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HOMOSEXUALITY AND VALIDITY OF MATRIMONY A STUDY IN HOMO-PSYCHOSEXUAL INVERSION†

Etiology of Psychosexual Inversion

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Consider a matrimonial union between a male invert and a lesbian, a situation which may be called bilateral homosexuality, not entirely rare or unique.¹ In such a situation the psychosexual repugnance to heterosexuality is mutual and hence compounded. Though present bilaterally, the repugnance emerges from each partner independently of the other, each one's impulse and initiative thrust as a positively adverse attitude toward the hetero-psychosexual encounter. The result is a distressful, positively mutual disintegration of marital life precisely because of the disorientation and disintegration of the hetero-psychosexual personality on the part of each party.² Accordingly, the marital union, even in the case of the unilat-

†This is the third installment of Father Schmidt's definitive study of homosexuality and marriage. It is a sequel to the previous sections; it is based on the discussions and considerations offered therein; and it should be considered in its relevant context. The first installment originally appeared in 32 *THE JURIST* 381 (1972) and was reprinted in 19 *CATHOLIC LAWYER* 84 (1973). The second installment originally appeared in 32 *THE JURIST* 494 (1972) and was reprinted in 19 *CATHOLIC LAWYER* 169 (1973).

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¹ Cf. Ellis, H. *Studies in the Psychology of Sex*, 2 Vols. (New York: Random House, 1936-37) Vol. I, Part Four, *Sexual Inversion*, p. 334, n. 1, citing 14 such marriages recorded by Hirschfeld, *Die Homosexualitat*, Ch. XXI, in each of which both partners are homosexual. Half of the 14 marriages concluded either in divorce or separation; the partners in only 2 of the remaining marriages did not regret their marriage.

² Cf. Ellis, H. *loc.cit.* who (p.334, n. 1) makes this incisively pregnant observation: "I may add that in such a case even the expectation of happiness scarcely seems reasonable, since

eral inversion of only one partner, may be directed to destruction and dissolution because there is no psychosexual attraction—a fundamental attitude which lies in the core of and pervades the entire personality.³

These considerations fairly permit the following observations. In the matrimonial union of the advanced psychosexual invert, no fundamental, substantial, significant, mutual heterosexual interest can be expected. This void obviously demands and compels an attempt at a rational explanation based on the etiology of homosexuality (psychosexual inversion) with its functional, practical result. In other words, a casual explication of the psychosexually inverted character and personality construct is necessary. For matrimony, the disastrously complex facts of homosexuality are there; there remains the problem of explaining their origin. This discussion of the etiology of homosexuality is directed to its relationship and influence in the formation of the character (embodiment of practical principles of action and reaction, of behavior) and especially the personality (actual, dynamic, purposeful pattern of behavior in relation to the environment) of the psychosexual invert. The particular focus will be with respect to the matrimonial consortium.⁴ Accordingly, the focus of attention is intended to be ultimately and principally directed to the capacity or incapacity of the psychosexually inverted personality to sustain, at least at a minimal level and on an enduring basis, the conjugal fellowship by positive, reciprocal, cooperative endeavor to adjust and adapt itself.

Besides, or regardless of, the issues of invalidity of consent and non-consummation, upon objective, moral (nonreligious) standards of conjugal conduct, are the condition and disposition of the homosexual viable, *i.e.*, valid matter, for the state of matrimony? The present discussion must forbear to digress in expatiating upon the adverse involvements, grave disappointments, and frustrations ensuing and seriously hostile to the marriage partnership upon moral and ethical principles and considerations. Marriage in its initial commitment presents matrimony as merely in its infancy; here it may be either stillborn (consensually invalid *ab initio*) or an irremediable monstrosity (incapable of functioning as a cooperative partnership). Hence, before entering upon a discussion of the etiology of homosexual deviation, it appears to be a matter of realistic and

neither of the parties can feel a true mating impulse toward the other." In accord, Caprio F. *Female Homosexuality* (New York: The Citadel Press, 1964) pp.88-89, who ascertained the solution of such marriages.

³ Cf. Ellis, H. *op.cit.* pp.333-34, and n. 2. Noting this lack in such a case, he states with precision at p.334: "The instinctive and emotional element, which is the essence of sexual love and springs from the central core of organic personality, cannot voluntarily be created or even assumed." In accord, Allers, R. *op.infra cit.* pp.303, 304, 306, 308.

⁴ In regard to Character and Personality, resp. the works of Allers, R. *The Psychology of Character*, transl. E.B. Strauss, New York: Sheed & Ward, 1938; and Devlin, W. *Psychodynamics of Personality Development*, New York: Alba House, 1965, are most instructive and useful.

practical import, in fact related to its etiology, to point out that the issue of homophilism, in its etiologically developed state, can be involved in various ways in matrimonial litigation in respect to invalidity and nonconsummation. In addition, homosexuality can affect the disposition of the heterosexual partner. In matrimonial causes of this type, the extent of the operative psychic factual results, if present, involving the homo-psychosexual condition or associated therewith, are very briefly sketched in the following.

Chapter III of the work of Tobin is concerned with psychic phenomena in regard to or involved in matrimonial consent as required for its validity. It deals, at great length and in view of the homosexual condition, with "mental illness" as such, moral impotency (a personal incapacity with respect to the fulfillment of matrimonial rights and obligations), and psychic (psychophysiological) impotence. They all represent psychic anomalies or disorders, perhaps aberrations, on the basis of which there may be an impairment of the validity of matrimonial consent, directly or indirectly on the part of the hemophilic subject or indirectly on the part of the other party. The phenomenon of force and fear is also discussed.⁵ In a word, failure of the matrimonial consent for some adverse psychological reason is contemplated.⁶ The concentration here is upon the complex functions and interactions of the higher faculties of cognition and volition, including the potential influence of the emotions. Here is or seems to be the basis and core of the emerging problem. In mental disturbance the intellectual faculties are under the influence of the emotions.⁷ Accordingly, in some homosexual cases, it would appear that there may well be an emotional invasion of the cognitive functions and consequentially of the volitional act. The result is a disturbance of these processes.⁸ It must be clearly understood, however, as indicated in previous sections of this study, that psychosexual inversion as a psychic state or condition, with its overt activity if any, does not as such nullify a marriage (*matrimonium in fieri*) because of a defect in matrimonial consent. Psychic disorder or disturbance *per se* in respect to consent must be put in evidence. The presence of psychosexual inversion in this evidence, however, may, indeed, be only a factor. In other words, the presence of psychosexual inversion alone does not *per se* constitute a "package deal" for a defect in matrimonial consent.⁹

The brief sketch presented above concerning the homosexual personality as involved in various matrimonial causes is significant in the present

⁵ Tobin, W. *Homosexuality and Marriage—A Canonical Evaluation of the Relationship of Homosexuality to the Validity of Marriage in the Light of Recent Rotal Jurisprudence* (Rome: Catholic Book Agency, 1964) pp.147-278.

⁶ Cf. *Codex Iuris Canonici*, cc.1015, §§ 1-3, 1068, 1081, 1082, 1086, 1087, 1092; Tobin, *op.cit.* pp.304-06.

⁷ Devlin, *op.cit.* pp.52, 80, 137.

⁸ Cf. Tobin, *op.cit.* Chap. III, e.g., pp.164, n. 34, 166, n. 42.

⁹ Cf. Tobin, *op.cit.* pp.168, sq., 299, 304-06.

discussions. It suggests the broad scope of the etiology of psychosexual inversion. This is to say that the survey presented is in accord with and tends directly to bear out and illustrate the basic, apparently prevailing, position that homosexuality as an end result is to be associated with or regarded as a symptom or manifestation of some underlying character-personality disorder or disturbance which in a given case may present even a major psychiatric anomaly and difficulty, for example, a psychosis. The writer regards this position on homosexuality as the point of departure in respect to ascertaining its etiology. The nature and degree of disorder or disturbance is definitely problematic and specific to each case.¹⁰ Consequently, the general etiology of psychosexual inversion as well as the specific causal factors must be considered in respect to each case.¹¹

The purposes of the present study are not served by repetition of a detailed exposition of the various theories or hypotheses in regard to the etiology of homosexuality.¹² In the opinion of the writer, theories are like other scientifically constructed categories in relation to given existential fact situations. They draw attention to ascertained generalizations and future possibilities. But the actual facts found in a given case may cut across the constructed theories and categories. A particular theory may be nothing more than an emphasis, perhaps overemphasis, of one facet of a complex reality. Each theory or hypothesis may contribute something to the explanation of the complexity. It seems that a rational, but informed, eclecticism is often preferable.

Theorists see homosexuality as having a somatogenic (constitutional: *e.g.*, genetic, endocrinological, physical) and psychogenic origin.¹³ It is noted that "the medical and psychiatric literature on homosexuality has tended to favor a psychogenetic etiology."¹⁴ Etiology and its theories were referred to generally in the first section of this study. Those observations are to be understood as related in context to the present discussions.¹⁵ There it was stated that

the present preponderant and prevailing position in the literature of psychiatrists appears to be that homosexuality is not the direct product of genetic or organic, *i.e.*, constitutional, origin. Rather, this sexual inversion is considered as psychological, an acquired psychogenic disorder, in origin, though

¹⁰ Cf. Tobin, *op.cit.* pp.25-31, 174-75, 284-86, 305, and the medico-psychiatric authorities cited; likewise his Index, *s.v.* Homosexuality as a symptom.

¹¹ Tobin, *op.cit.* p.305.

¹² An excellent survey is presented in Tobin, *op.cit.* Chap. I, Sec. III, p.40-64.

¹³ Cf. The *Encyclopedia of Sexual Behavior* [hereinafter ESB] ed. Ellis, A. & Abarbanel, A. 2 vols. (New York: Hawthorn Books, Inc. 1961) Vol. I, 486, 488; Cavanagh, J. *Counseling the Invert* (Milwaukee: Bruce Publ. Co. 1966) Clinic 4, pp.39-56, with extensive literature cited; Clinic 5, pp.57-70, with its literature.

¹⁴ Tobin, *op.cit.* p.60.

¹⁵ Cf. 32 THE JURIST 381-99 (1972).

constitutional factors as capable of offering indirect, predisposing influences are not to be discounted by any means.¹⁶

The writer has, however, developed from the general literature the impression that the psychogenic theory appears perhaps to be the adopted favorite of American psychiatry in contradistinction to continental European psychiatry with its emphasis upon the somatogenic element.¹⁷

As a matter of principle, a psychic phenomenon or state demands an adequate psychic cause.¹⁸ Psychosexual inversion is essentially an abiding psychic state; it must be accepted as the result of psychic causality. Yet the principle as just stated and applied cannot be understood to deny or exclude somatogenic influences.¹⁹ It occurs to the writer that whether the somatogenic factors, if present, are related to psychogenic factors in the production of homosexuality is a question to be placed in the context of scholastic philosophy.²⁰

An existential, *i.e.*, realistic and individualistic, appraisal of the origin of psychosexual inversion seems both preferable and practical in view of the following considerations. First, genuine homosexuality as an end result is a state of deviation, in its origins somato-psychogenic or merely psychogenic, and peculiar to each inverted personality. Second, regard for somatogenic factors, of whatever type, may not be excluded *a priori* from the assay of the pattern of its development.²¹

This latter position in respect to somatogenesis appears to receive some confirmation from the very results of experiments interpreted as disproving any somatogenic contribution to homosexuality. The subject of "numerous experiments" in each instance is the male known to be homosexual, in whom the fact of a "lack of androgen secretion" is noted. The hypothesis is that the homosexual condition is due to a lack of androgen. An increase of androgen is administered to cure the homosexuality. The result is that "homosexual drive" has been increased. Thus, the conclusion follows that the somatogenic hypothesis is not valid.²² Yet this conclusion seems to take on a feature of the pyrrhic victory for there appears to be a

¹⁶ Cf. *op.cit.* p.395 and authorities there cited. And see Tobin, *op.cit.* pp.40-42 & 60, sqq. and authorities, suggesting a "Combination of Factors."

¹⁷ This impression received for the writer considerable confirmation in a study, bearing at least some relevance to the present topic, by Marius G. Schneider, O.F.M. "A Philosophical Critique of Certain Psychiatric Theories of the Origin of Psychosis," *Studies in Philosophy and the History of Philosophy*, Vol. 1, ed. John K. Ryan (Washington, D.C.: The Catholic University of America Press, 1961) pp.96-138; cf. e.g. pp.110-111, 124, 129, 134, 135, 136.

¹⁸ Cf. Cavanagh, J. & McGoldrick, J. *Fundamental Psychiatry*, 2 rev. ed. (Milwaukee: The Bruce Publ. Co. 1958) p.54.

¹⁹ This position seems completely clear in the study of Marius G. Schneider, *op.cit.*

²⁰ Cf. Tobin, *op.cit.* pp.62-63.

²¹ Cf. Tobin, *op.cit.* pp.61-64 and authorities there cited.

²² Cavanagh, *op.cit.* pp.39-40. Studies noted in Tobin, *op.cit.* pp.50-52, not favorable to sexual endocrinological theory.

reverse aspect to the conclusion. In the framework of these experiments, the androgen is found to increase the homosexual direction and drive. This result seems obviously to be a somatogenic reaction and influence converted into the somato-psychic phenomenon of increased psychosexual inversion in the subject; the potency of his homosexual personality has been enhanced endocrinologically.

The psychogenic theories of the genesis of psychosexual inversion or deviation appear, in their general aspect and trend, to follow a pattern of psychosexual development originally set forth by Freud.²³

It occurred to the writer that a pattern might be composed outlining the general stages in which the psychic, more or less perhaps psychopathological, condition of homosexual inversion is created. There is or seems to be discernible a uniform, albeit general, pattern in homosexual development; the underlying causes as stated, are considerably variant. But, in the psychiatric analyses and reports respecting the phenomenon of inversion certain common denominators, *i.e.*, adverse characteristics of personality, appear to have been verified. These common denominators are here viewed in what appears to be their logical and functional order of development. There are four: (1) habitual (obsessive) irrational thinking and convictions; (2) irrational fear and anxiety; (3) arrest (psychic) by way of block or impairment of heterosexual development, orientations, and maturity—all psychic dispositions which may be designated as negativistic and negative, and hence as adverse to the achievement or maintenance of the mature, hetero-psychosexual personality; and finally, the positive element, (4) positive direction to the same sex.²⁴

IRRATIONAL THINKING AND CONVICTIONS

Habitual, irrational, false, and negativistic thinking and convictions, which are obsessive and remotely, proximately, or directly adverse to natural and normal heterosexuality and heterosexual relations appear to constitute the fundamental and hence the first stage.²⁵ The resulting psychic

²³ Cf. Cory, D.W. in *ESB*, I, 487-88; Cavanagh, *op.cit.* pp.34-37 *Psychiatry, The Clergy and Pastoral Counseling*, ed. Dana L. Farnsworth, M.D. & Francis J. Braceland, M.D. (Collegeville, Minn.: St. John's University Press, 1969) Chap. 20, Sexual Deviation, Authors: Leo H. Bartemeier, M.D. & Dana L. Farnsworth, M.D. pp. 267-79, esp. pp.269, 271-72 (Male Homosexuality) 273, 279.

