within the dominant discourse (Bower et al 2002). Some of these popular and dominant discourses for the formulation of non-heterosexual identity are visual mass media representations in television and film.

Radio, television, film, and the other products of media culture provide materials out of which we forge our very identities; our sense of selfhood; our notion of what it means to be male or female; our sense of class, of ethnicity and race, of nationality, of sexuality; and of "us" and "them." Media images help shape our view of the world and our deepest values: what we consider good or bad, positive or negative, moral or evil. Media stories provide the symbols, myths, and resources through which we constitute a common culture and through the appropriation of which we insert ourselves into this culture (Kellner 1995: 5).

Stuart Hall (1997) asserts that the reasons we need to study media representations are to "theorise identity as constituted, not outside but within representation" (58) and that these representations enable us to discover places from which to speak. Media

discourse, thus, produces and circulates a certain way of thinking and speaking about sexuality and sexual identities.

It is also important to study media discourse because it influences discourses occurring in the private domain and provides examples of conversational interactions in private life which are also simulations of private conversational interactions. This simulation of real-life discourse gives media the capacity to re-shape our everyday conversational interactions. That is, a “complex dialectic seems to exist between the media and conversational discourse of everyday life” (Fairclough 1995: 64). Television is a primary example of this intersection between the public and private and its simulation of real-life interactions makes it a major influence in the shaping and reshaping of everyday discourse.

RESEARCH METHODS

Sampling

According to the four year trend analysis report of regular and recurring lesbian, gay, bisexual, and transgendered (LGBT) characters portrayal on broadcast networks in the GLAAD's "Where We are on TV" report for the 2009 – 2010 season, the 2008-2009 season saw the greatest increase in the number of bisexual characters portrayed on broadcast networks, with six bisexual characters portrayed during the 2008 - 2009. This is a significant increase over the prior two seasons of 2006 – 2007 and 2007-2008, where no bisexual characters were portrayed during the 2006 – 2007 season and only two bisexual characters appear in the 2007 – 2008 seasons (GLAAD 2009: 19).

A sample of two seasons of scripted fictional television series that features a bisexual character as defined by the Gay & Lesbian Alliance Against Defamation (GLAAD) "Where Are We On TV" Reports from the 2008 – 2009 season from two of the major broadcast networks – FOX and ABC - was used for this study. The sample includes scripted fictional series that featured a bisexual character in a leading or supporting role in the television series only. The characters were also regulars on the

series for the span of two or more seasons. The span of the characters on the series provides an extended period of time from which to analyze the development of the characters and their sexuality.

Since this study focuses on youth, particularly young adults, the primetime television series chosen for this study are among those that are targeted to the 18 to 34 age bracket. However, because visual media portrayals of alternative sexualities are not as widespread as media portrayals of heterosexuality, a random sampling was not employed for the purpose of sample selection.

The scripted fictional television series from the 2008-2009 seasons used in this study are Seasons Five of “*House, M.D.*” on the FOX network and “*Grey’s Anatomy*” on ABC network. Episodes from both of these seasons are accessible on DVDs. Each season contains twenty-four (24) episodes with each episode about forty three (43) to forty-five (45) minutes in length. This accounts for a total of approximately two thousand one hundred and sixty (2160) minutes of content from which to analyze media messages about bisexuality. These episodes were watched repeatedly to determine the recurring themes and narratives about bisexuality being portrayed.

All twenty-four episodes of *Grey’s Anatomy* were self-transcribed. For *House, M.D.* transcripts were obtained from Live Journal’s Clinic Duty, an online TV transcript database created and maintained by fans of the series. The transcripts facilitated discourse analysis of the texts presented in these series.

Methods

A study of media content is important because it provides a way to investigate mediated messages: what they present or represent, what is included in these messages, and the implications of the messages that are excluded (Lind 2004). The contents of media “consistently (if implicitly) demonstrates who matters and who doesn’t; who is taken seriously and who isn’t; who is feared and who is trusted; and who is best suited to perform certain roles or functions in our society” (Lind 2004).

Narrative analysis is a method used to investigate the narrative structure of the text. That is, it is used to analyze how the story is being told through the structure of the texts (Devereux 2007). It is also used to derive the themes within the content being analyzed. Sociologist Joshua Gamson (1998), in *Freaks Talk Back*, used narrative analysis as one of the research methods to investigate the portrayal of sexual non-conformity on daytime talk shows. *Freaks Talk Back* focused on the roles of talk show producers, the shows’ contents, and talk show audiences in the media portrayals of gender and sexual nonconformity. He examined the ways in which media visibility of sexual and gender nonconformists on these shows represent the continuous negotiation for public space, how demarcations between sexual and gender normality versus abnormality are established, and the class implications of what is acceptable public discussions about gender and sexuality.

In his study of gender and sexual nonconformity, he found that the most recurrent narrative themes on shows that centrally featured lesbian, gay, bisexual, and transgender

issues were morality and politics. Morality themes referred to how right or wrong being homosexual, bisexual, or transgendered is and political themes were those that discussed issues of rights, privileges, claims and grievances, and balance of power. Other narrative themes that emerged from his study were: therapeutic (which involved truth-telling and self-acceptance), boundary themes (which refers to telling the difference between sexual and gender categories), honesty themes (which involves truthfulness versus fabrication), sexual fidelity themes (which refer to monogamy versus promiscuity), identity themes (based on reality versus fluidity or impermanence of sexual identity status), and tolerance themes (which examined tolerance versus intolerance of differences).

Gamson (1998) discovered that for most sexual and gender non-conformists, discussion of morality and politics usually resulted in an unusual “tenuous, easily undermined, conditional acceptance” (132). This moral acceptance is contingent on two norms being firmly upheld: gender conformity (that men should look and act like men and women should look and act like women) and monogamy (that sexual relationship should only occur exclusively between two individuals).

Gamson’s analysis of bisexuality, in particular, on talk shows revealed that this moral acceptance enjoyed by gay and lesbian people is not usually extended to bisexuals. On talk shows, bisexuality is most often the synonym for promiscuity and thus violate one of the norm on which moral acceptance depends. Talk shows where bisexuality is centrally featured do not usually feature political, tolerance, or therapeutic themes compared to most of the shows that feature gay and lesbian individuals alone.

Bisexuality, on talk shows, seems to have its own program niche, with discussions focused more on these four common narrative themes: sexual fidelity framing, morality framing, causes of bisexuality framing, and category of boundaries. Sexual fidelity framing, in the case of bisexuals, refers to whether the discussion primarily focuses on issues of monogamy versus non-monogamy or promiscuity. Morality framing categorizes discussion of the morality or immorality of the choices of the bisexual guest (or in the case of my study, character). Causes of bisexuality or causal framing encompasses discussions of choice versus biology or naturalness of bisexuality, and category boundaries refer to discussions about the ability to tell the difference between bisexual guests or characters from their heterosexual or homosexual counterpart. Using Gamson's narrative frames and findings as framework, this study examines the following:

- What explanations of bisexuality are offered on primetime TV? What are the narrative themes television offers about bisexuality? For example, is bisexuality depicted as biological and as a choice? Is bisexuality depicted as fixed or fluid?
- What are the characteristics of the bisexual characters as portrayed in the series? For example, are they depicted as promiscuous, confused or immoral?
- How is bisexuality defined in relation to gender?
- Is bisexuality portrayed as disruptive to the homosexual/heterosexual dichotomous view of sexuality?

ANALYSIS

This section begins with an overview of each series and season featured in the study to provide context for the analysis. It is then organized around the first three research questions that this study examines: how bisexuality is explained and constructed, what narrative frames emerge about the characteristics of individuals who are bisexual, and how bisexuality is depicted in relation to gender.

