

NEWSLETTER OF THE GAY CAUCUS

of Members of the American Psychiatric Association

Whereas homosexuality per se implies no impairment in judgment, stability, reliability, or general social or vocational capabilities, therefore, be it resolved that the American Psychiatric Association deplores all public and private discrimination against homosexuals in such areas as employment, housing, public accommodation, and licensing and declares that no burden of proof of such judgment, capacity, or reliability shall be placed upon homosexuals greater than that imposed on any other persons. Further, the American Psychiatric Association supports and urges the enactment of civil rights legislation at the local, state, and federal level that would offer homosexual citizens the same protections now guaranteed to others on the basis of race, creed, color, etc. Further, the American Psychiatric Association supports and urges the repeal of all discriminatory legislation singling out homosexual acts by consenting adults in private.

---resolution adopted by the APA Board of Trustees

Volume V Numbers 4-5

WINTER, 1980

STRAIGHT ANSWERS FROM JUDD MARMOR

Interviewed by the Editor of this Newsletter in his Westwood, Los Angeles, office, Dr. Judd Marmor answered several questions submitted by GPNY president, Dr. Stuart Nichols, and GCMAPA President-Elect, Dr. David Kessler.

Q: Why do you think gay psychiatrists have been so reluctant to come out professionally? Does this reluctance tell us anything about why we, as individuals, chose to become psychiatrists during times when our specialty unanimously considered homosexuality to be a uni-dimensional type of "psychopathic personality"? On the other hand, why should there be so much professional resistance to the idea of gay visibility? Finally, how can we best continue our struggle to remain a positive force within American psychiatry?

A: I think it's quite natural that gay people might be attracted to psychiatry because we often are drawn to an area that deals with our own inner conflicts. I don't think it's possible to be a member of a minority or oppressed group and not have an experience of suffering and an awareness of what discrimination and suffering do to the human spirit. Psychiatry deals with human suffering, and the desire to ameliorate that suffering is one of the primary motives for people going into the field. Other psychiatrists who aren't gay have gone into their profession because they've experienced some sense of suffering in their lives and a comparable desire to ameliorate that suffering. The reason that it is apparently more diffi-

cult for gay psychiatrists to come out, I think, is inherent in what psychiatry is supposed to represent. If psychiatry is unwittingly acting as an agent of society in protecting the mores and conventions of society in the guise of certain kinds of scientifically couched rationalizations, then anti-homosexual bias is built into the very rubric of psychiatric thinking. On that basis, to be a person who is presumably dispensing mental health and be a "sick person" yourself is very difficult; so that gay psychiatrists were understandably afraid to come out because the very basis of their functioning as psychiatrists would seem to be undermined by that. Continued on page 7

Spiegel, Masserman Speak Out for Civil Rights

Dr. John Spiegel, whose speech at last year's APA convention in Chicago on "the cultural values of the emerging gay community" was considered by many to be the highlight of Caucus-sponsored events, recently addressed the National Symposium on Homosexuality (sponsored by American Association of Sex Educators, Counselors, & Therapists). Dr. Spiegel indicated that he had been encouraged to repeat what he modestly describes as "my speculative approach" to the comparative sociology of homosexuality. Dr. Spiegel's work is based on the Kluckhohn theory of

Continued on page 4

CORRESPONDENCE

To The Editor:

Because my name was mentioned in the Fall 1979 issue of the Newsletter in connection with two important items involving officers of the APA, I feel that in order to eliminate any possible ambiguity it would be helpful for me to offer some clarifying details for your readers.

The letter from Dr. Alan Stone, President of the APA, was originally addressed to me, and expressed his displeasure with the headline "Psychoanalytic Statute Prevents Legal Entry of Gay Aliens" in Volume 5, No. 1. I communicated Dr. Stone's feelings to you, and mailed you a copy of his letter together with a copy of my reply, in which I indicated my own reservations about the article and anticipated a more complete account of the immigration affair in the next issue of the Newsletter. (That article did subsequently appear.)

The second reference concerned my proposal to Dr. Allan Beigel, APA Program Committee Chairman, for a major lecture at the May 1980 meeting to be devoted to homosexuality. This suggestion was made informally by telephone a few days before the Program Committee was scheduled to meet in Washington to sift through the proposed scientific presentations. Dr. Beigel informed me that the

lectures were planned well in advance, that the psychiatrist whom I had suggested had given a major address at the 1979 Convention, and that in any event the lectures had probably already all been committed.

Nevertheless, he indicated that his Committee would be willing to consider any last-minute proposal for a lecturer we might wish to forward to APA Headquarters, although he could not be very encouraging. (I was not able to come up with an alternative name on short notice, and the matter went no further.)