²⁴ Cf. Cory, D.W. *Homosexuality* in *ESB*, Vol. I, pp.487-88—*Theories of Genesis*.

²⁵ Cf. Ellis, A. *Homosexuality: Its Causes and Cure* (New York: Lyle Stuart Inc. 1965) pp.60-61, 74-76, 98, 109, 208, 213, 214, 249, 253, 258, but esp pp.110-30, *passim*. It is to be noted that the only point intended to be made here, and which alone is to be emphasized, is contained in the above-stated proposition, which appears to present the basis of the psychogenesis and psychodynamics of homosexual inversion. Cf. Lionel Ovesey, "The Homosexual Conflict," *Psychiatry*, Vol. XVII (1954) pp.243-50 as noted in Cavanagh, *op.cit.* pp. 68-69. These themes of Ovesey on the origin and development of homosexuality are further presented in detail in his later work, *Homosexuality and Pseudohomosexuality* (New York: Science House, 1969).

phenomenon may be described as a psychosexual distortion of what is basically a heterosexual direction.²⁶ This position is of major practical importance because it tends to explain and indicate the general direction of the actions and reactions of the inverted personality. A person acts in response to his thinking and convictions.

These considerations have special importance in forensic medical jurisprudence, for it is noted that mental disorder or disturbance is the result of habitually faulty, irrational, and therefore unhealthy, psychic functions, attitudes, and dispositions.²⁷ Human mental disorder has its inception upon an intellectual level.²⁸ Likewise, homosexuality is basically "a way of thinking,"²⁹ the derivative of inured, erroneous learning regarding sexuality, with resulting adverse effects.³⁰ Such habitual thinking, sexual and nonsexual, which is irrational, erroneous, and illogical is absorbed into the personality structure as a disposition.³¹ Thus, homosexual inversion appears to originate in the thought processes as a self-indoctrination,³² aided and abetted or unaided, which is "a wrong way of thinking and feeling."³³ "The defective use of the intellect, the emotions, or the will may begin at any time."³⁴ The psychodynamics (purposeful strivings, motivations) involved are frequently complicated,³⁵ and may result in states of neurosis.³⁶ It is frequently observed in the literature cited herein that homophiles (more or less fixed) are mentally disturbed persons. Their homosexual activity is a symptom of this disturbance³⁷ which can be a fixed distortion of the personality structure.³⁸ It would seem obvious, moreover, that this

²⁶ Cf. M. Boss, *Sinn und Gehalt Der Sexuellen Perversion*, (Berne: Medizinischer Verlag Hans Huber, 1947). Review in *Psychoanalytic Quarterly*, 17 (1948) p.106, as noted in Cavanagh, *op.cit.* p.69; Feldman, S. "On Homosexuality" in *Perversions, Psychodynamics and Therapy*, ed. S. Lorand & M. Balint (New York: Gramercy Books, 1956) pp.85, 92-94; Caprio, *op.cit.* p.299.

²⁷ Cf. Cavanagh & McGoldrick, *op.cit.*, pp.16, 37-62, 128, 290, 298-99.

²⁸ It would seem that, concerning sexual inversion, the entire and dominant motif of Ellis' *Homosexuality: Its Causes and Cure* concurs in principle completely with this position.

²⁹ Cavanagh & McGoldrick, *op.cit.* p.557; Caprio, F. *Variations in Sexual Behavior* (New York: The Citadel Press, 1955) p.161; VanderVeldt, J. & Odenwald, R. *Psychiatry and Catholicism*, 2d ed., (New York: McGraw-Hill Book Co., 1957) pp. 430-32 (mental attitude); Cavanagh, *op.cit.* pp. 17, 68; amply in accord, Ellis, A. *op.cit.* pp.98-99, 110-11, 118, 124, 133-34.

³⁰ Cf. *ESB*, Vol. I, p.488, col. 1; Ellis, A. *op.cit.* p.133.

³¹ Cf. Ellis, A. *op.cit.* pp.81-83, 129, 133.

³² Ellis, A. *op.cit.* p.253.

³³ Cavanagh, *op.cit.* pp.158, 229.

³⁴ Cavanagh, *op.cit.* p.229.

³⁵ Cf. Bromberg, W. "Homosexuality" in *The Encyclopedia of Mental Health*, ed. A. Deutsch & H. Fishman, 6 Vols. (New York: Franklin Watts, Inc. 1963) Vol. 3, p.752 [hereinafter EMH].

³⁶ Cf. Ellis, A. *op.cit.* p.133.

³⁷ Cf., e.g., Ellis, A. *op.cit.* pp.78, 79, 129.

³⁸ Cf. *EMH*, Vol. 5, p.1853.

mental disturbance, if present, may be aggravated in the internal psychic conflict ensuing because the invert moves in the milieu of heterosexual ideology and association.³⁹ Hence, it would appear equally apparent that, in a given case, the subject can "think" or "will" himself into an invalid or nonconsummated marriage because his mind militates, to a greater or lesser degree,⁴⁰ against the heterosexual basis and orientation of the matrimonial commitment. And for the same reason this adverse psychic disposition may be capable of total withdrawal from the marital heterosexual consortium. Habitual irrational learning, thinking, and mental attitudes precede and precipitate fear and anxiety.⁴¹

IRRATIONAL FEAR AND ANXIETY

Irrational fear, anxiety, and withdrawal are recognized in some form as the dominant, though not the sole, characteristics or influences pervading the homophilic personality.⁴² The term personality is here understood as the sum total of behavior patterns, dynamically (purposefully) organized and directed, by which the person acts and reacts in regard to his environment.⁴³ Flight from heterosexuality because of fear is characteristic.⁴⁴ Overt homosexuality has been described simply and perhaps broadly as "an expression of fear of the opposite sex, of inability to accept adult responsibility, and an attempt to deal with competitive attitudes towards members of the same sex."⁴⁵ Other adverse psychic phenomena creating psychosexual imbalance can prepare the ground for homoeroticism.⁴⁶ It is, therefore, common professional knowledge that the incipient homosexual, for a variety of reasons (perhaps rationalizations) which are insufficient, unrealistic, and irrational, tends to view the heterosexual encounter, relationship, involvement, or conduct pertaining thereto as a danger, a threat,

³⁹ Cf. Ellis, A. *op. cit.* p.79.

⁴⁰ Cf. Cavanagh, *op. cit.* pp.89, 147.

⁴¹ Cf. *ESB*, Vol. I, pp.487-88.

⁴² Cf. Ellis, A. *op. cit.* pp.80-81; Caprio, *Fem. Homosex.* pp.117-20; VanderVeldt & Odenwald, *op. cit.* p.423; Cavanagh, *op. cit.* pp.33-34, 61; Caprio, *Var. Sex. Behav.* pp.92-94; Feldman, *op. cit.* p.93.

⁴³ Cf. Devlin, *op. cit.* pp.32-33; 37-39.

⁴⁴ Ellis, A. *op. cit.* p.9 n.2.

⁴⁵ Cavanagh, *op. cit.* p.164, quoting from the GAP, U.S. Government Report.

⁴⁶ Cavanagh, *op. cit.* pp.57,62 (Undue attachment to parent, assimilation of parental personality, overidentification); Cory, D.W. *Homosexuality*, in *ESB*, Vol. I, pp.487, 488, col. 2; Bromberg, W. *Homosexuality* in *EMH*, Vol. 3, pp.752, 758; Ellis, A. *op. cit.* pp.57-59, also noting other factors. But these other factors seem to result in a sense of heterosexual inadequacy, so as to precipitate fear and anxiety toward heterosexual environment (indoctrinations, misconceptions, experiences, positive practices in the sexual adverse to the heterosexual and conducive to the homosexual). Cf. *ESB*, Vol. I, p.488 (exclusive association with same or with opposite sex during puberty so as to isolate and obstruct or divert heterosexual orientation into imbalance and sense of inadequacy, inferiority, insecurity, and anxiety respecting opposite sex). Cf. Cavanagh, *op. cit.* pp.62-63; Ellis, A. *op. cit.* pp.52, 53-54.

or a challenge which he may deem beyond the capacity of his personality. Obviously, vis-à-vis heterosexuality, fear and anxiety are created⁴⁷ because of a sense of predominating inferiority and severe inability to meet successfully the heterosexual situation.⁴⁸

The following observations are precisely on point.

Anxiety . . . does not always serve useful ends for the individual or for society. The inability to cope with danger may result in a sense of helplessness and inadequacy, in reactions of flight, neurotic symptoms, or antisocial behavior. Only in such cases can we speak of anxiety as pathological. It would be more correct to say that the solution or attempted solution was pathogenic. . . . The crippling fear is that which comes with an unconscious distortion of reality. Distortion results because the actual situation is equated with an anxiety-charged previous experience These are the neurotic fears⁴⁹

Such reactions of unrealistic danger and hostile invasion constitute and are characteristic of neurotic anxiety.⁵⁰ A phobia follows upon a continuous state of anxiety,⁵¹ e.g., viriophobia. "Homosexuality is a personality disorder often associated with other psychiatric disorders. . . . Homosexuals because of their condition are . . . likely to submerge reason to emotional forces, deeply affected in their personality."⁵² Initially irrational, distorted thinking has resulted in equally distorted emotional difficulties. The higher mental faculties have become reciprocally influenced and distorted, enmeshed in distorted emotions opposed to their proper and adequate higher mental operation. A vicious circle has been formed.⁵³ The threshold of what may well be chronic mental disturbance—resulting from misdirected or malcontrolled emotional influences—has been reached. "Present fears are less than horrible imaginings;" the homosexual may have "horrible imaginings."⁵⁴

Tobin notes the functions of the human mind as such, and in the presence of the emotional phenomena. But the writer finds difficulty following his discussions concerning discretion, "deliberation of the will", and "volitional deliberation" as related to valid matrimonial consent.⁵⁵ It seems that the initial subject matter of discussion should be the functions of the intellect, not those of the will. Difficulty is likewise had, in this same

⁴⁷ Cf., e.g., Ellis, A. *op. cit.* pp.80-81, 249.

⁴⁸ Cavanagh, *op. cit.* pp.258, 279, where he notes at length the technique of Dr. Albert Ellis.

⁴⁹ Devlin, *op. cit.* pp.215, 217.

⁵⁰ Cf. *EMH*, Vol. 1, pp.212, 215; Devlin, *op. cit.* p.217.

⁵¹ Cf. *EMH*, Vol. 5, pp.1486-87.

⁵² Cavanagh, *op. cit.* p.154.

⁵³ Cf. *EMH*, Vol. 5 p.1486.

⁵⁴ "Because of the emotional pressures that often accompany homosexuality there is undoubtedly a high incidence of deep psychological disorders among inverts." Cavanagh, *op. cit.* p.256.

⁵⁵ *Op. cit.* pp.156, 165,166, 167.

context, with the concept of "emotional maturity."⁵⁶ What is it? When is its absence (*i.e.*, immaturity) a psychic, so-called illness; or when is it the cause of the latter? What is, concretely, emotional mental illness? Clarity as well as the priority and proper sequence of concepts are matters of practical importance. It seems that one should initially speak in terms of *motivational* maturity (or immaturity) rather than in terms of emotional maturity (or immaturity), for emotion arises from the "intellectual grasp" of something.⁵⁷ There seems to be some confusion or obscurity both with respect to the interrelation and interaction of intellect and will in the presence of emotional impact and with respect to the precise psychogenesis of disturbance of harmony on the higher mental levels.

In this brief essay, it would be utterly foolhardy and unnecessary to discuss the difficult subject of mental disorder and disturbance in terms of its broad etiology.⁵⁸ This topic must be circumscribed and reserved to the dimensions of the present subject matter, as already indicated. Accordingly, somatic causes⁵⁹ and somatopsychic causes are not considered here.⁶⁰ For the purposes of this study, mental disturbance is present, in various degrees, when the emotions persistently invade or even surmount the acts of the intellect and consequentially those of the will.⁶¹ In other words, emotional involvement arises as an affect or affective state basically through agency of the intellect.⁶²

In the context of his aforementioned considerations, Tobin correctly insists that mature (but what is it?) deliberation, sufficient discretion, insight, and evaluative knowledge are necessary. The exercise of the volitional faculty must be contingent upon the cognitive processes—*nil voli-*

⁵⁶ *Op. cit.* p.161, 167 n. 44.

⁵⁷ Cavanagh & McGoldrick, *op.cit.* p.128.

⁵⁸ Cf. e.g., *EMH*, Vol. 3, p.1067, and Index, *EMH*, Vol. 6, s.v. Mental Illness.

⁵⁹ Cf. VanderVeldt & Odenwald, *op.cit.* p.286; *EMH*, Vol. 1, pp.227-34, 260.

⁶⁰ Cf. Cavanagh & McGoldrick, *op.cit.* pp.446-83.

⁶¹ Devlin, *op.cit.* p.52, besides other matter pertinent here, states: "In adulthood also, when a person's intellect is emotionally involved, free choice and execution are greatly restricted. The rehabilitation of such a person is a slow process." And at p.80: "In many circumstances, especially in the neurotic personality, the intellect will be under the influence of the emotions When the intellect is delusional under the influence of the emotions, disturbed behavior results The more traumatized or disturbed the person, the more subjective is his reaction and the more does objective reality become unimportant. Because of the influence of emotion, the person's views can be obscured in appraising an action, especially in terms of its rightness or wrongness." And at p.137: "But in the schizophrenic there is such complete fragmentation of the self and the stream of experience, that action or reaction may follow disorganized thought—thought as guided and directed by the emotions, and by the emotions alone. With disturbed people the cognitive elements are under the influence of the emotions and the schizophrenic personality is the most disorganized of all." Cf. Cavanagh & McGoldrick, *op.cit.* pp. 54-57, and p.555 (psychogenic origin of homosexuality); Pickett, R. *Mental Affliction and Church Law* (Ottawa, Ont.: The University of Ottawa Press, 1952) pp.4-7.