Series Overview

House, M.D.

House, M.D. is a medical drama on the Fox Broadcast network that airs during primetime at 8/7C on Mondays. The series is currently in its seventh season and centers on a premier diagnostic team at the Princeton-Plainsboro Teaching Hospital (PPTH) in New Jersey led by Dr. Gregory House. Each episode involves a mysterious medical case that the team has to solve to save the life of a patient by the end of the episode. However, within these episodes are several plotlines about the regular characters who make up the series. The regular characters include Dr. Gregory House, his new diagnostic team (as of season four), which includes Dr. Foreman, Dr. Kutner, Dr. Taub, and Dr. “Thirteen” Hadley. Other regular characters include Dr. Wilson (oncologist and “best friend” of Dr. House), Dr. Cuddy (the hospital’s director and Dr. House’s boss), Dr. Cameron (ER

doctor and former member of the series original diagnostic team), and Dr. Chase (former member of House's original diagnostic team, currently a surgeon at PPTH). Doctors Foreman, Chase and Cameron were the original diagnostic team for the first three seasons of the series until Drs. Chase and Cameron left the team at the end of the third season. This study analyzes the episodes from the Fifth Season or the 2008 – 2009 season only.

The character of interest in the series is Dr. Remy "Thirteen" Hadley, a diagnostic fellow who is portrayed as bisexual in the fifth season of the series. Thirteen's bisexuality became apparent in Season Four when she was challenged by fellow colleague, Dr. Foreman. During that episode "Don't Ever Change" and subsequent episodes, she neither confirms nor denies her bisexual identity but continuously hints and displays bisexual behaviors, especially in Season Five of the series. Olivia Wilde, the actress who plays Thirteen on the series, in an interview for the LGBT website, afterellen.com, conducted in July of 2008 disclosed that the character was indeed cast as a bisexual. Thirteen, the character, finally reveals her bisexuality (that is, she used the term to describe herself) in the seventh episode of Season Six when confronted by Dr. Wilson on whether she's ever had a threesome. To which Thirteen replied "Just because I'm bisexual?"

This study is an analysis of only the twenty-four episodes that make up the Fifth Season of *House M.D.* that aired during the 2008 to 2009 season of the show. It centers around the new diagnostic team and the medical mystery they solve. There are three major storylines running through Season Five of *House, M.D.*: the continued (from Season Four) sexual tension between Dr. House and Dr. Cuddy, his boss; Dr. House's friendship with Dr. Wilson; Dr. Remy "Thirteen" Hadley's reaction to and her struggle

with her diagnosis of Huntington disease; and Dr. Remy “Thirteen” Hadley’s sexual identity and relationships.

Grey’s Anatomy

Grey’s Anatomy is a medical drama on the ABC Broadcast Network that airs during primetime at 9/8C on Thursdays. The series is currently in its seventh season and centers around both the professional and the personal lives of a group of surgical interns, residents, attending physicians and their mentors at the fictional Seattle Grace Hospital in Seattle, Washington. Each episode involves several surgical cases that the interns, residents and attending physicians perform not only to possibly save the patients’ lives but also to complete their medical training. However, these surgical cases are more of a backdrop to the portrayals of their relationships, friendships and personal ambitions.

The series features an enormous cast of regular characters. Therefore characters, other than the main character of interest, included in this study will be introduced as they appear in the analysis.

The character of interest in the series is Dr. Calliope “Callie” Torres, an orthopedic surgeon who is depicted behaving bisexually in the series. Dr. Torres is also categorized as bisexual in the 2008 -2009 edition of GLAAD’s “Where We Are Now” report. She was first cast as a main character in Season Two of the series as a love interest for then intern, Dr. George O’Malley, who she married and later divorced in Season Four. In Season Five, the season analyzed in this study, she is depicted in sexual

relationships with or having sexual attractions to Dr. Erica Hahn, Dr. Mark Sloan, Dr. Sadie Harris and Dr. Arizona Robbins.

This study is an analysis of only the twenty-four episodes that make up the Fifth Season of *Grey's Anatomy* that aired during the 2008 to 2009 season of the series. It centers on the following storylines: the progression of Dr. Meredith Grey (the central character for whom the series is partly named) and Dr. Derek Shepherd's relationship, the forbidden (by Dr. Grey and Dr. Shepherd) sexual desire and ultimately relationship between Dr. Mark Sloan and Dr. Lexie Grey, the mystery behind the haunting of Dr. Izzie Stevens by former and now deceased patient and ex-fiancé, Denny Duquette (and the impact of this on her relationship with Dr. Karev), and the relationships and sexual attractions of Dr. Calliope "Callie" Torres.

Explanations of Bisexuality

The application of Judith Butler's (1999) concept of gender to the study of sexuality advocates an understanding of sexuality as fluid. Sexual fluidity indicates sexual attraction unrestricted by the gender of the individual of desire. It disrupts the determinant role of gender in the expression of sexual identity. However, conventional notion of sexuality endorses only two manifestations of sexuality, heterosexuality and homosexuality. This dichotomous and inherent perception of gender and sexuality imply that sexuality is fixed and stable and dismiss instances of sexual fluidity.

Bisexuality is not defined by gender and its most prominent feature is sexual fluidity. Therefore to examine how bisexuality is explained on television requires the

exploration of the ways in which sexual fluidity is indicated through the determination of whether or not bisexuality is depicted as a phase or an identity. Bisexuality as a phase suggests a temporary intermediate expression of sexuality with the outcome of arriving at a true inherent homosexuality or heterosexuality. In this sense, bisexuality defined as a phase dismisses sexual fluidity and reinforces the perceptions of binary gender and sexuality. So, although bisexuality as a phase may insinuate some form of fluidity and traversal of gender and sexual boundaries, it only functions to define sexuality within the binary structure of gender and sexuality. On the other hand, bisexuality as an identity disregards the definition of sexuality based on dichotomous gender categories. It connotes the continuous traversal of sexual and gender boundaries. Bisexuality as identity is a characteristic demonstration of sexual fluidity.

This section investigates how bisexuality is depicted and explained in the series featured in this study.

House, M.D.: Bisexuality Not a Phase

Bisexuality, on the series *House, M.D.*, is not conveyed as transient or temporary. It is treated as an authentic sexual identity different from homosexuality or heterosexuality. That is, contrary to many of the studies that have been conducted on portrayal of bisexuality in films (Barker et al 2008; Bryant 1997; Rust 1995). According to studies of bisexuality in films, bisexuality is usually portrayed as a phase the character goes through before realizing true homosexuality. Bisexuality, on *House, M.D.*, is not portrayed as a phase.

Dr. Remy “Thirteen” Hadley is not portrayed as a character who is experimenting or confused about her sexuality. Thirteen is portrayed as being involved in many one night stands with random women at the beginning of the season (especially in Episode Five of the season) before entering a monogamous relationship with her male colleague, Dr. Foreman. This may suggest some transition from homosexuality to heterosexuality. However, their relationship is presented more along the lines of a transition of relationship status rather than a transition of sexual identity. Thirteen still identified as bisexual as is apparent in her behaviors and conversations with her boyfriend, Foreman, and members of the team, as illustrated in the scene below. Throughout the season, Thirteen’s bisexuality is repeatedly reemphasized through representations of her continued attraction to men and women even when she’s in a relationship. This is illustrated in this scene during Dr. Chase’s bachelor party.

Wilson is doing a ‘body shot’ off Karamal, the female stripper. This includes licking his way up her torso to her bra where the shot glass filled with alcohol is situated. The goal is to take the shot without using his hands. After the shot, Wilson crawls back up to Karamal and gets the slice of lime from her mouth. Thirteen dances up to Karamal for her turn. The astonished Wilson, has this conversation with Thirteen’s boyfriend, Foreman.