During the same conversation, Dr. Beigel informed me that careful consideration would also be given to any other program ideas originating from the Gay Caucus. When I told him that we were submitting three proposed evening panels, he seemed interested but said that usually many more panel proposals were received than could be accommodated, but depending on their merit we might hope for the acceptance of one or two. (In actuality, all three panels were later accepted, as was an all-day course on homosexuality sponsored by the Northern California Psychiatric Society Committee on Homosexuality.)

Sincerely yours,
David R. Kessler, M.D.
President-Elect, GCMAPA

To the Editor:

There is a sense of militancy and provocation in the Newsletter of the Gay Caucus of Members of the APA that I find disturbing, not because I am opposed to militancy, but because I believe it must be tempered with reason and action.

Two cases in point are the headline labeling the Immigration Law as a psychoanalytic statute and the editorial criticizing the APA for non-affirmative action.

Both of these are misleading and refer to psychiatry's past stance on homosexuality as if it remains unchanged and as if the present leadership supports the old viewpoints. It is important to remember that the current APA leadership has supported an end to discrimination against homosexuals. I daresay that the action of the APA leaders in removing homosexuality from the nomenclature and adopting a strong anti-discrimination stand back in 1973 was taken with input from very few gay members of the APA.

I think that one of the very real problems is not with the leaders of the APA but is the failure of gay physicians to provide sufficient input to stimulate the APA to action. Speaking from personal experience it takes a great deal of work, time, and

commitment to bring about changes. However, when effort is put forth I have found our local district branch and the APA leadership, including Dr. Stone, receptive to gay issues.

It seems to me that we have an option of fighting with the APA or working together to bring about the changes we wish. Too often when we expect "the APA" to do something we forget that we are all members of the APA and so who is it that we expect to do this work? I think it behooves each of us to become involved in the workings of the APA and to put forth some real effort to change those things which need changing.

There are ample opportunities for all gay psychiatrists, whether closeted or open, to initiate some kind of action. There are letters which need to be written, educational programs which need to be developed and committees of all kinds which need members.

When there are more than a handful of gay physicians actively working on these issues, then we will be more justified in being militant and more critical of the APA if things do not change. Until then I think it is more reasonable to provoke our own members to action rather than provoking the APA.

Sincerely yours,
James Krajewski, M.D.

Psychiatry and Homosexuality: The Early Years

Editor, Newsletter GCMAPA:

The enclosed short article is, in part, drawn from a presentation I made last month in Mexico City at the Fourth World Congress of Sexology. The title of that paper was "Psychiatry and Homosexuality: From Krafft-Ebing to DSM-III" and it was given in a session for "Sex Education for Health Professionals" and was well-received. At the panel I was introduced as, among other things, a member of the steering committee of GCMAPA, so we got a bit of publicity out of it.

Following the session several gay colleagues from different parts of the world asked me for information about our organization: in particular, a Norwegian colleague seemed to be inspired to start a physicians' organization in his country, and a Colombian sex educator asked for permission to translate my paper into Spanish and circulate it with their newsletter in Latin America.

Certainly this is an example of how the visible gay psychiatrist at meetings such as these can use the opportunity to educate and inform colleagues. There were a number of Lesbian participants at the Congress who self-identified themselves as such, but I am, to my knowledge, the only male to have done

so. One of the women asked the panelists at a session on male homosexuality whether they were themselves gay, and they fudged and hedged, and finally refused to say, which I thought was unwise politically. People will take us seriously if we are willing to stand up and be counted: I have always done so since I came out of the closet in medical school, and have received nothing but respect and support from colleagues.

One positive note from the Congress: not one speaker advanced psychopathological views of homosexuality in any of the sessions on that topic, and the next strong push (as I advocated in my paper) should be at the international level via the World Health Organization and the ICD-9 nosology to eliminate the diagnosis of homosexuality.

Finally, I would draw your attention to my paper in the forthcoming issue of Comprehensive Psychiatry entitled "Egodystonic Homosexuality" in which I discuss etiology and treatment of dysphoric states associated with minority sexual orientation from the point of view of a gay psychiatrist.

Sincerely yours,
Jaime Smith, M.D.

"In former years I considered contrary sexual feeling as a result of neuro-psychical degeneration. . . . Science has rendered a service to justice and to society by teaching that what seem to be immoral conditions and actions are but the results of disease."

These were radical words when they were written by Richard von Krafft-Ebing in 1889. Prior to the incorporation of minority sexual orientation into the realm of psychopathology, homosexuality in Western culture was regarded as either a moral sin or a civil crime, or both, and regulation of this form of behavior was entrusted to ecclesiastical or criminal prosecutors. The transformation in the late nineteenth century of what had been sinful or criminal behavior represented a humanitarian advance, which may be attributed to the change in conceptual paradigms from pre-scientific to rational and scientific.