⁶² Cf. Devlin, *op.cit.* p.79; Cavanagh & McGoldrick, *op.cit.* pp.128, 214.

tum nisi praecognitum. But what is "mature deliberation of the will"?⁶³ Some fundamental principles of scholastic psychology, in particular the interactions between intellect and will and the presence of emotional states,⁶⁴ ought to be reviewed here. The activity of the latter, as the rational appetite of the intellect, is dependent upon and follows the activities of the intellect.⁶⁵ The will is rooted in the intellect and reason.⁶⁶ In fact, the root of freedom of will is in the intellect.⁶⁷ Hence, the cause of free will is said to be reason⁶⁸ and the total conceptual complexion of freedom is dependent upon the manner of cognition.⁶⁹ In a word, the will becomes and is free if and because the intellect is informed and unimpeded. But as experience teaches, intellectual deliberation can be disturbed by emotions⁷⁰ and can in fact become entirely overwhelmed by them. Though there is an act of the will by compulsion, an ensuing deliberated act of the free will fails completely. The intellect has become entirely influenced, interfered with, and controlled by their presence, so that its activity of deliberation has ceased.⁷¹ As a direct consequence, there is no free will since deliberation is a necessary postulate of free will.⁷²

The foregoing brief considerations seem to be in accord with the general position taken in modern psychiatric treatises in regard to the origin and condition of the homosexual personality structure. Precisely, the mental and emotional distortions and disturbances, the so-called illness, and

⁶³ Tobin, *op.cit.* p.165.

⁶⁴ Gredt, I. *Elementa Philosophiae Aristotelico-Thomisticae*, 7th ed. Vol. I (Herder & Co.: Friburgi Brisgoviae, 1937) p.475 n.59 (weighing motives of action); Reinstadler, S. *Elementa Philosophiae Scholasticae*, 11-12th ed. (Herder & Co.: Friburgi Brisgoviae, 1923) Vol. II p.123 (hierarchy of values); Fröbes, J. *Psychologia Speculativa* (Herder & Co.: Friburgi Brisgoviae, 1927) Tom. II *Psychologia Rationalis*, p.158; Lindworsky, J. *Theoretical Psychology*, transl. H.R. DeSilva (St. Louis-London: B. Herder Book Co. 1932) p.103; Lindworsky, *op.cit.* pp.102-03.

⁶⁵ Cf. Van Ommeren, W. *Mental Illness Affecting Matrimonial Consent* (Washington, D.C.: The Catholic University of America Press, 1961) pp.75, 80, citing at note 113, Renard, *The Philosophy of Man*, and pp.123-24; Gredt, *op.cit.* Vol. I, pp.470, n.585, 475 n.591, 488 n.601; Farges, A. & Barbedette, D., *Cours de Philosophie Scolastique*, 19.ed. (Paris: Berche et Pagis, 1935) Tom. I., p.480, n.115; Fröbes, *op.cit.* Vol. II, p.167.

⁶⁶ Farges & Barbedette, *op.cit.* p.489, n.126; VanderVeldt & Odenwald, *op.cit.* p.36.

⁶⁷ VanderVeldt & Odenwald, *loc.cit.*

⁶⁸ "[C]ausam autem liberi arbitrii assignat tem Damascenus quam Gregorius quam Augustinus rationem." S. Thom. Aq. *Quaest. Disput.* (Taurini-Romae: Marietti, 1949) Vol. I, *De Veritate*, Qu.24, Art.2, ad 4.

⁶⁹ "Ad cuius evidentiam sciendum est, quod cum ad operationem nostram tria concurrant, scilicet, cognitio, appetitus, et ipsa operatio, tota ratio libertatis ex modo cognitionis dependet. Appetitus enim cognitionem sequitur, cum appetitus non sit nisi boni, quod sibi per vim cognitivam proponitur." S. Thom. Aq. *op.cit. loc.cit.* in corp.

⁷⁰ Fröbes, *op.cit.* p.156, and *op.cit.* Vol. I, pp.216, 217.

⁷¹ Gredt, *op.cit.* Vol. I, p.475 n.591; *idem.* Vol. II, n.954, Smith, V. *Ignorance Affecting Matrimonial Consent* (Washington, D.C.: The Catholic University of America Press, 1950) pp.46, 50.

⁷² Reinstadler, *op.cit.* p.114; Fröbes, *op.cit.* Vol. II, p.167.

the resulting condition and behavior, including neurotic and psychotic symptoms, if any, are initially caused by habitual erroneous and irrational thinking and willing.⁷³ Accordingly, the personality structure of the homophile is in conflict with the objective reality of the natural and normal heterosexual ideology and orientation.⁷⁴ Hence, in this conflict, there also are or may be produced emotional states which are adverse to heterosexuality.⁷⁵

Mental and emotional maturity would here mean that an individual, under direction and control based on right reason in adequate proportion, is capable of habitually orienting his personality towards the exigencies and purposes of his way of life.⁷⁶

By contrast, impairment or absence of maturity would then be synonymous with impairment or absence of the controlling process of right reason and volition in meeting and realistically solving the problems of living. Upon positive consideration, there is or may be present a sense of inadequacy, inferiority, and self-insufficiency. Thus, the emotions arise to rule and control rather than the appropriate and adequate right reason. Hence, the ensuing behavior is called adolescent,⁷⁷ or perhaps even infantile—in pursuit, to a lesser or greater extent, of the “pleasure principle” of immediate self-satisfaction.⁷⁸ Here in this conceptual context are noted the basic personality structure and traits characteristic of the homosexual in respect to the milieu of heterosexuality, *viz.*, psychosexual immaturity⁷⁹—on a mentally and emotionally “retarded level sexually”⁸⁰—dominated by irrational fear and anxiety.⁸¹

The adolescent level of the homophilic personality seems manifest in contrast to mature, adult heterosexuality. This condition can obviously progress to serious psychopathological proportions. As previously indicated

⁷³ Cf. e.g., Cavanagh, *op.cit.* pp.17-18; Ellis, A. *op.cit.* p.98-99, whose work throughout agrees in much greater detail with this position. Cf. Cavanagh & McGoldrick, *op.cit.* pp.16, 46-47, 128, 290, 298-99, 309, 596.

⁷⁴ Cf. Feldman, “On Homosexuality” in *op.cit.* p.92-94.

⁷⁵ Cf. Ellis, A. *op.cit.* pp.45-47, 124, 128-29, 133-34.

⁷⁶ Cf. Caprio, F. *The Modern Woman's Guide to Sexual Maturity*, First Evergreen Black Cat Ed. 1965 (New York: Grove Press, Inc.) pp.16-17, 20; Abrahamsen, D. *The Road to Emotional Maturity*, Cardinal Ed., 1st print, Oct., 1966 (New York: Pocket Books) pp.138-39, 147.

⁷⁷ Cf. *EMH*, Vol. 1, p.284; Vol. 2, pp.455, 536, 541-43; Vol. 6, p.2003; Vol. 4 p.1217.

⁷⁸ Principle explained at large in: Aichhorn, A. “The Meaning of the Reality Principle in Social Behavior” in *Classics in Psychology* ed. Thorne Shipley (New York: Philosophical Library, 1961) pp.943-61; of *Encyclopedia of Psychoanalysis* ed. L. Eidelberg (New York: The Free Press, 1968) p.313, *sv.* Pleasure Principle; p.367, *s.v.* Reality Principle. [hereinafter *Encl. Psychoan.*]

⁷⁹ Cf. *EMH*, Vol. 1, p.284; Abrahamsen, *op.cit.* pp.103, 126, 127, 162, 195.

⁸⁰ Cf. Caprio, *op.cit.* pp.203-07. This psychopathological condition in respect to heterosexuality seems to bear close analogies to the condition described as mental deficiency. Cf. Vander-Veldt & Odenwald, *op.cit.* Chap. 20, esp. pp.315-17, 324.

⁸¹ Cf. Ellis, A. *op.cit.* pp.80-81.

in considering its etiology, apparently the fear-anxiety condition in the homosexual is developed as an end result of errors in thinking and conduct. The fear and anxiety cultivating influences are manifold,⁸² and they include disordered intrafamily relationships and false or distorted sexual information.⁸³

The fear-anxiety syndrome, whatever be its prime instigating and repetitive causes, bespeaks a psychosexual complexion and orientation which in effect expresses a, perhaps deep-seated, negative attitude adverse to, and a sense of distress vis-à-vis heterosexual communication. The fear-anxiety syndrome is built upon and developed from a sense of sexual inadequacy in heterosexual activity; from a sense of failure or inadequacy in, or fear of responsibility; and from a sense of danger or risk of some physical or physiological harm resulting from heterosexual involvement and experience. Also, there may well be present a hedonistic, lackadaisical, irresponsible, and indolent attitude toward sexuality and serious goals of life and living. In effect, the result is seen as an arrest in, or a retreat from, heterosexuality, and inversion into the circle of the same sex.⁸⁴ These considerations are here intended not to be repetitious, but rather are stated to emphasize advisedly what may be an important development in homosexual inversion. Because of continuing persistence in this hetero-psychosexually blighted and morbid manner, the personality becomes perforce impregnated (traumatic). There are degrees of intensity in heterosexual withdrawal because of a general or specific sense of trepidation and fearfulness of the heterosexual encounter. There may develop, therefore, a more specific fear of the genitals of the other sex, even a fear that they are dangerous and injurious (a form of castration anxiety), founded upon deviously irrational thinking, conclusions, and convictions in the mind of the subject.⁸⁵ He finds himself inadequate—more or less a failure—to meet the challenge of the postulates and implications of heterosexual intercourse (heterosexual inadequacy complex) either general or specific.⁸⁶ This sense of apprehension, to a greater or lesser extent, is not directed to the person of the opposite sex, but rather is fixed upon the personality of this individ-

⁸² They occur in many forms of environmental fact situations. Cf. Cavanagh, *op.cit.* pp.31, 65; Ellis, A. *op.cit.* p.51; Caprio, *Var. Sex. Behav.* pp.89-92; *idem*, *Fem. Homosex.* pp.121, 293-303, 304.

⁸³ Cavanagh, *op.cit.* pp.61-62, 64-66; Caprio, *Fem. Homosex.* pp.121-22, *sqq.* (case studies), 292-93; VanderVeldt & Odenwald, *op.cit.* pp.417, 428-29 (heterosexual frigidity and impotence); *ESB*, Vol. I, p.488, col. 1, *EMH* Vol. 3, p.752.

⁸⁴ Cf. Cavanagh, *op.cit.* p.52-53 on the theory of Krausz; Ellis, A. *op.cit.* pp.80-83; *ESB*, Vol. I, p.488; *EMH*, Vol. 5, p.1851; Feldman, "On Homosexuality" in *op.cit.* p.93.

⁸⁵ Cf. *Encl. Psychoan.* p.61, *s.v.* Castration Anxiety; p.62, Castration Complex; Ovesey, *op.cit.* p.21.

⁸⁶ Cf. Cavanagh, *op.cit.* pp.57-60 and authorities cited therein (male homosexuality); *EMH*, Vol. 3, p.758; Ovesey, *op.cit.* pp.24-25, 57.

ual which represents the phases of heterosexual encounter or involvement.⁸⁷

Again, regardless of the actual etiological factors, their persistent effect upon the personality is characterized as traumatic,⁸⁸ whereby the anxiety state may be confirmed. The resulting condition would appear to be the basis for the phenomenon of obsession⁸⁹ and the fear-complex of phobia.⁹⁰

Homosexuality, whatever its degrees of inversion, as briefly developed and generally described herein, is the product of deviously and irrationally oriented, not seldom complicated, psychodynamics (purposeful strivings).⁹¹ As such, and as a general, psychopathological condition or even a seriously advanced obsessive complex, as will be noted briefly hereinafter, it is generally recognized as an implement and expedient in the form of a defense mechanism to support the faltering personality.⁹²

The immediate purpose of the previous considerations is to introduce—in what appear to be a progressively existential and logical order—the third, common and general, adverse characteristic of the homosexual personality, namely, the obstruction of the heterosexual personality. In other words, the two previously described characteristics of homosexual inversion, *i.e.*, persistent irrational thinking and the fear-anxiety syndrome, appear to produce an arrest or impairment of mature, adult hetero-psychosexual development⁹³ and status. This latter characteristic

⁸⁷ Social communication and congeniality between the male homosexual and the female have been noted, but seem to be absent between the lesbian and the male. Cavanagh, *op.cit.* pp.57, 75; *EMH*, Vol. 3, p.757.

⁸⁸ Cavanagh, *op.cit.* pp.60-61, 229; Cavanagh & McGoldrick, *op.cit.* pp.180-81; Caprio, *Fem. Homosex.* pp.128-30, 304; Feldman, "On Homosexuality" in *op.cit.* pp.74-75. Trauma, as here understood, is a painful emotional experience which may cause a neurosis. *Taber's Cyclopedic Medical Dictionary*, 7th ed. (Philadelphia: F.A. Davis Co. 1958) *s.v.* trauma; see also, *s.v.* obsession, complex; *ESB*, Vol. I, p.248 (emotional shock); *EMH*, Vol. I, p.235.

⁸⁹ Obsession in this context may be described as an irrational persistent idea or constellation of ideas paramount, dominating, and controlling the mind and personality and accompanied by experiences of fear or anxiety and tension. Cf. Cavanagh & McGoldrick, *op.cit.* pp.214, 264, 614; Caprio, *Fem. Homosex.* pp.117-18; Taber, *op.cit.* *s.v.* obsession, obsessional neurosis.