WILSON: [to Foreman]: You’re okay with this?

FOREMAN: I paid 50 bucks for this.

WILSON: You guys are great together. Trust is everything. I gotta get some air. Keep it real.

Thirteen is also not portrayed as an individual searching for her sexual identity. For example, in Episode twenty-two, Dr. Eric Foreman and Thirteen, who are currently in a sexual relationship with each other, have been sent on assignment by Dr. House to procure a female stripper who could do “a broken cowboy” for Dr. Chase’s upcoming bachelor party. No definition of what involves doing “a broken cowboy” is offered during the episode or subsequent episodes. In this scene, Thirteen and Foreman are shown sitting together at the strip club watching a pole dancer on stage. The scene changes to show a new pole dancer who walks up and grabs the pole. She then inverts and wraps one leg around it and spirals down not using her hands. Foreman turns to Thirteen and asked whether she thinks the pole dancer could do the “broken cowboy” to which Thirteen replies, “God, I hope so!” What this scene references is Thirteen’s continued sexual interest in women, though she is involved in a sexual relationship with a man.

In the next scene Thirteen and Foreman return to the hospital with photos and inform House of the result of their search. At first Thirteen tries to get herself an invitation by arguing that House implied that she could attend because he sent her with Foreman to scout a dancer for Chase’s bachelor party. When that doesn’t convince House, Thirteen gets herself an invitation by alluding to her bisexuality.

HOUSE: You’re not on the guest list. Bachelor parties are an ancient and sacred male rite of passage.

THIRTEEN: ... If I get drunk enough, there’s a chance I might make out with one of the strippers. Or become one.

HOUSE and AMBER: Sold!

Bisexuality is presented as a stable identity, different from homosexuality or heterosexuality, and is given a space on *House, M.D.* That is, the narrative structure of the series introduced Thirteen as bisexual and her sexuality remained bisexual throughout the season.

Grey's Anatomy: Bisexuality Definitely a Phase

Bisexuality, on the series *Grey's Anatomy*, is definitely portrayed as transient and temporary. Bisexuality is presented as a phase on *Grey's Anatomy* in the sense that Torres goes from being a once married heterosexual woman who is attracted to and has relationships with men, to a confused 'bisexual' woman who enjoys sexual encounters with men and women and can't decide whether she should identify as homosexual, to a homosexual woman who is only sexually attracted to women by the end of the season. This observation supports findings reported by studies on the portrayal of bisexuality in films (Barker et al 2008; Bryant 1997; Rust 1995), as mentioned in the previous section that bisexuality in films is mostly depicted as a phase a character goes through before arriving at their true inherent heterosexuality or homosexuality. Torres is depicted as finally arriving at her lesbian identity after her relationship with Hahn failed and is broken off. In Episode Ten, the series introduced a new female intern, Dr. Sadie Harris for whom Torres developed a sexual desire. Indication of Torres' sexual identity as a lesbian is presented here when she and Sloan attempt to have sex and she recognize that she is no longer sexually attracted to him because she is now sexually attracted to Dr. Harris. However, after this episode, Torres is only portrayed as having sexual attraction

exclusively for females. Though a relationship with Dr. Harris was never realized, she moves on to have a monogamous sexual relationship with female pediatric surgeon, Dr. Arizona Robbins.

Bisexual behavior, on *Grey's Anatomy*, is portrayed as experimentation. Dr. Torres, who was once married to a male colleague, Dr. George O'Malley, began the season deciding whether she wanted to pursue a relationship with female colleague, Dr. Erica Hahn, after they shared a kiss during the season finale of Season Four. In Episode Two, Torres regarded entering a relationship with Hahn as experimentation, as in trying out being with a female.

TORRES: (to Hahn) I'm not an experimenter. I don't like to experiment...then you showed up and we did it...together. And the experiment was kinda a success.

HAHN: Oh... (silence for a couple of seconds as they stare at each. Hahn seems confused) OH! (realizes Torres wasn't referring to the surgery they had just done together).

TORRES: Look, I've never done this before. I've never kissed a girl. I'm not sure I even like kissing girls. Don't actually like kissing girls. (Hahn frowns) Um, I just like kissing one girl. You.

HAHN: I don't have anything to compare it with. I, you are the only woman I've ever kissed.

The theme of bisexuality as experiment is alluded to in Episode Seven when Hahn broke off the relationship with Torres because of her lack of loyalty in a malpractice

accusation involving Dr Stevens, one of the surgical residents with whom they both worked. In this scene, Hahn is threatening to report Dr. Stevens to the United Network for Organ Sharing (UNOS) for misconduct, which would have resulted in the revocation of the hospital's transplant license. Torres tried to persuade her of the negative impact this could cause to the hospital and other residents. This dialogue, however, became a fight that resulted in Hahn ending the relationship after reprimanding Torres for experimenting at being a lesbian.

HAHN: Easy! There's right and there's wrong and this was wrong...and illegal. There is no gray area here. You can't kinda think this is okay. You can't kinda side with Izzie Stevens and you can't kinda be a lesbian.

Torres: Yes, I can.

Here, Torres admits to being "kinda lesbian" which suggest that she appears to be considering bisexuality. However, bisexual is never mentioned or alluded to and the statement was never elaborated in subsequent episodes.

In Episode Eight, Torres was asked by one of the residents, Dr. Yang, whether she was a lesbian (upon Yang's discovery of Torres' relationship and its connection to Hahn's resignation). Before Torres could respond, Sloan interjected that she wasn't a lesbian but that she might have been a "once-bian". This implied that Sloan thought of the relationship as an experiment and that Torres would soon revert to sleeping with men. Torres, however, speculated that she might have been a "twice-bian" indicating that she

had not quite renounced her sexual attraction to women. These and other instances of bisexuality were never articulated or explored during subsequent episodes of the season.

In Episode Fifteen, Torres is again accused of experimenting at being homosexual when she asked female pediatric surgeon, Dr. Arizona Robbins, out on a date after Dr. Robbins had kissed her at the end of Episode Fourteen.

TORRES: ...You, uh, share a kiss with a woman you've never seen before. Honestly, it's a new adventure. One I am so ready to take for the second time. Anyway, do you wanna go on a date with me?

ROBBINS: Wait, uh, Erica and you, she was your first?

TORRES: Yea.

ROBBINS: Oh. Ok, so then I guess my answer is no.

TORRES: Wait, wait, wait, what? Um, uh, you kissed me...out of nowhere...in a bathroom!

ROBBINS: Ah, see, this is what I try to avoid, you're all exploring and experimenting and...yay! This is a really exciting time for you but I'm working peds. I spent my entire day around newborns. So, I try not to in my personal life. Thanks for asking, though. I'm super flattered! Super!

Dr. Robbins, who identifies as lesbian, had assumed as a result of hospital gossip about Torres, that she was a lesbian. However, when she realized that Torres had only had one previous relationship with a woman, she chastised her for playing at being lesbian. This assumption that bisexuality is really only sexual experimentation supports popular

conception that bisexuality does not exist (Erickson-Schroth and Mitchell 2009). The outcome of this assumption is that bisexuality is continuously omitted from the articulation of sexuality.

Visibility of Bisexuality on Television

This section explores the ways in which each character's bisexuality is portrayed and discussed during the featured season of both series.

