

Harold Bloom, in *Shakespeare: The Invention of the Human*, argues that “*Romeo and Juliet* is unmatched, in Shakespeare and in the world’s literature, as a vision of an uncompromising mutual love that perishes of its own idealism and intensity” (Bloom 1998, p. 89).

Most star-crossed lovers—either one or both—attempt to defy fate. Hearing that Juliet is dead, Romeo—the very Romeo who cried after killing Tybalt “O, I am fortune’s fool!” (III.ii.139)—declares “Then I defy you, stars!” (V.i.24) and tries to take charge of his own destiny. Although such action heightens passion and strengthens the lovers’ resolve, it also accelerates the journey to tragedy and doom.

Star-crossed love endures as a major theme in literature and film in the early twenty-first century, though sometimes the cause of the lovers’ doom shifts from destiny toward psychological as well as social forces. As an expression of the unattainable—or unsustainable—passionate ideal, it reflects an enduring and widespread human need.

SEE ALSO *Love Poetry; Romeo and Juliet; Shakespeare, William.*

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## STEIN, GERTRUDE AND ALICE B. TOKLAS

1874–1946 and 1877–1967

Gertrude Stein and Alice B. Toklas were lifelong friends, lovers, domestic partners, and creative collaborators. They both grew up in the San Francisco area but did not meet until 1907 at Stein’s brother’s house in Paris. They were among the premier expatriate couples of Paris modernism, and remain one of the best-known lesbian couples of the twentieth century. It is significant that Stein’s most popular and enduring work, *The Autobiography of Alice B. Toklas* (1933), is a fictional autobiography that conflates the couple’s subjectivities into those of the fictional Alice; in its pages, Gertrude Stein writes as if she were Alice Toklas writing about Gertrude Stein. *The Autobiography of Alice B. Toklas* is an enduring portrait of Paris, its cafes, parties, famous artists, and writers, in the years between 1910 and 1930. This vibrant culture is contextualized in terms of the women’s mutually interdependent and generative lesbian relationship.

#### STEIN: BECOMING A WRITER

Gertrude Stein was born in Allegheny, Pennsylvania, on February 3. When she was three, her family moved to Vienna, and then to Paris. After two years in Europe, her family moved to Oakland, California. Stein lived there until she attended Radcliffe College, graduating in 1897. She then spent two years at Johns Hopkins School of Medicine but left without earning a degree. She moved back to Paris in 1903, where she lived with her brother Leo at 27 Rue de Fleuras. Leo was an art critic, and Gertrude began collecting art with him, lining the walls of their atelier with paintings by Auguste Renoir, Edouard Manet, and Paul Cézanne. The siblings’ famous salon began when they started inviting people to view their paintings.

In 1903 Gertrude wrote a short novel about a failed lesbian love triangle, *Q. E. D.*, but did not try to publish it, perhaps because of its autobiographical subject matter. She claimed to have forgotten about it until 1932. In 1903 she also began writing the long novel *The Making of Americans*. In 1904 she began the novella *Fernhurst*, and in 1905 started *Three Lives*, a series of three novellas about three working-class women from Baltimore.

*Three Lives* was finally published in 1909. The other writings were published later—*The Making of Americans* in 1925, *Fernhurst* and *Q.E.D.* together (posthumously) in 1971. Whether or not Stein truly forgot about her first novel, *Q. E. D.*, several of its characters, situations, and lines of dialogic reappear in recognizable form in the middle novella of *Three Lives*, “Melancha,” about a mixed-race woman who is ostracized because she believes in the free expression of sexual desire. She has numerous affairs with both men and women, rejects marriage with a

popular doctor, and is finally betrayed by her best friend Rose, who breaks with Melanctha because she is not sexually respectable. Melanctha dies of consumption, suffering the sad demise common to the literary stereotype of the tragic mulatto she represents, but her story is also the story of marginalized desire and betrayal first touched on in *Q. E. D.*

"Melanctha" is a formally innovative text that uses an unreliable racist narrator, run-on sentences, and African American speech patterns to create a new, impressionistic way of writing. Critics hailed its portraits of black characters; some thought it was among the most sympathetic and realistic portrayals yet published, whereas other readers condemned the text for trafficking in the demeaning kind of racist stereotypes found in pulp novels and minstrel shows. "Melanctha" proved an early example of primitivism, a mode of representation that conflated non-Anglo-Saxon racial heritage—being of Jewish or African descent—with unconventional sexuality, such as homosexuality or sexual promiscuity. Primitivism was a fantasy wherein anyone could throw off the constraints of civilization and embrace the savage that lurked within. Visual artists such as Pablo Picasso were working with primitivist facial masks at the same time that Stein was writing "Melanctha," and certainly primitivist notions of character allowed Stein to create an experimental, streaming style of prose narrative and dialogue that helped put her on the literary map.