⁹⁰ A complex is a state of mind (attitude) composed of an idea or constellation of connected ideas vested with strong emotional impact concerning certain objects and influencing the personality (behavior). Cf. Cavanagh & McGoldrick, *op.cit.* p.137-38; Taber, *op.cit.* *s.v.* complex. The complex is often aroused by some painful emotional reaction or experience (trauma, which may cause a neurosis) manifesting itself in some abnormality of mind or behavior. Taber, *op.cit.* *s.v.* complex, trauma. A phobia is a habitual, persistent, irrational fear-anxiety complex which governs actions. Cf. Cavanagh & McGoldrick, *op.cit.* pp.137-38, 262, 615.

⁹¹ Cf. *EMH*, Vol. 3, pp.752, 758; Caprio, *Fem. Homosex.* p.292; but esp. cf. Kobler, F. *Casebook in Psychopathology* (New York: Alba House, 1964) pp.24-33; 112-21.

⁹² Cf. Menninger, K. *et al.* *The Vital Balance* (New York: The Viking Press, 1963) p.198; Feldman, "On Homosexuality" in *op.cit.* pp.91-92.

⁹³ Cf. *ESB*, Vol. I, pp.487-88; Cavanagh, *op.cit.* p.62.

result is obviously also a negative one. More importantly, however, it is equally obvious that this result, in view of its previously described antecedents, should be expected to affect adversely, in varying degrees, the conjugal personality and its proper heterosexual orientation. Accordingly, this obstruction may be expected, under practical and realistic conditions and considerations, to effect the reparable or irreparable disintegration of the conjugal heterosexual personality and hence impair, or even destroy, the capability of the subject to sustain an enduring conjugal consortium for, as indicated, the subject, in respect to mature adult heterosexuality, presents an adolescent personality involved in the personality difficulties of homosexual direction and orientation.⁹⁴ The mentally disordered (and perhaps also emotionally disturbed) juvenile personality of an invert is then, supposedly, brought into encounter with the problems and challenges of adulthood requiring a mature heterosexual direction and orientation. It seems reasonable, to say the least, to expect him to fail in this encounter.

HETERO-PSYCHOSEXUAL ARREST OR IMPAIRMENT

Under this title and the subsequent title (Positive Psychodynamic Disposition and Direction to the Same Sex), the focus of attention is directed to the psychosexually inverted personality in its condition of arrest and impairment adverse to heterosexuality inasmuch as personality has reference to and is the manifestation of the psychosexual condition of the invert and deviate with respect to behavior. Accordingly, the discussion seeks to offer deeper analytic insight into the texture of psychosexual inversion of the personality. The broad salient characteristics of the homo-psychosexual personality, in its entirety, may be described as follows. Homosexuality, under realistic and practical considerations, presents the psychopathological or nonpsychopathological psychosexual phenomenon of a mentality and pattern behaviorial (personality) which is predominantly psychosexually oriented and dynamically directed (purposefully), either actually or potentially, to the same sexual object exclusively or non-exclusively, and which is withdrawn from the opposite sexual object in a corresponding inverse ratio.⁹⁵ Resistance to change, if present, is in the warp and woof of the homosexual orientation.⁹⁶ Hence, the degree of resistance is itself significant ancillary evidence of the intensity and persistence of its deviant direction. In psychiatric literature, it is generally abundantly apparent that sexual inversion (conversion upon the same sex) is viewed as having a dual aspect consisting of fearsome withdrawal from heterosex-

⁹⁴ Cf. *EMH*, Vol. 1, p.62

⁹⁵ This description is compiled by the writer from the symposium of articles in *The "Third Sex"* ed. Isadore Rubin (New York: New Book Co., 1961).

⁹⁶ Cory, D.W. & LeRoy, J.P. *The Homosexual and His Society—A View from Within* (New York: The Citadel Press, 1963) p.254.

uality (negative, designated as heterosexual "neurotic structure")⁹⁷ and attraction to homosexuality (positive, designated homosexual neurosis).⁹⁸

There is said to be a deviant psychosexual neurosis or more profound psychic disturbance. In this psychosexual milieu, the homosexual state is said to be "a neurosis of personality" and to reflect "sexually psychopathic behavior"—the "sexual psychopath."⁹⁹ It is to be noted that this psychiatric view casts psychosexual inversion as such and, apparently, indiscriminately, in the aura of psychiatric pathology. The writer does not agree with this broad, indefinite, and scientifically unfounded generalization. A return to this question will be entertained briefly hereinafter. Psychiatric nosology and clinical designations or categories, whatever or however numerous or useful they may be, are, at best, only of secondary importance for the purposes of this study.¹⁰⁰ If verified in the concrete case, they can provide valuable, corroborative evidence. To be useful in view of the present discussion, psychiatric attributes, *e.g.*, neuroses, psychoses, etc., must be rendered meaningful in terms of their behavioral and operative significance, effect, and repercussion upon the personality (the total dynamic behavioral patterns) of the individual in question. The connotation "homosexuality" itself, in any given case, requires analysis and explanation. In all events, it is inexorably necessary to know exactly the existential, factual, and behavioral characteristics of the personality which is itself on trial.¹⁰¹

The personality is here considered, as it is throughout this study, as the principal and immediate source and manifestation of dynamic (purposeful) behavior. As such, the personality is the architect and keystone of behavior. Upon these premises, an endeavor is made to provide an incisive understanding of the reasons for, and to lay the basis in support of, the proposition that the personality of the confirmed or near-confirmed homosexual, more precisely, of the psychosexual invert, is a psychosexual phenomenon which, in its consequences of behavior, may be expected to render morally impossible a positive cooperative participation in the matrimonial consortium to even a minimal degree on an enduring basis. The personality determines the immediate direction and orientation of the behavior patterns of the individual in his purposeful, concrete, and realis-

⁹⁷ Cf. Caprio, *Var. Sex. Behav.* p.135; *idem*, *Fem. Homosex.* p.299, quoting Dr. Emil Gutheil. The "personality pattern" is involved. *loc.cit.*; Cavanagh, *op.cit.* p.52; Ellis, A. *op.cit.* pp.80-81, 206-07; *EMH*, Vol. 5, p.1851.

⁹⁸ Noyes, A. Kolb, L. *Modern Clinical Psychiatry*, 6th ed. (Philadelphia: W.B. Saunders Co., 1963) p.469, col. 2; Cavanagh, *op.cit.* p.52-53; *EMH*, Vol. 5 p.1852.

⁹⁹ Cf. Cavanagh, *op.cit.* p.288, quoting Harvey, J.F. in *Theological Studies*, Vol. XXI n.3 (Sept. 1960) p.494; Noyes & Kolb, *op.cit.* pp.469, col. 2, 470, col. 1.

¹⁰⁰ An analogous position is taken in the field of psychiatry itself. Cf. *The New York Times Book Review*, Dec. 29, 1963, p.6, "The Psychiatrist and the Patient," Francis J. Braceland's review of Karl Menninger's, *et al.*, *The Vital Balance*.

¹⁰¹ Cf. Farnsworth & Braceland, *op.cit.* p.275.

tic active and reactive relationships to his environment. The issue here is obviously not the moral impossibility of mere conjugal sexual intercourse. It has already been sufficiently pointed out and emphasized that the state of matrimony in its essential role of the *consortium omnis vitae* embraces far more than the object of mere conjugal penile-vaginal penetration and insemination, which is, apparently, the exclusive preoccupation of the canons of the Code of Canon Law, 1082, section 1, 1081, section 2, 1015, sections 1-2, 1118, as the be-all-and-end-all of the essence of matrimony in pursuance of the objective as expressed and traditionally understood under the terms of canon 1013, section 1.

Homosexuality is said to be a failure in the personality in reaching heterosexuality. Accordingly, there is seen in psychosexual inversion an "incomplete evolution of the personality," a condition which may be associated also, in concept or practice, "with other sexual abnormalities"—some, oral and anal in nature—of ancillary sexual interest to the homosexual direction of the inverted personality. Thus, homosexuality may also be the expression of "other sexual abnormalities," or perhaps vice versa,¹⁰² involving, as the case may be, even a strong bisexual component.¹⁰³ These anomalies or deviations are common to the heterosexual and the homosexual. In the latter, they are influenced by or involved in the psychosexually inverted orientation and are apparently of psychogenic origin.¹⁰⁴ For the psychiatrist, these psychosexual disorders would have reference to both the total condition of the homosexual subject and the total problem of psychotherapy. For the purposes of this study, these collateral homo-psychosexually directed anomalies associated with homosexuality, if any are in evidence, may indicate, pro tanto, a more deep-seated psychosexual inversion in the personality of the subject, hostile to heterosexual companionship and compatibility in the matrimonial relationship. It appears that the presence of some of these anomalies, singly or in combination, operates, for some reason and in some manner or measure as the individual case may disclose, psychodynamically to satisfy or enhance the basic presence of the homosexuality.¹⁰⁵ Moreover, it is to be noted that,

¹⁰² Cf. Cavanagh, *op.cit.* pp.34-35 (the opinion of Allen); Feldman, "On Homosexuality" in *op.cit.* p.94. Bieber, I. *et al.* *Homosexuality—A Psychoanalytic Study of Male Homosexuality* (New York: Random House, 1962) e.g. pp.231-33, 238-51, explore a few abnormalities in their investigations.

¹⁰³ Cf. a case, psychodynamically rather complex, in Caprio, *Var.Sex. Behav.* pp. 229-250; a case, *op.cit.* pp.251-61, esp. pp.257 & p.315.

¹⁰⁴ Cf. Cavanagh, *op.cit.* pp.178, sqq.

¹⁰⁵ The anomalies in general are e.g., ejaculation, impotence, frigidity, vaginism, nymphomania, satyriasis, voyeurism, exhibitionism, transvestitism, fetishism, sadism, masochism, fornication, adultery, incest, seduction, prostitution, fellatio, cunnilingus, sodomy, masturbation. There are many. Cf. Cavanagh, *op.cit.* pp.92-95, 178-97, Clinic 13, "Homosexual Sexual Anomalies". Some of these sexual phenomena may be considered, it seems, as ancillary, or incidental, or even whimsical, appertaining to the principle feature of the inversion; others would seem to take on a more substantial, self-subsistent anomalous character. The

significantly, for the sexual deviate, sexual deviations and homosexuality itself may be considered as instances of erotic symbolism of normal heterosexual love. Perhaps this observation can be translated to the effect that they represent a fanciful escape from or a substitute for normal heterosexual reality,¹⁰⁶ as indeed they are. Irrational erotic symbolism is persistently involved in the personality of the psychosexual deviate.

Psychosexually, the personality in its sexual impulse, by some etiological force, becomes derailed from its objective of normal mature heterosexual direction and orientation.¹⁰⁷ Specifically, the sexual instinct, it is pointed out, fails to develop to heterosexual maturity in the total personality¹⁰⁸ and psychosexual immaturity is present.¹⁰⁹ Hence its arrest or impairment in this regard leaves the personality of the subject, in effect, on an adolescent or heterosexually undeveloped plateau. In other words, to the extent of deviation, he is in his personality non-heterosexual in respect to his address to and in his rapport with his environment—psychosexually immature and deviate¹¹⁰ or psychically heterosexually impaired. Accordingly, there is said to be in “true homosexuality,” *e.g.*, through indoctrination and homosexual practices, a “fixation and inversion of the normal sex instinct” to the same sex; a hetero-psychosexual defect or impairment in the personality and a divorcement from heterosexuality.¹¹¹

Specific attention is called to the following considerations. As stated, the true homosexual, for whatever reason, presents a psychosexually adolescent, immature personality. In theory and in fact, the origin and development of his psychosexual inversion and deviation and the condition of his personality may be explained and rendered understandable.¹¹² And accordingly, if the invert indulges in overt homosexual activity, this activity is objectively nothing more than juvenile play and gratification.¹¹³ Here, it seems, the psychosexual mentality is, in a word, that of the homosexual playboy or “playgirl” perhaps mentally dominated by what has been designated as the “pleasure principle.”¹¹⁴ In any event, the negative attitude of

Don Juan complex, an analogue of satyriasis, is the heterosexual promiscuity in attempt to escape from the incestuous and the homosexual direction. Cf. Caprio, *Var. Sex. Behav.* pp.229-30, 247; Cavanagh, *op.cit.* 182.

¹⁰⁶ Cf. Ellis, H. *Psychology of Sex* (New York: Emerson Books, Inc., 1946) pp.147-51; *idem*, *Studies in the Psychology of Sex* Vol. II (New York: Random House, 1937) Pt. I “Erotic Symbolism” pp.1-4, 8, 13; *idem*, “Erotic Symbolism” in *The World of Love* (ed. I. Schneider) Vol. I, *The Meaning of Love* (New York: Geo. Braziller, Inc., 1964) pp.340-43.

¹⁰⁷ Cf. Lorand & Balint, *op.cit.* p.92.

¹⁰⁸ Cavanagh, *op.cit.* pp.29, 65; Caprio, *Fem. Homosex.* pp.303, 304.

¹⁰⁹ Cf. Caprio, *Var. Sex. Behav.* pp.92-93, in regard to the male.

¹¹⁰ Cf. Cavanagh, *op.cit.* pp.36, 60-61, 63, 65, 84-85.

¹¹¹ Cf. Cavanagh, *op.cit.* pp.29, 37, 65, 85-86; *ESB*, Vol. I, p.488, col. 1.

¹¹² Cf. *e.g.* *ESB*, Vol. I, pp.487-488.

¹¹³ Cf. Cavanagh, *op.cit.* pp.84-86. The rationale and pattern of such behavior in the male are offered in Caprio, *Var. Sex. Behav.* pp.92-93.