House, M.D.: Bisexuality Not Invisible

Bisexuality is openly discussed during the season of *House, M.D.* Contrary to studies of bisexuality in the media as the sexuality that “dare not speak its name” (Bryant 2001), bisexuality is constantly brought up and is mentioned or referenced during the season by House, Thirteen, and the rest of the diagnostic team. Though Thirteen's bisexuality is usually talked about in the form of stereotypes and jokes especially by her male colleagues, particularly her boss, Dr. House (as shown by these comments he made when referring to Thirteen's sexuality), it is still alluded to throughout the season.

In Episode Three, when working on a case involving a patient taking trial drugs for pay, he refers to one of the drugs as “bisexidrine” to which Thirteen, refusing to take the bait, nonchalantly responds, “Bisexidrine is designed as an anticoagulant. Phase one indicated some risk of nausea, ED and insomnia. Second drug...” This way of speaking about bisexuality continues all through the season with her male colleagues, House

especially, referring to Thirteen's sexuality through circumlocution, using phrases like "goes both ways."

In Episode Five of the season, House and Foreman are searching Thirteen's apartment because their current patient had had a seizure when she spent the night with Thirteen there. They are both in Thirteen's bedroom and House is holding an asthma inhaler that he took from Thirteen's nightstand drawer.

HOUSE: (to Foreman) You think an asthma inhaler could be used as a sex toy?

FOREMAN: There are ways of getting to know people without committing felonies.

HOUSE: People interest me. Conversations don't.

FOREMAN: Because conversations go both ways.

HOUSE and FOREMAN together: (both are smiling) Like Thirteen.

This phrase is continuously used during the season to describe Thirteen's sexual preference but mostly as ridicule. In another episode of the season (5.15), Foreman has been fired after he refused to acknowledge the ultimatum of discontinuing his relationship with Thirteen or being fired that had been presented to him by House. Thirteen offers to quit and accept a job in the ER of another hospital. She tells Foreman this, which leads to an argument.

THIRTEEN: House says if I go, you can come back.

FOREMAN: It's been less than two days. Give up on me that fast? You get a job behind my back?

THIRTEEN: You're acting like I'm cheating on you.

FOREMAN: I said I would handle this.

THIRTEEN: House knew you'd be like this.

FOREMAN: Wow. I guess House knows me better than you do. Too bad I don't go both ways.

Whether directly mentioned or indirectly implied, it is apparent on this season of *House, M.D.* that bisexuality is being discussed. The visibility of Thirteen's bisexuality in this season of *House, M.D.* is remarkable as it received more attention during the season, more so than the heterosexuality of any of her co-characters.

Grey's Anatomy: Bisexuality as Invisible

Bisexual behaviors are not at all discussed or alluded to on this season of *Grey's Anatomy*, even though there are instances of them. Bisexuality is invisible on the series in how Torres' relationships are portrayed. For example, when Torres was portrayed in a monogamous relationship with a male, as in when she was married to male colleague, Dr. George O'Malley in previous seasons, the relationship was rendered heterosexual and no mention or suggestion of sexual desire or attraction to females were represented. Furthermore, when Torres is depicted in a monogamous relationship with a female, as she is from Episode Nineteen to the end of Season Five, the relationship is presented as homosexual with Torres depicted as having no sexual interest, attraction, or desire for a sexual relationship with men. Bisexual behavior is instead described as a prelude to homosexuality. Though the character acknowledged her sexual attraction to men and

women, she however, does not attribute this to bisexuality. In Episode Six, after having sex with both Erica Hahn (female) and Mark Sloan (male) in a span of a day, Torres confessed her sexual attraction to men and women to Hahn,

TORRES: (to Hahn) ...You were crying and, and seeing leaves and I wasn't. Ok, I may never see leaves...or maybe I will see leaves, but I'll also see flowers. There might be a whole forest, but I don't know yet. I, I do know that I wanna be with you and to do that, I have to at least tell you the truth and the truth is, I slept with Mark Sloan today...

However, this is not characterized as bisexual behavior. Bisexual behavior on *Grey's Anatomy* is instead portrayed as a state of uncertainty during which Dr. Torres struggles to figure out her homosexual identity.

In the first few episodes of the season, Episode One to Episode Eight, Torres continuously questioned her sexual attraction to females and is hesitant to pursue it. Though Torres and Erica Hahn are presented at the beginning of the season as embarking on a same-sex sexual relationship for the first time, Hahn is however, presented as more certain of her same-sex attraction than Torres. While Torres seems reluctant to pursue her attraction to Hahn, Hahn actively initiated the relationship and actively pursued Torres until its conclusion. In this conversation in Episode Five between Torres and Dr. Mark Sloan, her male friend and sometime sexual partner, which occurred after Torres and Hahn had had their first sexual encounter illustrates this recurrent uncertainty.

TORRES: ...last night Erica and I, we...we...did it, sort of.

SLOAN: Congratulations!

TORRES: No, no, no, it was not good...at all. I choked. I...couldn't...go down there. I tried but it just felt so weird, clinical, like a gynie (OB/GYN) rotation! I left this morning before she got up. I couldn't even face her! What if me and Erica, what if, what if, we were a mistake?

In the same episode, Torres later informed Hahn of her lack of enjoyment of their sexual encounter and rationalized that it is evidence that disproved her sexual attraction to women. In this scene, Hahn and Torres are both looking at some x-rays, Hahn invites Torres out for coffee but while doing so caressed Torres' waist.

TORRES: (moves away, sighs and turns to face Hahn) I'm not cut out for this

HAHN: coffee?

TORRES: No, this. The touching and the...sex with a girl, let's just say I can't do it. Thought I could but...

HAHN: you did do it. I don't understand...oh.....it wasn't good for you.

(Torres shakes her head, "no")

Though Torres is still uncertain of her attraction to Hahn, she seemed determined make the relationship with work with Hahn. To do so, she propositioned her male colleague and sometime sexual partner, Dr. Mark Sloan, to demonstrate, by having sex with her, how to become good at sexual encounters with females.

TORRES: (to Sloan) ... I like to be good at things, ok? I do not fail. I do not quit. I like to be good at things and I want to be good at this. So, I need you, I need you...to show me.

SLOAN: Show you?

TORRES: just because you didn't publish a big clinical trial doesn't mean you're not a genius.

SLOAN: Fine. Take off your pants

TORRES: Really? Oh my god, thank you!

Episode Six began with Hahn and Torres in bed together, laughing. Apparently, the do-over had been a success. To Hahn, this is a confirmation of her own homosexual identity, and she is overcome with joy. Torres, on the hand, is not as convinced that enjoying sex with a woman indicates that she (Torres) is homosexual. Torres is again depicted as uncertain and even rejected that her sexual attraction to females affirmed her homosexuality as it had for Hahn.

Torres suspected that her own sexuality is not quite dichotomous. So, almost immediately after being with Hahn, she has sex with Mark Sloan to "test a theory" indicating uncertainty. She is, however, chagrined to find that she still enjoys sexual encounters with men as conveyed in this exchange with Sloan.

TORRES: Dammit!

SLOAN: What? It wasn't good for you?

TORRES: It's not that it wasn't good. (sighs) It's that it was.

And later,

TORRES: Erica cried this morning...in bed...after sex...

SLOAN: that was a compliment, for you. The crying was a compliment

TORRES: it wasn't a compliment for me. It was, she was having a revelation. She was having...the sex is awesome with Erica...we've reached awesome

SLOAN: awesome?

TORRES: yes. But also awesome with you!

SLOAN: So, what's the problem?

TORRES: (frowning) Guess I thought there should be a difference...between you and Erica. If I'm...there should be a difference.

What Torres did not articulate here was if she was homosexual, she should only experience sexual desire for women and no longer for men. However, instead of defining this realization as an instance of bisexuality, the possibility is not even alluded to.