#### STEIN AND TOKLAS: LIFE AND WORK TOGETHER

By 1909 Stein was living with Alice B. Toklas, whom she had met two years earlier. Toklas was born in San Francisco on April 30. She attended the University of Seattle and then the University of Washington, where she studied music. When her mother died she returned to San Francisco to care for her father and brother for the next ten years, finally leaving at the age of twenty-nine to start her own life in Paris. Toklas met Stein almost immediately upon her arrival in France in 1907. By the next year, Toklas had taught herself to type in order to transcribe Stein's manuscripts, and she quickly became Stein's partner, secretary, confidant, muse, audience, and household manager. Toklas had excellent taste in paintings, furniture, and music, and was a very good cook. Stein and Toklas wrote each other love notes, calling each other by pet names such as "pussy" and "lovey." Stein wrote coded erotic poetry about their life together, the most famous example of which is *Lifting Belly*, written during World War I but not published until after Stein's death. Many feminist critics consider *Lifting Belly* to be a classic of lesbian literature, and see the word *cow*—a term sprinkled throughout Stein's writing—as a coded reference to orgasm:



Gertrude Stein and Alice Toklas. AP IMAGES.

Lifting belly high.  
That is what I adore always more and more.  
Come out cow.  
Little connections.  
Yes oh yes cow come out.

(Stein 1989, p. 33)

After Leo moved out of the Rue de Fleurus in 1910, Stein and Toklas continued the literary and artistic salon, hosting writers Ernest Hemingway, F. Scott Fitzgerald, and Sherwood Anderson and artists Picasso, Henri Matisse, and Georges Braque, among others. In *The Autobiography of Alice B. Toklas*, Alice talks about sitting with the wives while Stein visits with her male "genius" friends. The book is a loving tribute to Toklas's observational skills and engaging character, and it made Toklas, and the relationship between the women, famous when it was published.

After *The Autobiography of Alice B. Toklas*, Stein and Toklas went on a lecture tour of the United States, and Stein received book contracts for subsequent work from the publisher Random House. During their life together, Stein published several volumes of memoirs, countless portraits, many poems, and several essays on writing. Stein and Toklas survived two world wars, driving medical supplies during World War I and laying low in the

countryside of Balignin and Caloz during the Nazi occupation of France in World War II. Their friendship with Vichy collaborator Bernard Fay helped them escape Nazi persecution, and Stein has been criticized for her self-serving politics during an era when other Jews were being sent to concentration camps and exterminated. Stein died of stomach cancer in 1946, leaving her estate to Toklas, who lived on for two decades. Without legal status as Stein's widow, however, Toklas eventually lost many of the paintings to members of Stein's family, who challenged her rights to them. After Stein's death, Toklas struggled financially, occasionally selling a painting and publishing letters and an autobiography, *What Is Remembered* (1963), and a famous cookbook, *The Alice B. Toklas Cook Book* (1954), to support herself. She is buried next to Stein in Père Lachaise Cemetery in Paris.

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## STERILIZATION

Sterilization is the result of any procedure or condition by which a person becomes incapable of reproducing. Sterilization may be voluntary and undertaken as a permanent form of birth control, or it may be involuntary, the result of disease, treatment (including surgery, drug therapy, or radiation), trauma to the reproductive organs (such as castration), or public policy (as for population control). Surgical sterilization—vasectomy in males and tubal ligation (salpingectomy) in females—is the most common form of contraception used in married couples ages thirty and above. Because it is considered permanent, married women are more apt to undergo sterilization than those who are unmarried. Even though female

sterilization involves more invasive surgery, has more complications, costs more, and has a higher rate of failure than male sterilization procedures (0.4% for females, compared with 0.15% for males), the rate of female sterilization is roughly 19 percent, whereas that of males is around 12 percent. In the United States, insurance companies are more likely to pay for a woman's tubal ligation than for her male partner's vasectomy.

Males are sterilized generally through a vasectomy. This is usually performed in a doctor's office under local anesthesia. The entire procedure takes fifteen to twenty minutes. A small incision is made in the scrotal sac, and a small section of the vas deferens is isolated and drawn through the incision. The ends of the vas are then either tied off or cauterized to prevent the ends from growing back and rejoining. The operation works by preventing the sperm from reaching the urethra and thus the ejaculated seminal fluid. Men who have undergone vasectomies are generally able to resume normal sexual relations within days of the procedure, though they must continue to use alternative birth control methods until the sperm count shows no sperm. Usually by six weeks after the procedure or fifteen ejaculations, men who have undergone the procedure are essentially sterile and incapable of impregnating a woman. Failures within the first two months following the vasectomy are usually due to a few residual sperm remaining in the genital tract. Later failures are generally the result of the vas deferens growing back together. For the latter reason, doctors frequently suggest a repeat sperm count after one year from the procedure. Other complications include a local and temporary inflammation, discomfort, and (very rarely) a serious infection of the epididymis.

Sperm continues to be produced by the testes but is released into the abdominal cavity and reabsorbed by the body. Vasectomy does not diminish libido (sex drive) or cause any change in erectile or ejaculatory function, nor does it noticeably diminish the volume of the ejaculate (since sperm normally only accounts for 1% of the seminal fluid). Male hormones, including testosterone, are still produced. Though vasectomy is considered a permanent form of sterilization, the procedure may be reversed in a vasovasotomy, in which the ends of the vas deferens are surgically reconnected. Success rates vary from 16 percent to 79 percent.

Tubal sterilization, also called tubal ligation (having one's tubes tied), is the most common method of female sterilization. During this procedure, the fallopian tubes are cut and cauterized (or otherwise occluded) to prevent the ova from reaching either the sperm or the uterus. There are several surgical means to accomplish this, including both abdominal and vaginal approaches. Laparoscopy is a minimally invasive method whereby a small incision is cut in the abdomen (or navel, in what is