¹¹⁴ Concerning this principle, cf. Aichhorn, August, “The Meaning of the Reality Principle in Social Behavior” in *Classics in Psychology*, pp.943-61, esp. pp.943-47.

withdrawal adverse to heterosexuality—which, as noted, is in the male the symptom of conviction of masculine inadequacy, of impaired psychosexual masculinity—does not come to rest. There is still the impelling inclination to or want of sexual expression, and, in the outlet of homosexuality, there is what is actually a pseudo-reassurance.¹¹⁵ In the last analysis, the homosexual orientation of the personality actually compensates for the existing, underlying heterosexual strivings which have been misplaced and misdirected by phobic anxiety toward heterosexual activity.¹¹⁶

Every invert, in this respect, is juvenile, adolescent, and immature. But not every adolescent is erotically a homosexual.¹¹⁷ The invert, psychobiologically, is psychosexually immature by definition of his condition of withdrawal from the heterosexual, by his direction and orientation toward the homosexual,¹¹⁸ and by the experiential standard of developed and mature heterosexuality. For heterosexuality is anatomically, biologically, physiologically, and psychologically the ascertained normal course of humankind, without which, indeed, the psychosexual invert could not as such assert himself.¹¹⁹ Heterosexuality is not merely an “accepted norm.” It is established in nature as a function of human sexuality. By this standard of natural function, the psychosexual invert and deviate is accordingly immature and adolescent. For if the sexual apparatus of the human male and female and their psychosexual orientation were not by their nature directed to each other, as in fact they are, it is difficult to imagine a more strange, and indeed more felicitous, coincidence in the memory and annals of humanity. Upon this standard of natural, human heterosexuality, the homosexual invert has—one must conclude perforce of human reason and experience—necessarily a psychosexually disordered mentality. It is disordered and disoriented from heterosexuality and at once directed and oriented to homosexuality as a way of life. He accords priority to this way of life in his hierarchy of values, if indeed there is for him a preference, regardless of whether this state is asserted as inborn or psychogenically produced. And whether or not, and if so to what extent, in a given case, this condition is also vested with an emotionally disturbed personality, though not immaterial, is coincidental and contingent in respect thereto.¹²⁰ Hence psychosexual inversion and deviation cannot be considered as synonymous with the normal, *i. e.*, usual state of adolescence. The adolescent as such is not in the state of arrested or impaired hetero-

¹¹⁵ Cf. Ovesey, *op. cit.* e.g. pp.21, 23, 102-03, 120-21, 122.

¹¹⁶ Cf. *op. cit.* pp.122, 127.

¹¹⁷ Cavanagh, *op. cit.* pp.84-86.

¹¹⁸ Cf. Cavanagh, *op. cit.* pp.36-37, 84-86.

¹¹⁹ Cf. Feldman, “On Homosexuality” in Lorand & Balint, *op. cit.* pp.92-94; Boss, in Cavanagh, *op. cit.* p.69; Caprio, *Fem. Homosex.* pp.298-99, in accord with Gutheil.

¹²⁰ Cf. *The “Third Sex”* A Symposium of Articles, ed. Isadore Rubin, pp.17-22 “Homosexuality: Conflicting Theories, Part II: Is homosexuality a symptom of personality disturbance—or a conditioned response that is not necessarily immature or neurotic?” by Isadore Rubin.

psychosexual condition with homosexual erotic orientation. The invert is.¹²¹ The latter may well be physiologically mature, but the psychosexual impulse has by arrest failed to reach hetero-psychosexual maturity, or has experienced, by reason of a psychosexual block, a deviation in the development of his personality. Heterosexually, he is antisocial.¹²²

Whether or not, and if so, to what extent, the invert reveals a psychologically well-integrated and well-adjusted personality in his relationships and dealings in society at large is a question subject to divergent assessments and views. Actually it seems that the answer to this question must depend upon the conditions found in each individual case. But a general distinction between the relatively minor population of psychosexual inverts said in some regard to be "institutionalized" or seem in clinical or private psychiatric practice and the much larger population unseen and over which the psychiatrists or other experts have no control seems justified. An indiscriminate approach must be avoided as an established assertion. A commonly noted psychiatric viewpoint would have the homosexual mentality, orientation, and striving to be a symptom of "psychic aberration" accompanied by obsessive anxiety in regard to the heterosexual function, a "symptom of a neurosis" or "a psychiatric illness."¹²³ The position taken seems to be that the homosexual is "a mental patient,"¹²⁴ whatever that designation may mean. Homosexuality is considered as a symptom, the end result, of a neurotic or other psychopathological condition issuing from variant causes and present in varying degrees of intensity in different cases.¹²⁵ The causes of homosexuality usually accrue from encounter and confrontation with the vicissitudes of life and living so that the psychopathic condition of psychosexual inversion is considered as acquired, not congenital or physiological.¹²⁶ Accordingly, it is noted with particularity that emotional illness and psychic disturbance are to be attributed generally to continuing deviates with confirmed or fixed, *i. e.*, exclusive or almost exclusive, erotic direction to the same sex, and that this state of homosexuality is synonymous with serious psychic disturbance. This psychopathological condition may be recognized as even passing the stage

¹²¹ Cavanagh, *op. cit.* pp.36-37, 84-86.

¹²² Cf. Noyes & Kolb, *op. cit.* p.467, col. 1, and compare Cavanagh, *op. cit.* pp.37, 65.

¹²³ Ovesey, *op. cit.* pp.11, 21-22, 102, 103, 128; *EMH*, Vol. 3, pp.761-62; Caprio, *Var. Sex. Behav.* p.89 Cf. Noyes & Kolb, *op. cit.* Chap. 28 "Psychoneurotic Disorders," and Chap. 29 "Personality Disorders." These chapters are most instructive as a broad background for and insight into the present subject. Anxiety is regarded as a common factor in the neuroses. Bartemeier, L.H. & Farnsworth, D.L., Chap. 20, "Sexual Deviation," in Farnsworth & Brace-land, *op. cit.* p.273; Cavanagh, *op. cit.* p.279, quoting Dr. Albert Ellis.

¹²⁴ Cf. Cavanagh & McGoldrick, *op. cit.* p.557.

¹²⁵ *ESB*, Vol. I, p.491; Menninger, *op. cit.* pp.196-197, 202-03; Noyes & Kolb, *op. cit.* p.466-68; VanderVeldt & Odenwald, *op. cit.* pp.423-24, 434; Caprio, *Fem. Homosex.* pp.292-93.

¹²⁶ Cf. Caprio, *Fem. Homosex.* pp.37-38, quoting Dr. Beran Wolfe as authority especially in respect to the female; *idem. Var. Sex. Behav.*, e.g., pp.88-89, 91, 92, 94-95, concerning the male.

of compulsive neurosis into the area of psychosis.¹²⁷ Accordingly, homosexuals are usually described as neurotic and subject to deep-seated character disturbances and personality disorders.¹²⁸ Confirmed or fixed psychosexual inversion is itself viewed as an integral element of the disturbance.¹²⁹ Here some observations are in order for the purpose of unmistakable clarity and orientation in respect to the present study. The ultimate purpose of this study is to discuss precisely whether the homosexual personality as such can develop and expand to such a state of negation (incapacity) of conjugal interpersonal heterosexual relationship and interest that it becomes fundamentally despoiled of the capacity to sustain, in a positive manner or even on a minimal, permanent and enduring basis, the matrimonial covenant or commitment to this conjugal interpersonal partnership and communion. The previous discussions and the considerations following herein lend strong support, the writer believes, to the definitely affirmative position in reply to this issue. But it does not appear as proven that a psychopathological condition is itself, as it were necessarily inherent in the state of psychosexual inversion. Such pathological condition may perhaps be found as an accompaniment thereof or perhaps as a cause or effect in a given case. Indeed, a psychopathological phenomenon, if in evidence, may be, in the proper case, additional indication *inter alia* of the deep-seated condition of psychosexual inversion.

It is contended, however, that the validity of the psychiatric view briefly indicated above must be confined to the psychopathological cases. The view has been challenged as an overgeneralization. Challengers reason that homosexuality (male) as a derivative and symptom of a psychopathological condition is a conclusion in psychiatry obtained from, and to be limited to, findings in cases observed in clinical or private psychiatric practice.¹³⁰ The results of various independent studies do not agree with the overly expansive psychiatric conclusion. The findings bear at the conclusion that homosexuality as such is not necessarily synonymous with or representative of a pathological psychosexual, or simply a psychopathological, personality. This view the writer designates as the sociological viewpoint. The situation is noted, moreover, that the homosex-

¹²⁷ Ellis, A. *op.cit.* pp.9, 80, 81, 82, 93; Cavanagh, *op.cit.* pp.57-60, 245; Caprio, *Var. Sex. Behav.* p.94. An attempt here to expatiate upon the psychic phenomenon of relationship between homosexuality and psychosis would not contribute anything substantial to this discussion. Cf. study by Gustav Bychowski, "Homosexuality and Psychosis," in Lorand & Balint, *op.cit.* pp.97-130 including extensive bibliography; Forel, A. *The Sexual Question*, rev. ed. enlarged by C.F. Marshall (New York: Medical Art Agency, 1922) pp.244-45. Homosexual activity may lead to a psychosis. Caprio, *Fem. Homosex.* p.305; *ESB*, Vol. I, p.491, col. 2; Caprio *Var. Sex. Behav.* p.114.

¹²⁸ Cavanagh, *op.cit.* p.103; Noyes & Kolb, *op.cit.* p.469, col. 2; Caprio, *Fem. Homosex.* pp.xvi-xvii.

¹²⁹ Ellis, A. *op.cit.* p.129.

¹³⁰ See Cavanagh, *op.cit.* pp.29-37, for a brief survey on this question.

ual population as a whole does not become associated with the psychiatrist, and it apparently is not or may not be interested in doing so. The respective findings just referred to are the results of the work of British researchers, with the inclusion of references to the Kinsey and Wolfenden Reports.¹³¹ Only the ultimate results can be briefly stated here. The pretense is not made to speak with finality.

This ensemble of investigations and conclusions negates the general proposition that homosexuality as such represents a psychopathological personality.¹³² By reason of the potential bisexuality of the human personality, it is indicated¹³³ that the subject will respond to his teaching, social environment, and experience.¹³⁴ Accordingly, the homosexual personality types are found to be not a homogenous, but rather a diverse and hence a "heterogeneous group"¹³⁵—a very important, realistic observation. Homosexuality as such cannot be regarded as presenting mental illness. It is oftentimes found to be associated with complete mental health in other social and communal respects.¹³⁶ The typical subject is found to be an otherwise mature individual,¹³⁷ well-adjusted, self-assured, with a "well-integrated, emotionally stable personality," "apparently free of any complexes about his sexual orientation."¹³⁸ This amenability to integration and stability of personality in other respects must also be understood as including successful adjustment to the demands of occupation and to the general societal heterosexual milieu, after the manner of other mature individuals.¹³⁹ These observations from the Reports compel this writer to venture a remark from his own readings and study. It is suggested that it is impossible to compress the homosexual personality in general, and without distinction, into the clinical or psychiatric mold of the significantly pathological homo-psychosexual personality.¹⁴⁰ The foregoing considerations, more-

¹³¹ Published in *The "Third Sex"*; cf., e.g., Preface, pp.iii-iv, and Rubin, "Homosexuality: Conflicting Theories. Pt II," *op.cit.* pp.17-22; and pp.40-43, the reported study and findings of Curran and Parr; with other reports.

¹³² *Op.cit.* pp.17-22; p.72 Liddicoat Survey of 100 homosexuals (50 males; 50 females). In accord, the study of Curran and Parr. *op.cit.* p.19.

¹³³ Cf. e.g. Kinsey, A. *et al.* *Sexual Behavior in the Human Female* (Philadelphia W. B. Saunders Co., 1953) p.468, sqq.

¹³⁴ *The "Third Sex"*, pp.21-22—Reference to Kinsey Report.

¹³⁵ *Op.cit.* p.19; and p.52—Conclusion of Westwood Report.

¹³⁶ *Op.cit.* pp.19-20—Reference to Wolfenden Committee Report.

¹³⁷ *Op.cit.* pp.40-43—Study by Curran and Parr; 100 male homosexuals. In accord, the Liddicoat Survey, *op.cit.* p.19.

¹³⁸ *Op.cit.* p.19; Rubin, "A Homosexual Doctor's Story" with the head note: "A true picture of homosexuality cannot be based solely on material drawn from prison, mental hospitals, and psychiatric practice" in *op.cit.* pp.44-45, 47, including references to 16 case histories reported as typical of "hundreds of homosexuals" (male) met "not as patients"—Some cases are apparently bisexual.

¹³⁹ *Op.cit.* pp.19-52—Reference to Westwood Report; pp.44, 47—Reference to Report of the Homosexual Doctor.

¹⁴⁰ Cf. e.g., Cory & LeRoy, *op.cit.* in its entirety; Inge & Sten Hageler, *An ABZ of Love*, transl.

over, seem to find some confirmation in a psychological principle which appears to have become a platitude or truism. Namely, each individual in his personality is unique. Hence, each instance of psychosexual inversion and withdrawal from heterosexuality is unique. This uniqueness relates to specific etiological facts considered in view of the individual's peculiar psychodynamic development and to the mentality and behavior of the personality.

Nevertheless, disintegration of conjugal heterosexual companionship is often found in the presence of male and female psychosexual inversion in a "confirmed" or advanced stage.¹⁴¹ The homosexual orientation prevails against the conjugal consortium. There is a significant deficiency of orientation toward heterosexuality and matrimony.¹⁴²

The writer sees no reason for considering the psychiatric viewpoint (aside from its alleged overgeneralization) and the sociological viewpoint concerning psychosexual inversion as antithetical. They can both, within the limits and on the basis of their findings, obviously be considered valid and practicable. But they are, in fact, complementary. Both disclose a psychosexual constant, a common denominator, *viz.*, a homo-psychosexual personality orientation and a homosexual mentality and direction, which is adverse to heterosexuality and incapable of sustaining the necessary postulates of the matrimonial commitment in a proper case. They are complementary for an additional reason. It seems obvious that the presence or absence of significant psychopathology may not be, in many cases, a mere matter of "black and white." Accordingly, the thought here conveyed is that a psychopathological condition, if and to the extent found to be present, may, as already suggested, serve to explain and corroborate the depth and intensity of the psychosexual inversion.

The present state of research appears to permit the following observations. There does not seem to be sufficient scientific evidence to demonstrate that the homosexual personality as such indicates, at least in some significant degree, a psychopathological or pathological psychosexual per-

D. Hohnen (Copenhagen: Chr. Erichsen's Forlag; New York: Medical Press of N.Y., 1963) pp. 123, col. 1, "Group 7", 124, col. 1, 127 col. 1, 130, col. 2, 131.

¹⁴¹ Cf. *The "Third Sex"*, pp.45, 47—Reference to Report of the Homosexual Doctor; together with the incisive report of Allen, C., British psychiatrist, "When Homosexuals Marry" in *op.cit.* pp.58-62, esp. pp.60-62, who states (p.62) precisely: "But a homosexual-heterosexual marriage has too many points of strain to be adjusted in most cases. It cannot be too strongly insisted on that no homosexual should ever marry to rid himself of homosexuality. Homosexuals are not adjusted by marriage and never have been. Sometimes they can be treated by psychotherapy but never by marriage . . . marriage is too big a risk to take. Only too often, as I have pointed out in the cases above, the homosexual tires of married life, goes back to his former mode of living, and leaves a wife struggling to bring up children . . ."