In Episode Nine, Torres refers to herself as "gay".

TORRES: Sounds like my life, married, betrayed, gay, abandoned and then I woke up and I had no idea how I got here. I figure this is the bottom. It's as bad as it gets. Can only go up from here.

During this episode, Torres, Sloan, and some of the residents and interns are working on a case of a man who sleepwalked through a third story window and suffered major injuries requiring surgery. While trying to stabilize the patient, Torres is accidently hit in

the face by the patient and suffers a broken nose. Later during the same episode as Sloan, who specialize in plastic surgery, is repairing her nose.

TORRES: Ok. Well, at least I still have you right? At least you'll still be my friend and have sex with me when I want?

SLOAN: Anytime. You know, once your face heals...

In the episode Torres admits to both being gay and having sexual desire for a male. However, Torres as a bisexual is not acknowledged.

The Framing of Bisexuality on Scripted Television Shows

Even though there is an increase of bisexual representations on television shows, the problem of the quality of the visual representation with regards to stereotypes and negative image is not resolved by the increase in visibility alone. Though the increased presence of bisexuality may suggest a tolerance and inclusion of bisexuality, this only applies for those representations that do not undermine the traditional norms about sex and gender. Since bisexuality undermines heteronormative notions of gender and sexuality, one way of containing bisexuality is through the perpetuation of simplified negative conceptions.

Bisexuals as promiscuous and hypersexual

On *House, M.D.*, the stereotype of bisexuals as promiscuous is continuously depicted during the course of the season on *House, M.D.* This is especially apparent in Episode Five of the season. *Lucky Thirteen*, which opens with Thirteen and a woman

kissing and undressing each other. The woman later has a seizure and has to be admitted to Princeton- Plainsboro Teaching Hospital (PPTH) for diagnosis and treatment. When Thirteen and the patient arrive at the hospital, Dr. Cameron was unable to adequately check the patient in since Thirteen was unable to provide identification for the patient even though the patient was with her. When Cameron asked Thirteen the duration of the seizure, Thirteen was able to offer that it was a little over three minutes. She then ask whether Thirteen's friend has a history of epilepsy, to which Thirteen answered that the friend never said. Dr. Cameron then asked Thirteen the name of the patient to which Thirteen replies, "I don't know." Later in the episode, House and Foreman go to search Thirteen's apartment to determine what had caused the patient's seizure the night before. While rummaging through her nightstand drawer, they speculate on Thirteen's sex life.

HOUSE: Last night wasn't the first time that Thirteen brought home some stranger.

FOREMAN: You found her dairy –

HOUSE: No toys. You sleep with the same person over and over, that's when you need accessories. First time is plenty exciting on its own.

In the same episode, Thirteen is examining the patient, Spencer, for a spider bite still trying to determine what caused her seizure.

THIRTEEN: (to Spencer while doing the examination) Look...I really had no intention of ever seeing you again.

SPENCER: So...having me end up here is a little less than ideal. I get it.

But...we just met. How do you know you didn't want to see me again?

THIRTEEN: It's nothing personal I'm just really not that into repeat performances.

SPENCER: I figured I wasn't the first girl you cruised.

This conversation alludes to Thirteen's preference for one night stands, the very definition of promiscuity. Again this stereotype is reemphasized at the end of the episode where Thirteen is shown in her apartment kissing a different woman.

This conception of bisexuality is repeatedly presented or discussed throughout the season. In episode 15, *Unfaithful*, Thirteen's colleague Taub and Kutner weigh in on Thirteen and Foreman's sexual relationship. In this episode, House threatens to fire Foreman if he does not discontinue his relationship with Thirteen, citing that the department was broken due to Foreman's tampering with a medical drug trial that had almost cost him his medical license in order to help his girlfriend, Thirteen, who has been diagnosed with Huntington disease.

TAUB: [to Kutner] If you ask me, Foreman should be done with Thirteen.

He's not gonna get a better job, which means he'll end up resenting her for losing this one, which she'll end up resenting.

KUTNER: Or the hardship'll bring them closer together. She'll invite friends over for Foreman to share.

Throughout the season, the stereotype of bisexuals as promiscuous is reinforced not only through Thirteen's actions but also through her dialogue and those of the rest of the cast.

Since the character's bisexuality is not portrayed in this season of *Grey's Anatomy*, there was not necessarily a recurring theme around bisexuals as hypersexual and promiscuity. However, during the brief interval when Torres is shown struggling to define her sexuality as either heterosexual or homosexual, is where she exhibited the most overt bisexual behaviors. This occurred in Episode Six, where she is portrayed as both promiscuous and hypersexual. In this episode, she has sexual encounters with two individuals within the span of twelve hours. She also has sexual encounters three times during the span of a day, twice with male colleague, Sloan, and once with female colleague, Hahn. This is, on the other hand, presented within the context of confusion and experimentation as Torres struggles to define her sexual identity.

Bisexuals as Incapable of Monogamy

Promiscuity, as described in the previous section, denotes the assumed tendency of bisexuals (not accounting for sexual relationship status) to casually participate in indiscriminate sexual relations. This section, however, examines the characterizations of the bisexual characters during the moments they are portrayed as being involved in a committed sexual relationship.

According to previous studies (Burlison 2005; Bryant 1997; McLean 2007; Pramaggiore 2002; Rust 2000), disbelief in the existence of bisexuality has led to

stereotypes that bisexuals are incapable of finding satisfaction with one partner of either gender and therefore are incapable of monogamy. This conception that bisexuals are incapable of monogamous relationships recurs throughout the fifth season of *House, M.D.* with Foreman (Thirteen's boyfriend), and her colleagues frequently questioning the possibility of her ability to maintain a monogamous relationship.

KUTNER: [to Thirteen] He's obviously just jerking you around, want to see if you're serious. If you just stick it out, I think he'll bring Foreman back.

TAUB: I don't. Even if I'm wrong, I think you should still split up. It's just a matter of time before one of you finds the other in bed with another woman.

In another episode (5. 16), during a search of an intersex teenage patient's room, Foreman brings up his doubts about Thirteen's capacity to have a monogamous relationship.

FOREMAN: [to Thirteen] ...you miss sleeping with other women?

THIRTEEN: Excuse me?

FOREMAN: simple question

THIRTEEN: Yes. It's a simple answer. [discuss aspects of the case they're working on] I also miss sleeping with other men and I'm sure you miss sleeping with other women. Monogamy is like saying you're never going to have any other ice cream flavor besides Rocky Road.

FOREMAN: So, you're saying, if you don't have pink bubble gum for a while that one day you're going to chase down the ice cream truck?

THIRTEEN: No. Rocky road is great. It's very delicious and complicated flavor. I also know that if I have other flavors, then Rocky Road is going to be left in the freezer where anyone can just dip in...

When a bisexual enters a monogamous relationship their bisexual identity can become invisible or read as homosexuality or heterosexuality depending on the sex and gender of the individual they're in a sexual relationship with. During the season, Thirteen is portrayed as being in a monogamous relationship with male colleague, Foreman, however, she still maintains her attraction and desires for women and does not relinquish her bisexuality. What she explains to Foreman in this conversation is that though she is still attracted to both men and women, she prefers her current monogamous relationship status. Thirteen explains in this conversation that being bisexual does not indicate that she is incapable of maintaining a monogamous relationship. That is, a monogamous relationship can be just as important to a bisexual as it can be to a mono-sexual. Being bisexual doesn't automatically signify an inability to exclusively commit in a sexual relationship. With this conversation, the show provided Thirteen the opportunity to address this common conception about bisexuality. There are many instances in the series which allowed Thirteen to accomplish this.