¹⁴² Cf. Allen, *loc.cit.*, and *op.cit.* pp.19, 50—Reference to Westwood Survey, Of 127 male homosexuals, nearly 50% had some sexual relations with women, but in 82% the relations occurred not more than twice, if at all. Of the 10 married, 5 were divorced.

sonality.¹⁴³ Evidence seems to show that under proper conditions and circumstances, homosexual orientation can, by simple choice and experience, be cultivated (by nature and nurture)¹⁴⁴ without the precedent etiology of psychic and personality disturbance. Sexual inversion and psychopathology are separable entities, *per se*. Hence, the homo-psychosexual personality, oriented to homosexuality and adverse to heterosexuality represents a psychosexual behavior phenomenon which may be psychopathological or nonpsychopathological. As such, it may be expected to respond to its socio-sexual environment according to its own specific psychosexual orientation based on its own hierarchy of sexual values,¹⁴⁵ if any. It seems clear, therefore, that the facts do not warrant imputing psychopathological anomaly by applying generalizations to individual cases. This position must be borne in mind as a matter of principle in reference to the following discussions. Generalizations are at best only guides in regard to assessing individual cases. The writer does not accept the proposition that the homosexual is vested necessarily with a psychopathologically emotionally disturbed personality. He does, however, insist that the psychosexual invert is in a state of mental disorder in reference to the naturally established facts, concepts, and purposes of heterosexuality. And it seems, furthermore, that the presence and extent of *emotional* disturbance must, from a practical nonstatistical viewpoint, remain a problematical matter to be ascertained in each case.¹⁴⁶

The condition of psychosexual inversion and deviation is considered an endeavor to secure satisfaction from a "system" which has, by whatever cause and form, psychosexually defaulted in or departed from the normal, mature heterosexual direction and orientation. The term "system" here can only mean a particular type of abiding behavior pattern in the way of life and living. This condition of psychosexuality in its character role of inversion and deviation influences and is involved in the entirety of the human being and his personality. In this respect it is like sexuality,¹⁴⁷ the survival instinct,¹⁴⁸ and the impulses of hunger and satiety. More precisely, one is given to understand that homosexuality as psychosexual inversion and deviation is deeply rooted in the personality in its entirety and as such invades the "whole mental life in all its aspects," not merely those pertaining to sexuality.¹⁴⁹ The condition is not merely tangential and peripheral or superficial. It is vested in the personality with profound effects and

¹⁴³ Cf. Cory & LeRoy, *op. cit.* pp.253-55.

¹⁴⁴ Cf. Cory & LeRoy, *op. cit.* p.57.

¹⁴⁵ Cf., e.g., Cory & LeRoy, *op. cit.* p.51

¹⁴⁶ In regard to these considerations, cf. The "Third Sex", *op. cit.*

¹⁴⁷ Cf. Cavanagh, *op. cit.* pp.67-68, proposing the doctrine of Sandor Rado; Noyes & Kolb, *op. cit.* p.467, col. 1; Ellis, A. *op. cit.* p.9 (Introd. by D.W. Cory).

¹⁴⁸ Cf. Menninger, K. *The Human Mind* (New York: Garden City Publ. Co., Inc., 1930) pp.266-68; Cavanagh & McGoldrick, *op. cit.* pp.113-14.

¹⁴⁹ Cavanagh, *op. cit.* p.66.

significance. The personality is accordingly beset with inhibitions in the face of the object as heterosexual.¹⁵⁰ This constant attitude of diverse etiology is said to be based upon a want of self-assurance or self-esteem, which tends to be diffused to other behavior areas thereby creating new inhibitions or behavior stalemates.¹⁵¹ Thus the resulting inhibitory complex affects motivations and dominates the entire personality.¹⁵² Sexual inversion may consequently be found to reach "the depths of the personality,"¹⁵³ and involve "the whole personality," which moves only in its own homosexual world.¹⁵⁴ This latter descriptive exposition seems, undoubtedly, to refer to the confirmed or fixed exclusive or almost exclusive and perhaps emotionally disturbed invert whose sexual inversion has become thoroughly ingrained in the warp and woof of his personality.¹⁵⁵ It thus becomes apparent that, in general, there are various degrees and aspects of psychosexual inversion and the consequences thereof. One must conclude, then, that in a proper case, the psychopathic disturbance, if any, has as its central attraction the sexual personality of the same sex. There is, therefore, the phenomenon that one may rightly call the homosexual personality. The disturbance involved, if any, is focused upon as at least the probable basis of a homosexual neurosis.

The psychiatric literature consulted in this study usually refers to and discusses overt male and female homosexuality, *i.e.*, sexual deviation performed in some fashion with a partner.¹⁵⁶ In this context, instances of homosexual inversion are described as involving the negative "obsessive-compulsive," irrational, and neurotic conviction of his or her incapacity, the fear of heterosexual involvement and activity, and the attitude of withdrawal therefrom. In addition, positive psychopathic affinity to the same sex and its realization in overt activity, perhaps to some degree compulsive, is also described.¹⁵⁷

The literature states that the psychosexually inverted and deviated mentality and homosexual personality make their proximate appearance when the urge to express sexual love encounters its conflict with the heterosexual environment. Namely, the urge to express sexual love finds itself unable to be fulfilled heterosexually because the irrationally conceived

¹⁵⁰ Ovesey, *op. cit.* p.131.

¹⁵¹ *Op. cit.* pp.22, 102.

¹⁵² Cf. *op. cit.* pp.105-06.

¹⁵³ Cf. Cavanagh, *op. cit.* p.151.

¹⁵⁴ *Op. cit.* p.226.

¹⁵⁵ Cf. Ellis, A. *op. cit.* pp.9, n.2, 19-20.

¹⁵⁶ Cf., *e.g.*, *EMH* Vol. 3, p.747.

¹⁵⁷ VanderVelt & Odenwald, *op. cit.* pp.352-53, 434; Cavanagh, *op. cit.* pp.52-53; Ellis, A. *op. cit.* pp.9-10, 19-20, 80-81, 208; Menninger, K. *The Vital Balance*, pp.196, 202. This position is amply supported in the works of Ellis, A. *op. cit.* and of Hatterer, L. *Changing Homosexuality in the Male—Treatment for Men Troubled by Homosexuality* (New York: McGraw—Hill Book Co., 1970) throughout, in regard to the male.

factors in the heterosexual environment present inhibitory conditions—irrational heterosexual inhibitions—and do not permit the heterosexual encounter. Here is seen the homo-heterosexual conflict. This situation constitutes the state of hetero-psychosexual arrest and impairment or block. The detour, *i.e.*, bypassing the heterosexual conflict-obstacle, leads to homosexual activity.¹⁵⁸ The detour is seen as a dynamic, *i.e.*, purposeful, psychological defense-structure adverse to the natural, biopsychologically directed, overt heterosexuality,¹⁵⁹ designed to protect the integrity of the personality. A facile example: the invert concludes that matrimony is “at best a bad risk”; this is a wide-ranging significant attitude,¹⁶⁰ but apparently a pure rationalization.¹⁶¹

It would seem that in general a significant difference, especially in the degree of effective obstruction against heterosexuality, is to be noted as between male homosexuality and lesbianism. According to the pertinent literature cited in this study, this difference of obstruction does not appear attributable to the etiology of homosexuality as such. Rather, it seems to make its appearance in the attitude of the female subject toward heterosexual encounter¹⁶²—perhaps often in the peculiar sexual ambivalence or bisexuality of the female.¹⁶³ Females in which this arrest, block, or obstruction is present seem less dominated thereby than males similarly affected.¹⁶⁴ This disparity may result from the difference between the basic psychological and psychosexual construct of the female psyche and personality¹⁶⁵ and that of the male. The basically female personality, if to some degree assertive and operative, may permit the subject to adjust with less difficulty to the heterosexual encounter. The maternal instinct and love are perhaps also operative to this end.¹⁶⁶ If this position is correct, one may perhaps expect to find, even in the aggravated, though not extreme, case,

¹⁵⁸ Cf. Cavanagh, *op.cit.* pp.52-53 (view of Krausz), p.69 (view of Boss), pp.73, 75; Ellis, A. *op.cit.* pp.10 (Introd. by D.W. Cory), 207; Lorand & Balint, *op.cit.* pp.85, 92-94; Caprio, *Fem. Homosex.* p.299.

¹⁵⁹ Cf. Feldman, “On Homosexuality” in Lorand & Balint, *op.cit.* pp.92-94; Caprio, *op.cit.* pp.298-300.

¹⁶⁰ Cf. Cavanagh, *op.cit.* p.68; Lorand & Balint, *op.cit.* p.92.

¹⁶¹ Cf. Devlin, *op.cit.* pp.100-01.

¹⁶² Cf. Caprio, *Fem. Homosex.* pp.14, 180-81, 303, 304; Cavanagh, *op.cit.* p.105.

¹⁶³ Caprio, *op.cit.* p.14; Cavanagh, *op.cit.* pp.119, 140-41.

¹⁶⁴ Lesbian attitude, though present, is noted as admitting heterosexual intercourse and companionship in marriage. Ellis, H. *Stud. Psycho. Sex. loc.cit.* pp.261, 333 n. 2; Hastings, D.W. *Impotence and Frigidity* (Boston: Little, Brown & Co. 1963) p.115. Lesbian practices are less often hostile to maintenance of marriage than are those of the male. Kinsey, A. *et al. Sexual Behavior in the Human Female* (Philadelphia: W.B. Saunders & Co., 1953) p.486.

¹⁶⁵ Cf. Deutsch, Helene, *The Psychology of Women—A Psychoanalytic Interpretation*, Vol. I (New York: Grune & Stratton, 1944), e.g., pp.144, 146-48, 172-75, 185-88, 190, 91-94, where this matter is discussed.

¹⁶⁶ Cf. Cavanagh, *op.cit.* pp.119, also pp. 75, 140-41; Caprio, *Fem. Homosex.* pp.89-90, 180; Lepp I. *The Psychology of Loving*, transl. B. Gilligan (New York: Mentor—Omega Books, Helicon Press, Inc. 1963) e.g., pp.46, 47-48.

at least a minimal degree of acceptable compatibility between the lesbian mentality and personality and the matrimonial consortium. The applicability of this matter to the individual case and its own circumstances appears questionable. In any event, these brief observations concerning the lesbian would not appear to be applicable to the instance of the "hard-core obligatory" lesbian, especially one of the mannish type.¹⁶⁷

The following general and brief considerations from psychiatric literature regarding the psychic phenomenon of heterosexual obstruction are those which appear to be common both to the male homosexual and the female lesbian. The arrest or impairment of hetero-psychosexual direction definitely seems to be identified as a psychiatric phenomenon which actually occurs and which consists of an ideation, bias, imbalance, and orientation adverse to heterosexuality.¹⁶⁸ This study is not competent to assay the merits of the theories offered to explain this complex psychic phenomenon. Its concern is the nature, function, and result of arrest or impairment in regard to the matrimonial consortium.¹⁶⁹ The basic interest of this study is whether the arrest or impairment of the hetero-psychosexual personality exists in the invert as a matter of psychological or psychiatric fact. Though this significant and etiologically complex psychic phenomenon of sexual inversion is recognized, it seems that a formal, comprehensive, and logical exposition thereof, if such exists, is a comparative rarity. Professional and expert information is primarily in the nature of clinical and private practice reports accompanied by some explanations.

It seems to be commonly agreed that the present anomaly of psychosexual inversion often has its foundations established during the formative period of the personality. Accordingly, the obstruction in hetero-psychosexual orientation is regarded as having occurred by the incidence of some psychic, traumatic experience either in the sphere of sexuality or as related, at least in the mind and distorted interpretation of the subject, to this sphere. The progress of the anomaly may have its inception upon the domestic scene. Unhappy, untoward parent-child relationships victimize the young and frequently provide the cornerstone, if not the structure, of his subsequent psychic disorder, emotional disturbance, and inver-

¹⁶⁷ Cf. Cavanagh, *op.cit.* pp.140-41 with pp.119-20; and with Caprio, *Var. Sex. Behav.* pp.160-61; and with *idem*, *Fem. Homosex.* pp.4, 6-12, 114-15, 170-71, 302-07 and authorities noted therein.

¹⁶⁸ Cf., e.g., Ellis, A. *op.cit.* pp.51-54, 57-59; Noyes & Kolb, *op.cit.* pp.466-67.

¹⁶⁹ Various theories or explanations are introduced to explain this failure, arrest, or impairment, Cf. Noyes & Kolb, *loc.cit.*; Cavanagh, *op.cit.* pp.34-37, 66-69, 84-86, and authorities therein; Lorand & Balint, *op.cit.* pp.107-08; *ESB*, Vol. I, p.488. The theories are commonly proposed in the consideration of the etiology of homophilism. Combinations of casual elements or factors suggested by these various theories, if verifiable in the actual thought processes and behavior patterns of individual cases, would perhaps serve better to explain realistically the resulting arrest or impairment in those individual cases. Cf. *ESB*, Vol. I, pp.487-88, and the other authorities, *passim*, cited herein.

sion.¹⁷⁰ In this milieu, rejection of the child by the parent or the sense of rejection on the part of the child can be forceful contributory factors.¹⁷¹ The hetero-psychosexual block or impairment is thus seen as the gradual and progressively cumulative result of factual, environmental, and hostile psycho-traumatic experiences.¹⁷² The experiences are associated with and characterized by an emotionally repugnant and antagonistic impact upon the psyche and thence upon the personality of the subject. As a result, the experiences are seen as adverse to hetero-psychosexual development, orientation, and adult sexual maturity.¹⁷³ A "something" comes between the subject and the heterosexual personality.