The supposed inability of bisexuals to maintain a monogamous relationship was presented throughout the season not as fact, but as mere speculations by Foreman and

Thirteen's colleagues. The episodes from the beginning of Foreman and Thirteen's relationship until the end (in the following season), provided no evidence or justification for this stereotype. Though the series reinforces this stereotype through its depiction, the series also provides a counter-discourse of bisexuality by not portraying the character performing the stereotype.

Questions of monogamy are not prevalent on *Grey's Anatomy* since bisexuality is not determined during the season. It only becomes apparent during the point in the season when Torres exhibits the most stereotypical bisexual behavior in Episode Six when she has sexual encounters with both Erica Hahn and Mark Sloan in the span of a day. The concept that bisexuals are incapable of monogamy occurs during this time as Torres is shown in concurrent sexual encounters with a male and the female. This supports the belief that in order to be bisexual, an individual has to be in a relationship with a male and a female at the same time. So, therefore, bisexuals are incapable of monogamous relationships. After Torres sleeps with Sloan for the second time that day, Sloan points out her unfaithfulness by accusing her for being a cheater for sleeping with him without Hahn's knowledge.

SLOAN: the difference between me and Erica...is that I know you had sex with her twelve hours ago. She doesn't know you had sex with me and that makes you a cheater. Do you wanna be a cheater? Cuz, I'm fine with it. Question is, are you?

During Episode Twenty of the season, Torres admits to her dad to having had an extramarital affair with Sloan during her marriage to O'Malley. However, when Torres is

in a relationship with Robbins, she is portrayed as being very faithful and capable of monogamy in her relationship.

Bisexuals as Unstable and Self-destructive

Bisexuals are often accused of being internally conflicted or otherwise unstable (Rust 2000). This is mostly noticeable on *House, M.D* than on *Grey's Anatomy*.

On *House, M.D.*, Thirteen is sometimes portrayed as unstable or as having a history of instability in several episodes of this season. For instance, From Episode One to Episode Nine, she refused to seek medical attention for her diagnosis with hereditary Huntington disease. In Episode Five, she was portrayed as promiscuous, engaging in one night stands, drugs were found at her apartment, and she was caught administering Intravenous fluids to herself to detoxify after a particularly wild night out.

HOUSE: Why not men? You're bisexual. If you were just being self-destructive, you'd be having random sex with men. Better chances of getting assaulted, catching a disease. If this were just about getting laid, it'd be a lot easier to pick up men. Or ugly girls. But this woman's hot. Which means you like the challenge, the conquest. It's the control that gets you off. And controlling women is as close as you can get to controlling what's going to happen to you.

THIRTEEN: Here I thought I was just into boobs.

In Episode Six, Thirteen was portrayed as being very knowledgeable about prostitution and narcotics. During a case involving a single father who sleepwalked and was unable to express emotions, Thirteen and Taub were tasked to follow the patient while he sleepwalked. She was able to tell that the woman walking up to the patient's car was a drug dealer when her colleague wrongly guessed she was a prostitute. Later, during the same episode, when she and Taub were tasked to obtain a sample of the diluted cocaine tampered with powder milk acquired by the patient, she was also able to expertly tell that the pure cocaine they got from the drug dealer was not the same as the cocaine the patient bought, and that the first batch of cocaine a drug dealer sells is usually their best batch. In Episode Nine, a gunman demanding to be diagnosed holds Thirteen, House and some patients as hostages. When the gunman threatened to shoot one of the hostages if someone does not test out his treatments before they were administered to him, Thirteen volunteered to become a guinea pig and test out each treatment even though, with her diagnosis with Huntington disease, they might cause her death. It is after this episode that Thirteen finally accepted Foreman's invitation to participate in his Huntington clinical drug trial.

Of all the main and recurring characters portrayed in this season of the series, Thirteen and Dr. House were the only ones depicted engaging in self-destructive behaviors. Dr. House's vicodine addiction was presented as necessary to alleviate his constant state of pain due to a leg injury, and thus accepted. The reasons for Thirteen's self-destructive behaviors were a lot more complicated and varied. For example,

Thirteen's co-characters seemed to attribute her self-destructive behaviors more to her reaction to being diagnosed with a terminal illness than to her bisexuality.

HOUSE: (in Episode Five) Empty transient sex? [to Thirteen] I've been waiting for you to spiral out of control, ever since you got your Huntington's diagnosis, but this is more than I dared hoped for.

However, several episodes of the series seem to suggest otherwise. For instance, Episode Six of Season Five of the series implied that Thirteen had engaged in self-destructive behaviors, such as promiscuity and drug use, prior to being diagnosed with Huntington disease (which occurred at the beginning of Season Five).

Bisexuality and Definitions of Gender

The role of gender in the categorization of sexuality situates the definition of sexuality within a dichotomous social construction of oppositional genders. This illusion of gender and sexuality leads to cultural constructions that "man" and "woman" are two mutually exclusive categories and sexual attraction is real only if it is to an individual of the same or opposite sex, not both. In this sense, sexual attraction to men and women is culturally constructed to be contrary to each other. That is, an individual is either heterosexual or homosexual based on the gender of the person to whom he/she has a sexual attraction to or is engaged in a sexual relationship with.

Bisexuality has the capacity to disrupt this dichotomous perception of gender and sexuality since the one thing that is used to define sexual identity is the one thing that cannot define bisexuality, gender (Rust 2000). For bisexuals, sex and gender is not the

primary influence in the choice of sexual partners. Other characteristics such as intelligence, chemistry, and personality take more precedence in their decision. This way of approaching sexuality destabilizes the centrality of gender in the definition of sexual identity.

Gender is not presented as significant in influencing Thirteen's choices of sexual partners. Throughout the season, her sexual fluidity is portrayed without the debate of whether the gender of her sexual partner determined her sexuality. She was shown in relationships with a male and females during the season, but her sexuality did not come into question based on who she was, at the moment, in a relationship with. That is, Thirteen was not rendered heterosexual because she was in a relationship with Eric Foreman nor was she rendered homosexual based on her one night stand with Spencer, a female. During either of those relationships, there was always an indication of her sexual fluidity. For example, in Episode Three while working on a case of an artist with a distorted perspective,

HOUSE: Is his girlfriend hot? I'm not talking fever here. I mean, is she all curvy and perky?

THIRTEEN: Very...and if he dies, it's good news for all of us, but –

Thirteen's bisexuality also allowed her to perform gender in ways that disrupted conventional understandings of sex and gender. Thirteen's gender, as portrayed during the season, was as fluid as her sexuality. That is, she was able to traverse not only sexual boundaries, but gender boundaries as well, as she maintained feminine as well as masculine characteristics throughout the season. As the only female in a team of males,

Thirteen was able to achieve group membership by using her bisexuality to align with the male (and heterosexual) characters. For example, she was able to obtain an invitation to Chase's bachelor party, an event House called "an ancient and sacred male rite of passage," by alluding to her bisexuality. She and her male colleagues' mutual sexual attraction and desire for women facilitated her inclusion in activities and participation in discussions from which she would have otherwise been excluded because of her sex and gender.

Gender is also denied importance in the character's resistance to being fixed in a sexual stereotype that could sexually categorize her in binary terms by seeming to always remind her co-characters and the audience of her bisexuality through behaviors and comments that allude to it.

However, on *Grey's Anatomy*, gender plays a significant role in the sexuality of the bisexual character, Torres. In fact, gender is the foundation on which her sexuality is represented.

TORRES: (looks miserable and says softly to Bailey) I'm going on a date with Erica Hahn. (Bailey looks stunned) and, um that's awkward because, uh... she's a colleague and...because she's an attending and because she's a she...