The homosexual personality is characterized by a fearsome detachment, distrustful and hostile toward its human social environment, and by a withdrawal of communication into the self and into psychically painful, sexual self-engrossment.¹⁷⁴ This description of what appears to be that of the male homosexual seems to have its approximate parallel in the female homosexual personality, the lesbian. But the various emotional components in the lesbian personality would appear to be manifested with greater intensity.¹⁷⁵ In the absence of overt activity, there also remains the residual world of fantasy. In a word, the sexual instinct seems not to have advanced beyond the sexual self.¹⁷⁶ The broad description of the homosexual just presented, however, engenders some hesitation. Namely, in view of the considerations previously set forth herein, it would seem that this description in its entirety can hardly be understood as having unrestricted

¹⁷⁰ Cf. Cavanagh, *op.cit.* pp.60-61; the doctrine of Bieber, I. *et al.* *Homosexuality—A Psychoanalytic Study of Male Homosexuals* (New York: Random House, Vintage Books, 1962).

¹⁷¹ Cf. Cavanagh, *op.cit.* pp.61-62.

¹⁷² Cavanagh, *op.cit.* pp.57, 60-61.

¹⁷³ Cf. Cavanagh, *op.cit.* p.63; p.245, quoting Hayden.

¹⁷⁴ In what appears to be, in part, an incisive portrayal of the male homosexual, the important, basic, and obstructive psychic phenomenon of the inverted personality is noted by Henri J. M. Nouwen in "Homosexuality—Prejudice or mental illness", *The National Catholic Reporter*, Nov. 29, 1967, p.8 at "Homosexuality and mental disorder."

We already saw that homosexuality is a disturbance in communication. The communication with the world, that is to say, with everything that is different, with every person who is the other, who is out-there, is severed in favor of the communication with his own body. The behavior of the homosexual is marked by a growing hostility and distrust in regard to the world, and a growing attention for his own isolated body. In the relationship with his partner . . . he stays in the circle of his own body and the other is only a mirror in which he finds a reflection of himself. The sexual act, therefore, is more in the order of a fight and competition than in the order of love and tenderness. The homosexual experiences his body as a possession, an object desirable for the world, that has to be guarded and defended. Therefore, the gratification of the homosexual act is more often derived from inflicting pain than from sharing love, more often from taking than from giving.

¹⁷⁵ Cf. Caprio, *Fem. Homosex.* pp.171-79, 181-84, and 303-07, *passim*; Cavanagh, *op.cit.* pp.103-05, 118-20, 140.

¹⁷⁶ Cf. Caprio, *Var. Sex. Behav.* pp.92-93.

or unqualified or unselective application to homosexual personalities.¹⁷⁷

It would appear that with respect to both the arrest or impairment of hetero-psychosexual development and the ensuing behavior of the psychosexually inverted personality, the psychiatrist and the jurist converge upon common ground with the cooperative lead of the psychiatrist. The detailed disclosure of the specific etiological case history of the homosexual is of essential and significant importance to both in order to discover the rationale and the existential character of his behavior. The purpose of investigation is insight into the disordered personality pattern. Accordingly, the pertinent facts in respect to familial and extrafamilial relationships must be ascertained and evaluated since it is these facts which have set afoot the development and produced the condition of the homosexual attitude and personality.¹⁷⁸ Space here permits only a meager and minimal exposition of the development of arrest or impairment of the hetero-psychosexual direction and orientation. The pertinent professional literature indicates that homosexuality does not necessarily have its actual onset only in preadolescent or adolescent period.¹⁷⁹ The following brief observations, especially with respect to development of male homosexuality as an arrest or impairment of the hetero-psychosexual personality, are made in part from case histories. Accordingly, there is here presented a very brief etiological appraisal of the male homosexual personality from the viewpoint of clinical and private psychiatric practice. It should be noted that the view presented here is, for the most part, a psychiatric view,¹⁸⁰ not by any means the only view.¹⁸¹

As already noted in this study, basic factors disposing, contributing to, and cultivating homoeroticism are usually designated as: 1) biophysiological and 2) psychological.¹⁸² Within this general and fundamental etiological framework and in view of the human and tendentious homoerotic activity descriptably included therein, there emerges as important another etiological factor. This factor is environmental and may be called simply "sociological," in that the homosexual result therefrom seems ultimately to be a preferentially (albeit irrationally) chosen, acquired, and cultivated way of life and of erotic satisfaction.¹⁸³ This generally broadened view of homophilism, set forth in the professional and

¹⁷⁷ Cf. *supra*, esp. materials and citations from *The "Third Sex."*

¹⁷⁸ Cf. Cavanagh, *op.cit.* pp.60-61.

¹⁷⁹ Cf. Ellis, A. *op.cit.* p.10 (Introd. by D.W. Cory).

¹⁸⁰ Cf., e.g., Ovesey, *op.cit.* The passages noted from this work are, for the most part, taken from throughout the book. The same ideas occur frequently in this excellent work. In this particular matter it is in accord with the psychiatric literature cited in this study.

¹⁸¹ Cf. Caprio, *Fem. Homosex.* pp.xvi-xvii (Introd. by K. Bowman, M.D.); Cavanagh, *op.cit.* pp.20 n.3, 21, 39, sqq.

¹⁸² Cf., e.g. Ellis, A. *op.cit.* pp.51-77.

¹⁸³ Cf. *op.cit.* pp.51-77; esp. pp.61-62, 64, 66. This position seems to derive adequate support from the reports in the work cited *supra* *The "Third Sex"*.

expert findings made outside the sphere of psychiatric patient population, seems to support and emphasize a sociological-sexual origin of at least some incidence of homoeroticism.¹⁸⁴ But at all events, these general etiological categories or factors obviously do not represent existentially independent agents. They suggest rather a plurality of influences which may be found to operate in an individual case, perhaps almost invariably in variant combination.¹⁸⁵

In general, a psychiatric point of view, by way of example, traumatic sexual experiences—from whatever sources and manner they originate, *e.g.*, parents or strangers—may lay the foundation for obsessive fears of sexual inadequacy (castration complex). This psychosexual fear-situation (*e.g.*, castration, fear, anxiety) is involved in and sets into motion the psychodynamics which may be expected to result in a persistent entertainment of designs and performances of various sexual activities to maintain psychosexual reassurance and confidence¹⁸⁶ and perhaps to allay the neurosis of failure and inadequacy. But in all cases, the original or basic psychic phenomenon is in some manner a created fear of heterosexuality.¹⁸⁷ This statement is necessarily a general one for the extent of the aura of fear, its intensity, and especially its quality or character (*e.g.*, abiding anxiety) varies in inverts. There is variant withdrawal from heterosexuality. There is an abiding personality, in the psychosexual behavior phenomenon, adverse to heterosexuality. Usually the fear is of the heterosexual encounter, but in some cases it is extended to social intercourse.¹⁸⁸ As a rule, the psychic disposition is not (or may not be) amenable to heterosexual intercourse.¹⁸⁹ The subject is confronted with fear of inadequacy and of failure in performance.¹⁹⁰ More precisely, however, there is present more than a fear properly so understood. The attitude or disposition is rather one of abiding influences and interference of heterosexual anxiety and distress¹⁹¹ so that actually the heterosexual encounter is hindered by a phobic condition.¹⁹² Typically, a phobic anxiety, avoidance of, and resistance to heterosexual contact and the female genitals is to be expected.¹⁹³ This psychosexual phenomenon appears to be representative of the common denominator of the true homosexual personality as reported in psychiatric literature. Its intensity admits, of course, a considerable

¹⁸⁴ Cf. *supra*, the materials and citations from *The "Third Sex."*

¹⁸⁵ Cf. Ellis, A. *op.cit.* p.51; *ESB*, Vol. I, p.488, col. 2.

¹⁸⁶ Cf. Cavanagh, *op.cit.* pp.244-45, quoting Hayden.

¹⁸⁷ Ovesey, *op.cit.* pp.21, 102.

¹⁸⁸ *Op. cit.* pp.111, 116, 119-20, 129-30.

¹⁸⁹ *Op.cit.* p.120

¹⁹⁰ *Op.cit.* p.122-23.

¹⁹¹ *Op.cit.* pp.114, 120, 122, 129, 130.

¹⁹² *Op.cit.* pp. 107, 121.

¹⁹³ *Op.cit.* pp. 103, 106-07, 115, 120-23, 137.

margin of variance in individual cases.¹⁹⁴ Yet, in a proper case, the adverse hetero-psychosexual regard may even go beyond the absence of inclination and extend to a positive revulsion toward heterosexuality.¹⁹⁵ The sense of effeminacy or of masculine inferiority may be present as a "castrating influence." This would result in masculine sexual inadequacy and insecurity—psychic "auto-castration"—so that sexual deviation is at least the predominant and preferred role in sexual life—a situation of bisexuality.¹⁹⁶ Thus, the psychosexual invert is characterized as subject to mental disorder in regard to the heterosexual reality and as alienated therefrom. In this context it is observed that he does not have the sense of virility. "[H]e has never really been born into the society of men."¹⁹⁷ This is a most significant and far-reaching observation. This analysis is another way of stating that the invert has, in respect to heterosexuality, a distorted priority or hierarchy of values. Hence, his personality does not exercise and pursue what may be termed due discretion in regard to the heterosexual reality. In this sense it appears correct to remark that a personality disintegration in respect to adult hetero-psychosexual maturity ensues and may even be enlarged by an emotional disturbance. In the exclusive homosexual male, this state of heterosexual inhibition is attributed to fear of the female and the strictly heterosexual rapport; desire in this respect is absent.¹⁹⁸ The homosexual in this condition is "unaffected by feminine charms." Hence, upon these premises and for the purposes of this study, it must be added that "the homosexual-heterosexual marriage is merely a prelude to tragedy."¹⁹⁹ Accordingly, it must be clear that "tragedy" here means failure²⁰⁰ in the matrimonial consortium—failure in the psychosexually inverted personality consisting of abiding frustration in regard to the formal aspects of heterosexuality and to the heterosexual rapport as such. Hence, one may expect to find the potential of irreparable schism of the conjugal personalities, if it has not already occurred.

Following are three case illustrations concerning the etiological development in the male. The sketches are very cursory, but descriptive and typical, though by no means exclusive illustrations. They endeavor to set forth very briefly the basic seminal elements and features of the psychodynamics of psychosexual inversion; namely, the sense of disposition of inferiority, of inadequacy, of insecurity, and of frustration with respect to mature, adult heterosexuality, and the turn to psychosexual inversion. In

¹⁹⁴ Cf. *op.cit.* p.115.

¹⁹⁵ *Loc.cit.*

¹⁹⁶ Cf. Caprio, *Var. Sex. Behav.* pp.93, 114-15, 135, 136.

¹⁹⁷ Bychowski, G. "Homosexuality and Psychosis," in Lorand & Balint, *op.cit.* p.107.

¹⁹⁸ Ellis, A. *op.cit.* p.207, supported in large in the work of Hatterer, *op.cit. passim.* Cf. also Cavanagh, *op.cit.* p.74.

¹⁹⁹ Cf. Cavanagh, *op.cit.* pp.74-75; Allen, C. "When Homosexuals Marry" in *The "Third Sex"*, pp.58-62, esp. pp.60-62 regarding the marriages of homosexual males or females.

²⁰⁰ Cf. Cavanagh, *op.cit.* pp.135-36, 137-38.

these features the cases seem to reflect the basic ingredients in the pattern of psychodynamic development of hetero-psychosexual arrest or impairment and inversion, whatever may be the specific factual etiology in individual cases. The persistent attitude of hetero-psychosexual inferiority seems to be a common denominator in male inverts, resulting, it appears, from an abiding attitude or disposition of personal inferiority and deprecation.²⁰¹

There is the case of the timid one.²⁰² The male subject is heterosexually discouraged in the persistent belief that he is inadequate, *i.e.*, not entirely male, is in fear of not being sufficiently potent (autocastration complex), and is in retreat from the mature heterosexual approach to the female. His heterosexual inhibitions are disclosed in his sexual intercourse with difficulty on his part with only two previously married females; once with a prostitute. The other incident is an affair of several months, from which he withdraws because his partner becomes too possessive and reveals her love for him, which he cannot reciprocate. It would seem that the subject is, in his present condition, not capable of total heterosexual interpersonal commitment in matrimony. He is now in his late thirties, a college graduate, single, and successful in his career. His personality, characterized by a fear of aggressiveness, is enmeshed in heterosexual inhibitions in regard to the respectable female. In childhood and youth, timidity developed into effeminacy, with an ensuing sense of inferiority, inadequacy, and insecurity. The sense of rejection by his family accompanied by ridicule and contempt from other males became a psychically traumatic situation aggravated by overt homoerotic experiences in his fantasied female role in adolescence. These fantasies follow him into adulthood. The subject experiences an acute sense of exclusion from the masculine circle, a societal withdrawal, an attitude of defeatism, failure, and of introversion, a sense of general insecurity and fear of responsibility. This general inferiority complex is also translated into a sense of heterosexual inferiority, insecurity, frustration, and heterosexual inhibitions.²⁰³ His direction toward these females is motivated by the mere obsessive, frustrated, self-preoccupation to capture masculinity.²⁰⁴ He confesses himself incapable, though desirous, of the heterosexual orientation and its responsibilities.²⁰⁵ He finds himself incapable of recognizing, associating, assimilating, or accepting sexuality and honorable female love on a heterosexual basis.²⁰⁶ The hetero-

²⁰¹ Cf. Caprio, *Var. Sex. Behav.* pp.125, 126, 135-36, and Index *s.v.* Inferiority; and esp. Ellis, A. *op.cit.* pp.70-73.

²⁰² Caprio, *op.cit.* pp.115-37.

²⁰³ This extension of general inferiority into the sphere of hetero-psychosexuality is noted by Ovesey, *op.cit.* e.g. pp.22, 24-25, 34-35.

²⁰⁴ Cf. Caprio, *Var. Sex. Behav.* pp.123, 125, 130-31, 135, 136.

²⁰⁵ *Op.cit.* pp.130-31.

²⁰⁶ *Op.cit.* pp. 126-27, 128, 136.

psychosexual direction and personality and hence the conjugal personality seem to be nonexistent.