The perceived duality of gender is reinforced on *Grey's Anatomy* when Torres believes that she should only feel sexual attractions and desire for one gender and not the other. This reemphasizes that one can only be attracted to the same or opposite gender but not simultaneously. If an individual is attracted and has sexual desire for males and females,

he or she must choose one. Torres does so in the latter half of the season with the termination of her sexual relationship with Mark Sloan, her sexual desire for Dr. Sadie Harris, and her subsequent relationship with Dr. Arizona Robbins. The gender of Torres' sexual partner determined how her sexual identity is construed.

DISCUSSION

Bisexuality and Perceptions of Sexuality

Sexuality is perceived to follow from gender which is assumed to follow from sex. Therefore, conventional sexual discourse functions to restrict how sex and gender are presented, understood, and performed in social reality. This is accomplished through the endorsement of a binary gender and sexual system (Butler 1999). Attempts by both of the series to explain each character's sexual behaviors not only distinctly exemplified the limitation of articulating sexualities within binary categories but also undeniably exposed the social constructions of gender and sexuality.

However, though the constructiveness of sexuality is revealed, both series (*House*, *M.D* especially), refrain from capitalizing on the opportunity to reconstruct concepts of gender and sexuality in ways that would otherwise include expressions of sexualities outside of either-or gender and sexual categories. This is because, as Foucault argued, understandings of sexuality are pervaded by relations of power. According to Foucault (1990), the examination of discourse should be conducted at two levels: the investigation of the reciprocal effect that power and knowledge guarantee and what makes this utilization necessary.

Many individuals' personal, social and political identities are dependent on binary categories. Power relations based on a binary structure of gender and sexuality

determine how resources are allocated and certain gender and sexual identities benefit more than others from the stability and perpetuation of these categorizations (Gamson 1998). Heterosexuality and homosexuality mutually benefit from the dismissal of bisexuality through the preservation of the institution of two inherent and mutually exclusive categories of gender and sexuality. Recent studies on mainstream Hollywood depictions of non-heterosexuality concluded that these representations do not seek to challenge or disrupt heteronormativity, but instead to reinforce it (Avila – Saavedra 2009; Dean 2007; Meyer 2009; Porfido 2009).

An examination of the major themes in the construction of non-heterosexual identity on American television established that non-heterosexuality is presented in the media only in ways that are acceptable to heterosexual audiences. This is accomplished through the emphasis of traditional heterosexual values, such as family, monogamy, and stability that reinforces the heterosexual/homosexual binary. This binary division of sexuality between homosexuality and heterosexuality also serve to dismiss sexual fluidity and alternative sexualities (Cover 2000). These are made evident in the treatment of bisexuality on each of the series through the following: the depreciation of bisexuality, the emphasis on equating bisexuality with sexual non-monogamy, and the preference for or increased tolerance of homosexuality over bisexuality. It is apparent that heteronormative values, norms and beliefs are being upheld in the regulation of how bisexuality is perceived and thus how bisexuality is represented.

In this case of *House, M.D.*, bisexuality was depicted as a distinct sexual identity, but only in such a way that it did not seriously challenge conventional understandings of

sexuality. That is, Season Five of the series did not regularly confront perceptions of sexuality. “Regularly confront,” in this sense, means the series pushed some boundaries with regards to the presentation of bisexuality by allowing for the establishment of some articulations of bisexuality but only in ways that did not transform prevailing notions of sexuality. This was demonstrated in the ways in which bisexuality was explained and framed during the season.

On *Grey’s Anatomy*, bisexuality, within the current understandings of sexuality and gender, could not be simply integrated and was thus dismissed. The representation of Torres’ sexuality on *Grey’s Anatomy* reinforced the dichotomy of sexual attraction and identity. The polarization of gender and sexuality was perpetuated on *Grey’s Anatomy* in the inability to articulate bisexuality. That is, though bisexual behaviors were exhibited during this season of the series, those behaviors were either attributed to homosexuality or overlooked. One could argue that bisexuality proved more threatening to heteronormativity than homosexuality since it contests the very foundation of both, the presumed naturalness of binary gender and sexual categories.

Both characters, whether or not their bisexuality was made explicitly apparent, were shown to traverse the assumed rigid boundaries of gender and sexuality. A conclusion one might draw is that binary sexual classifications are over-simplified, unstable, and that sexuality cannot necessarily be adequately explained within two categories (Gamson 1998). For *Grey’s Anatomy*, the imperceptibility of bisexuality on the series illustrates that the binary structures of gender and sexuality are clearly insufficient to explain all that encompasses sexuality. Relegating bisexual behaviors to

experimentation, uncertainty, and confusion, functioned to reinstate the notion that there are only two ways of expressing sexuality. It also reinforced the illusion of the inherence of one same or opposite sexual attraction. Season Five of the series did not challenge or disrupt heteronormative but instead defined and highlighted it. Though sexual fluidity was portrayed on Season Five of the series, it was alluded to with ambiguity and suspicion. Ambiguity in the sense that bisexuality was presented in such a way that it could easily be read as homosexuality. In addition, it was never made apparent whether that was the intent of the scene or the series. Suspicion in that bisexuality, in a number of episodes, could be suspected but was by no means affirmed.

Bisexuality on Season Five of *House, M.D.* did disrupt the dichotomous discourse of sexuality by allowing a space where bisexuality could be articulated, if only momentarily. Thirteen was given a space. She was a recurring character who was allowed to express her sexuality in ways that were not confined to the conventional understandings of sexuality. Gamson (1998) found, in his examination of the complicated and contradictory ways in which non-heterosexual identified individuals make their way through daytime tabloid talk shows as both subjects and objects in *Freaks Talk Back*, that though talk shows reinstate sexual and gender dichotomies, they also serve to simultaneously disrupt them by explicitly illustrating the fluidity of sexualities and blurring the ostensibly fixed boundary that demarcate sexual categories. *House, M.D.* served a comparable purpose here by allowing a space to articulate bisexuality while simultaneously reinforcing heterosexuality (since Thirteen was the only non-heterosexual character on the series). Though Thirteen's ability to express her sexuality

did establish an acknowledgement of bisexuality, it did not contest heteronormative conceptions of dichotomous sexuality. Also, the bisexual character is temporary, in the sense that she had been diagnosed with an aggressive terminal illness. This gives the series an “out” if the boundaries of sexuality are pushed too far.

Talk shows are observably different from scripted fictional television in how information is presented. However, though Gamson, in *Freaks Talk Back*, is specifically investigating television talk shows, it is apparent that the discussion of bisexuality on television, in particular, is almost always presented along the following themes: the determination of whether bisexuality conforms to the rules, norms, and values of sexuality; the identification of its direct correlation to promiscuity and issues of sexual non-monogamy; the rationalization that bisexuality is ultimately an unwillingness to choose between the two firmly established constitutions of sexuality; and the inability to discern bisexuality from other sexualities.

Though, there were no obvious discussions of whether bisexuality conforms to the rules, norms, and values of sexuality on *House, M.D.*, it did, however, come into play. Thirteen did not conform to the rules, norms, and values of sexuality in her refusal to choose between homosexuality and heterosexuality and her coherent expressions and discussions of bisexuality. The questioning and implied disapproval they warranted from her co-characters also suggest that Thirteen was, in fact, transgressing the norms, rules, and values of conventional perceptions of sexuality. On *Grey's Anatomy*, that bisexuality was not discussed makes evident that explanations of Torres' sexuality were meant to conform to the rules, norms, and values of conventional understandings of sexuality.