There is the second case, that of the victim of seductions.²⁰⁷ He is now twenty-five years of age and single. Even as a child, in the family circle he experiences the sense of parental rejection, inferiority, and insecurity. During preadolescence, he appears as shy and effeminate. Of this situation older boys take full and frequent advantage, making him the passive object of their homosexually simulated coital activities, *per rectum*. These encounters he apparently begins to accept with desired compliance and complaisance in a fantasied female role. His early adolescence is marked by his frequent passive activities in oral homoerotic gratifications. Also in his early adolescence, divorce disintegrates the family. He witnesses some of the frequent heterosexual promiscuities of his stepmother. He is now in the age of puberty. She seduces him sexually on one occasion, as do her male partners, homosexually *per rectum*. The state of "severe psychic trauma" to his heterosexuality is obvious, and it becomes further compounded by later overt homoerotic experiences. As age advances, he "cruises" the public scene in more numerous passive homosexual experiences with men in order to realize satisfaction from the male for his effeminacy, apparently in his sense of inferiority and "castration-anxiety"—an attitude of male sexual inferiority and inadequacy. In his disposition of homosexual passivity, attempts to enlist interest in the female are foreign to his personality. Orientation to heterosexuality becomes completely obstructed; his heteropsychosexual block is gravely compounded and complete. By reason of his attitude of cooperation and sincerity, it is reported that "ultimate heterosexual adjustment appears favorable." It is unanimously agreed in the professional literature herein cited that desire for help and sincere cooperation by the subject are necessary to achieve adjustment in his personality, if and to the extent to which the latter is possible.

The third case discloses psychosexual inversion not assisted by indulgence in overt activities. Continuous neurotic restraint imposed by the mother (projection of her neurotic, hypochondriacal fears and anxieties) against physical activities engender the sense of physical inferiority and, by association, sexual immaturity. This results in the serious obstruction of male sexual development and a block to sexual maturity and heterosexuality.²⁰⁸ This result is reported as achieved through a sense of heterosexual insecurity and fear created by denial of parental love. Parental love, if present, would engender a sense of assurance and security in reaching one's sexual identity and heterosexual direction.²⁰⁹ But in this case, the psycho-

²⁰⁷ Caprio, *Var. Sex. Behav.* pp.137-40.

²⁰⁸ Caprio, *Var. Sex. Behav.* pp.140, 143-44.

²⁰⁹ Cf. e.g. Caprio, *op.cit. passim*, pp.129, 135-36, 141-42, 143, 144, 151, 152, 154, 155. An analogous case of an adult, single lesbian of apparently masculine or mannish type is very briefly noted by Helene Deutsch, M.D., *op.cit.* p.327.

traumatic mark upon his personality from these adverse experiences as well as many other adverse familial situations (unmitigated sense of rejection and estrangement) follows him from youth into adulthood. He is now a young man in his late twenties and single. Consequently, there is here discerned an obstruction of adjustment to the encounter with the female and to normal heterosexuality and marriage.²¹⁰

Specifically, lack of mutual familial love and acceptance, a loveless existence, begets in the male child and adolescent a general sense and disposition of insecurity and inferiority, of rejection and distrust of societal environment, and of rebellion against its accepted behavior, reinforced by parental neglect and misguidance, and by the harmful influence of projected maternal, neurotic fears and anxieties.²¹¹ The adverse result upon the personality of the subject is its withdrawal from reality accompanied by the fear ridden obstruction of development to heterosexual maturity. He is a beaten youth, psychically and physically.²¹² Without confidence, security, and guidance, homosexual preoccupations and fixations emerge, and in adulthood, overt homosexual activities and heterosexual frustrations take the field.²¹³ The subject stands psychically emasculated by his neurotic mother in her successful attempt to set him against the opposite sex and against heterosexuality and marriage by introducing into these concepts, *inter alia*, sexual guilt, fear, and apprehension.²¹⁴ Psychic impotence is recognized as present at least in sufficient degree to cause psychic inferiority and inadequacy together with retreat from heterosexuality and divorcement between sexuality and heterosexual love and hence from heterosexual love itself.²¹⁵

The foregoing case illustrations as well as the discussions to follow are presented chiefly with the intention of portraying the condition of the homosexual mentality and direction which, as acknowledged in the professional literature, can make its appearance at an early or later age, aside from the course of specific etiological developments in individual cases, and which may control the time or period of manifestation.

POSITIVE PSYCHODYNAMIC DISPOSITION AND DIRECTION TO THE SAME SEX

The substance of this title as to the *factual* phenomena of direction and orientation involved in homo-psychosexual inversion has been largely set forth in the previous discussions, especially in the immediately preceding section. Orientation to the same sex is governed by the homosexual mentality and direction. As already stated, true homosexuality is an abid-

²¹⁰ Caprio, *op. cit.* pp.141-44, 152, 154.

²¹¹ *Op. cit.* pp.140-41, 142, 143, 154.

²¹² *Op. cit.* pp.144, 149, 152, 154.

²¹³ *Op. cit.* pp.145-48, 49, 51.

²¹⁴ *Op. cit.* pp.152, 153, 154, 155.

²¹⁵ *Op. cit.* pp.151, 152-53, 155.

ing mental disorder which may be accompanied by emotional disturbance and dominated and directed by an anti-hetero-psychosexual mentality with at least a preferential disposition toward the same sex. This psychosexual inversion is not merely a superficial psychic phenomenon. It involves a deep-seated and perhaps, as the case may be, complex, psychodynamic anomaly which constitutes the framework of the personality structure, its orientation, and its function in interpersonal relations. The mentality and orientation of every true homosexual, male or female, toward the same sex appear evident from the professional literature. It is, namely, a disposition and attitude mentally conceived and determined, and as such, acknowledged and confessed confidentially in consultation or openly professed with, or even without, overt homosexual activity, or also, as the literature has it, found to be latently, *i.e.*, unconsciously or not overtly, present.²¹⁶

This section is confined to considering the psychodynamics, *i.e.*, the purposeful rationale, of the homo-psychosexual direction and orientation. It endeavors to briefly set forth psychiatric explanations of the psychodynamics of homosexuality in view of an incipient which becomes an omnipresent homoerotic interest. Accordingly, its purpose is to offer some insight into what seems to be, perhaps, the true meaning and significance of the mental condition of the genuine homo-psychosexual personality, at least in regard to the male, which initiates and directs an attitude and a way of life different from that of the heterosexual personality. The psychodynamics of homosexuality appears to lend clarification toward this insight. Some form or forms of defense mechanism²¹⁷ are psychodynamically operative, especially though not exclusively, in active, overt homosexuality.²¹⁸ Defense mechanism, or "ego defense," *e.g.*, the well-known rationalization, is here understood as an irrationally conceived and contrived mental construct adapted and employed to resolve the problematic difficulties which confront the individual and his personality in his relationships to his environment and to shore up and maintain the functional integrity of his personality in respect thereto.²¹⁹

Homosexuality in the process and progress of its mentally disordered psychodynamic development and course involves some type or types of morbid, perhaps complex, neurotic and psychopathological defense mechanism to avoid confronting the hetero-psychosexual realities psychically painful to the psychosexual invert.²²⁰ The defense mechanism embraces

²¹⁶ The feature of homosexual preference may be noted, *e.g.*, in Cavanagh, *op.cit.* p.18.

²¹⁷ Cf. Devlin, *op.cit.* pp.99-102.

²¹⁸ Recognized, *e.g.*, by Feldman, "On Homosexuality" in Lorand & Balint, *op.cit.* pp.92-93; and frequently noted concerning male and female in the works of Caprio, cited.

²¹⁹ Cf. Devlin, *op.cit.* pp.90-100; Cavanagh & McGoldrick, *op.cit.* pp.114, 115; Menninger, *The Vital Balance*, pp.145-46, 153, 162-63, 195-98 (male homosexuality).

²²⁰ Cf. Bromberg, W. "Homosexuality" in *EMH*, Vol. 3, pp.751-52; Cavanagh & McGoldrick, *op.cit.* pp.180-81 and Devlin, *op.cit.* pp.99-102 (on defense mechanisms); Menninger, *op.cit.*

two stages and perhaps quite often a third stage: 1) withdrawal from heterosexuality; 2) direction to the same sex; and 3) resort to overt homosexual encounter and gratification²²¹ in various and even sophisticated homoerotic activities in search of "total gratification."²²² Homosexuality is thus considered to be a psychologically oriented defense mechanism against fear or similar disturbance, insecurity, or anxiety²²³ concerning heterosexuality.²²⁴ Accordingly, homo-psychosexual inversion would appear to incorporate a psychologically and irrationally fashioned psychodynamically directed ruse or a coping device in the presence of and directed as a remedy against equally irrational heterosexual inferiority, insecurity, or anxiety.²²⁵ The homo-psychosexual invert thus paradoxically presents a psychologically disordered and distorted mentality which is heterosexually disoriented, but which, nevertheless, endeavors to resort to

pp.125-26 (coping devices: adaptation, accommodation in interaction with environment), p.153 (adaptive retreat to maintain equilibrium at a lower level of total functioning with the best possible facade). This general, psychic condition is definitely noted *passim* in the work of Ellis, A. *op.cit.*

²²¹ Cavanagh, *op.cit.* pp.228-29, Caprio, *Fem. Homosex.* pp.120, 303, (lesbians); Bromberg, "Sexual Deviation" in *EMH*, Vol. 5, p.1852 and *op.cit.* Vol. 3, pp.751-52. Hence, as here understood, the defense mechanism or escape device or compromise is a less-than-rationally appropriate attempt at or means of conjuring assistance and reassurance of ego-competence and of sustaining an integrated personality structure to adjust, however irrationally, to an environmental problem situation. Cf. Menninger, K. *The Human Mind*, pp.269-95; Devlin, *op.cit.* pp.96-100.

²²² *ESB*, Vol. I, p.489 (male homosexuality as flight from fear); Cory & LeRoy, *op.cit.* pp.32-48 (sex acts and attitudes).

²²³ This consideration is deftly treated in Menninger, *The Vital Balance*, pp.195-98 (male homosexuality), and pp.200-02. A similar conclusion is reached in regard to lesbians in Deutsch, H. *op.cit.* pp.232, sqq.

²²⁴ What appears to be an incisive analysis of complex psychodynamics in a case of lesbians in alternative roles of mother-child relationship, is furnished by Deutsch, H. *op.cit.* pp.346-47. The same idea is expressed on pp.74-75. This explanation appears confirmed in Cavanagh, *op.cit.* p.69 (opinion of Boss); p.58, quoting Rado; p.59, quoting Bromberg; *ibid.* quoting Davidman; p.60, quoting Cole. The treatise of Feldman is most instructive on the psychogenesis of homosexuality. Concerning the lesbian, Deutsch points out, *op.cit.* p.339:

The pseudologic girl who writes herself passionate love letters and enjoys these as though they came from a boy in love, is not far removed psychologically from the girl who writes love letters to another girl. Every individual act of the homosexual in love expresses a nonfulfilled heterosexual hope. The more passionate the girl is in her narcissistic desire to be loved, the more ardent will be her active wooing of the "other."

²²⁵ Cf. Feldman, "On Homosexuality", in Lorand & Balint, *op.cit.* pp.74-94 (situations and cases of homosexual females and males); esp. p.93:

As a practitioner, I have learned that, essentially, homosexuals want to mate with the opposite sex. In therapy, my intention is to discover what kind of fear or distress diverted the patient from the straight line and made a devious tour necessary . . . [t]he main part of the therapy . . . is to emphasize that the patient's original position is a healthy one, given as a precious gift by nature . . . [and] to bring the patient to the biologically given heterosexual relationship which is not created by the therapy but liberated for use.

inversion as a crutch to support, reinforce, implement, and fulfill his faltering or faltered basically heterosexual personality.²²⁶ What he renounces, denies, or withdraws from, he strives to capture and achieve in and through a perverted, deviant guise and disguise of inverted psychosexual personality. *Quod non sum simulo; quod sum, ea dissimulantur*. If this conclusion is correct, the homo-psychosexual personality discloses a mentally disordered self-contradiction, a paradox of "homosexual heterosexuality" as a way of life and living.

These considerations as premises seem to lend a clearer insight into an inherent understanding of the position that homo-psychosexual direction and orientation are an endeavor to "bypass these barriers," *i.e.*, the psychically "inhibiting environmental factors" of heterosexuality, in order to reach some "positive" rapport with the human environment.²²⁷ The phenomenon is a "homosexual detour,"²²⁸ a circuitous route in striving toward sexual gratification and fulfillment of the personality. There appears to be the positive though deviated urge to love and to be loved.²²⁹ The explanation is offered, with considerable merit it seems, to the effect that the endeavor in the male is to reach out for heterosexuality in the guise (or disguise) of homosexuality²³⁰—a vicarious heterosexuality. Specifically, overt homosexual activity is an obvious simulation of the corresponding heterosexual encounter.²³¹ Moreover, it has been observed that the male is "a constant striving for masculinity," even in the resort to "auto-erotic practices accompanied by homosexual fantasies," apparently in lieu of heterosexual activity.²³² At the same time, homosexual relations, male or female, are seen as a striving for security and love.²³³ It seems that the direction and orientation of true homo-psychosexual inversion in its active, overt form represents a "substitute outlet" for heterosexuality, which has severely suffered a psychic block or impairment.²³⁴

²²⁶ Cf. Bromberg, in *EMH*, Vol. 3, p.758 (male inversion); Feldman, *op.cit.* pp.92-93.

²²⁷ Cf. Cavanagh, *op.cit.* p.69 (opinion of Boss).

²²⁸ Cf. Feldman, *op.cit.* p.85.

²²⁹ Cf. Cavanagh, *loc.cit.*

²³⁰ Cf. Feldman, *op.cit.* pp.92-94.

²³¹ Cavanagh, *op.cit.* pp.73-74, 75. This view is supported esp. in the works of Bieber, *et al. op.cit.* and of Cory & LeRoy, *op.cit.*

²³² Caprio, *Var. Sex. Behav.* p.135.

²³³ Cf. Kobler, *op.cit.* e.g., pp.119-20; Deutsch, H. *op.cit.* p.327; Caprio, *Fem. Homosex.* pp.234-35.

²³⁴ Cf. Cavanagh, *op.cit.* p.62, quoting West.

Postscript: The writer is painfully aware that this study fails to adequately consider the lesbian. This subject, it seems, must be treated separately. The writer has already assembled considerable material as a sequel to this entire study. The personality of the female, heterosexual or lesbian, seems to be in some important, fundamental aspects a law unto itself, a subject *sui generis*, as would abundantly appear, e.g., in the work of Helene Deutsch, M.D. *op.cit.* esp. Chapter Nine "Homosexuality" pp.325-353.