On television talk shows, bisexuality is tantamount to promiscuity and is mostly discussed in terms of non-monogamy and the issues it causes in sexual relationships. Discussions of bisexuality were presented similarly in both television series analyzed. For Thirteen, on *House, M.D.*, this was presented in the depiction of her random one night stands and the frequent questioning of the integrity of her relationship with boyfriend, Eric Foreman. It was also presented in *Grey's Anatomy* during the brief period when Torres was involved with both Mark Sloan and Erica Hahn. These representations demonstrate this preoccupation with presumed issues of monogamy whenever bisexuality is indicated.

According to Gamson's study (1998), discussion of choice in relation to sexuality differed when applied to certain gender and sexual nonconformity. For homosexuals, sexuality is presented as a lack of choice that supports the inherence of binary sexualities. However, for bisexuals, the imperative of choice is emphasized. Bisexuals are criticized for their unwillingness to choose between homosexuality and heterosexuality, and in this sense, sexuality is ironically presented as a choice. Though *House, M.D.* did not directly tackle this issue of choice in the depiction of the bisexual character, discussions of bisexuality on the series implied that there had to be one. For example, the frequent use of the phrase "goes both ways" throughout the season to describe bisexuality supports the concept that sexuality can only be expressed in two ways, homosexually or heterosexually. So, though it was apparent on this season of *House, M.D.* that bisexuality was being discussed, it was being discussed within the context of a hybrid identity that maintained the dichotomous constructions of gender and sexuality.

Bisexuality, on *Grey's Anatomy*, was not presented as a substantiated sexual identity. It was presented as personal choice. One can choose to be attracted to men and women simultaneously or one can choose to identify as heterosexual or homosexual. Torres ultimately made a choice and decided in favor of homosexuality. By doing so, *Grey's Anatomy* provided no space for the articulation of bisexuality as bisexuality was not alluded to, defined, and was susceptible to misconception on the series (during the season analyzed).

The depictions of Thirteen and Torres' sexuality also prove that visibility is not necessarily the endgame in the struggle for the acknowledgment of bisexuality. As shown in both these series, most especially on *House, M.D.*, visibility comes at a price. Though bisexuality was represented on *House, M.D.*, it was framed within preexisting hetero-homo sexual perceptions of bisexuality. That is, apart from the tolerance of Thirteen's expressions of her sexuality and a few opportunities to offer some form of explanation on what involves being a bisexual, the conversation around bisexuality was mostly steeped in clichés and the presentations of bisexuality were not particularly favorable.

Foucault (1990) asserts that identities are historically constructed from the materials available to individuals in discourse. Media content is a form of discourse and plays an influential role in the construction of social reality. The contextualization of bisexuality in media discourse can influence the perceptions of bisexual youth and their establishment and performance of their sexual identities. This is because information from the media is more accessible and there are not many other sources of information available. Studies of media representations of bisexuality are noteworthy for the

following reasons: they provide information on what representations of bisexuality are available; they note that mainstream media may not necessarily be providing the resources required for bisexual youth to establish and express their sexual identities; they advocate for a more inclusive articulation of sexuality; and hopefully increase the awareness of bisexual youth that mono-sexuality is not necessarily the only way to perform sexuality.

Limitations

This study, however, has several limitations. For example, the research method used for this study is content analysis. Content analysis provides great insight into media messages being disseminated to the American public. However, it does not take into account audience perceptions or how the media content is produced.

Both of the series featured in this study were medical dramas. The availability of a diversity of genres portraying bisexuality would have provided more understandings of media representations of bisexuality.

The study was also limited in the scope of content analyzed. Only one season per series was analyzed for this study. Since only one year of programming per season was considered, the season before or subsequent seasons may have provided more data and insights on how bisexuality is conveyed on television.

There is a scarcity of media content that features bisexual perspectives on television, especially broadcast television. According to the GLAAD “Where We Are On TV” report for the 2009 to 2010 season, representations of regular and recurring bisexual

characters are declining with broadcast networks decreasing by one character from the previous season and cable decreasing by an alarming five characters from the previous season. This may hinder not only future and expended research on bisexuality in the media but also overall perceptions of bisexuality.

CONCLUSION

Bisexuality provides a space from which essentialized notions of gender and sexuality can be contested. Media content is significantly influential in shaping our understanding of social issues occurring in our social world and may actually provide firsthand experience, ideas, and knowledge of individuals not interacted with in everyday life. Investigating representations of bisexual identity on American television can illuminate how bisexuality is understood, defined, and socially constructed on American television.

Findings from this analysis suggest that there is evidence that bisexuality is being presented on American television. However, there are disparities in how it is being presented. Bisexuality, on American television, is marginalized. Media messages about bisexuality are often ambivalent and are mostly conveyed within existing sexuality discussion that excludes bisexuality. If an articulation of bisexuality is to be established, media messages about bisexuality should begin to explicitly recognize the existence of bisexuality as a distinct sexual identity and produce content that articulate bisexuality as such. This requires additional research on the production and media representations of bisexuality, including audience reactions to these media contents.

Recommendations

Though there have been fewer regular and recurring bisexual characters on both broadcast and cable networks, cable networks still had more bisexual characters in their programming than broadcast networks with twenty characters compared to eight characters between the 2007 and 2009 seasons. Therefore, a consideration of bisexuality on cable network may provide more data and perspectives on bisexuality on television.

An exploration of cable networks' representations of bisexuality might also provide a whole range of perspectives on bisexuality since the networks are privately owned and thus have more control over their content.

Studies of how media content on bisexuality are being decoded could prove constructive to understanding viewers' perceptions of and attitudes towards bisexuality. These explorations could provide solutions about the ways knowledge of and discussions about bisexuality could be used to foster a re-articulation of sexuality.

APPENDICES

APPENDIX - A

List of Episodes of Season Five of *House, M.D.* that aired during the 2008 to 2009 – Episodes aired about three times a month from September 16th, 2008 to May 11th, 2009:

1. Season Premiere: “Dying Changes Everything “
2. “Not Cancer”
3. “Adverse Events”
4. “Birthmark”
5. “Lucky Thirteen”
6. “Joy”
7. “The Itch”
8. “Emancipation”
9. “Last Resort”
10. “Let Them Eat Cake”
11. “Joy to the World”
12. “Painless”
13. “Big Baby”
14. “The Greater Good”
15. “Unfaithful”
16. “The Softer Side”
17. “The Social Contract”
18. “Here Kitty”
19. “Locked In”
20. “Simple Explanation”
21. “Savior”
22. “House Divided”
23. “Under My Skin”
24. Season Finale: “Both Sides Now”

APPENDIX – B

List of Episodes of Season Five of *Grey's Anatomy* that aired during the 2008 to 2009 – Episodes aired approximately two to three times a month from September 25th, 2008 to May 14th, 2009:

1. Two Part Season Premiere: “Dream a Little Dream of Me: Part I”
2. “Dream a Little Dream of Me: Part II”
3. “Here Comes the Flood”
4. “Brave New World”
5. “There’s No “I” in Team”
6. “Life During Wartime”
7. “Rise Up”
8. “These Ties that Bind”
9. “In the Midnight Hour”
10. “All By Myself”
11. “Wish You Were Here”
12. “Sympathy for the Devil”
13. “Stairway to Heaven”
14. “Beat Your Heart Out”
15. “Before and After”
16. “An Honest Mistake”
17. “I Will Follow You Into the Dark”
18. “Stand By Me”
19. “Elevator Love Letter”
20. “Sweet Surrender”
21. “No Good at Saying Sorry (One More Chance)”
22. “What a Difference a Day Makes”
23. “Here’s to Future Days”
24. Season Finale: “Now or Never”

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CURRICULUM VITAE

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