In parallel with these developments in scientific circles there arose a social movement in Central Europe dedicated to the eradication of social injustice and legal persecution directed towards homosexual people. This was the first phase of the gay liberation movement, and its best-known proponent was the German neurologist and sexological pioneer Magnus Hirschfeld.

In 1887 Hirschfeld founded an organization known as the Scientific Humanitarian Committee in Germany. The Committee published a yearbook with accounts of research and educational activities of its members, and in 1897 launched a petition campaign for the purpose of achieving repeal of the infamous Paragraph 175 of the German penal code, which criminalized male (but not female) homosexual behavior. The drive for signatories of the petition continued for a quarter of a century, and thousands of prominent men and women added their names: among those signing were Albert Einstein, Martin Buber, Thomas Mann, and many others, including two world experts in sexual science--Richard von Krafft-Ebing and Sigmund Freud.

With the rise of the new dynamic psychiatry, the older theories of the origin of homosexual orientation, such as Krafft-Ebing's concept of degeneration, were discarded and replaced by psychodynamic formulations. Freud himself did not view homosexual adjustments as inherently pathological, nor did he consider homosexuality to be a contraindication for the acceptance of a candidate for training in psychoanalysis. What is more, Freud wholeheartedly supported the work of

Continued on page 8

GAY PSYCHIATRIST

ATLANTA

According to a source who wishes to remain anonymous "the atmosphere down here is not good." No organization efforts are known to exist, though "behind the scenes, some psychologists and some psychiatrists are speaking."

BOSTON

According to regional representative Dr. David Seil, the New England Association of Gay Psychiatrists recently advertised themselves in the APA Massachusetts District Branch Newsletter. Among their major objectives for the near future is a plan to petition the Boston and Western New England psychoanalytic institutes for statements of policy regarding acceptance into, and successful completion of, analytic training for openly gay candidates. Dr. Seil also reports that his group has set up a "Media Watch Committee."

The NEAGP meets monthly. There is a core group of 12 psychiatrists and a mailing list of 30. New England psychiatrists are encouraged to contact Dr. Seil for further information: c/o NEAGP, 196 West Springfield Street, Boston, MA 02118.

CHICAGO

Dr. David Ostrow claims that he meets a gay psychiatric colleague for lunch intermittently. Otherwise, he knows of no activities among gay psychiatrists in the greater Chicago area.

LOS ANGELES

For more than a year, gay psychiatrists in the L.A. and Orange County areas have been

meeting regularly for case presentations, consciousness raising, and sensitivity sessions. At a recent meeting, Dr. Norman Hartstein reviewed the literature on sado-masochism. At that same meeting, Dr. Ted Lindauer discussed his career as a psychiatric sex therapist, perhaps the first in the area, trained in the (Helen Singer Kaplan) techniques to treat homosexual as well as heterosexual dysfunction. Those interested in joining what may be the most enthusiastic and industrious group outside San Francisco should contact coordinator Dr. Robert Schwartz, 5645 Park Oak Place, Los Angeles, California.

NEW YORK

The New York District Branch of the APA has agreed to set up a task force, tentatively to be called "The District Branch Task Force on Gay Issues." Dr. William Frosch, President of the District Branch, has asked that appointments to the task force be made by the President-Elect. Thus far, Drs. Stuart Nichols, Jean Munzer, and Emery Hetrick have been asked and have agreed to participate. Information about the task force and about GPNY can be obtained from Drs. Nichols or Hetrick (144 East 36th Street, New York, NY 10016).

PHILADELPHIA

Philadelphia Health Professionals for Human Rights meets once a month. In this, the organization's second year, projects include production of a newsletter and setting up of a speakers' bureau and referral service. The association encourages the participation of physicians, dentists, and medical students in addition to psychiatrists. Spokesperson for the group is Dr. Steve Glass.

Spiegel, Masserman Speak Out for Civil Rights

Continued from page 1

variations in cultural value orientations, "which we have used here [at the Florence Heller Graduate School for Advanced Studies in Social Welfare at Brandeis] in our studies of ethnic communities and families, and in the problem of service delivery to minority populations."

On March 6, an open meeting was conducted at the Metropolitan Community Church on Chicago's north side to hear opinions for and against the state's proposed gay rights ordinance that will be voted on this spring. Among those testifying, in person, were state representatives and immediate past President of the APA, Dr. Jules Masserman. Dr. Masserman spoke warmly and strongly in support of full civil rights for gay people. His address was greeted by a prolonged, ear-splitting, standing ovation.

'S ACROSS THE USA

SAN FRANCISCO

At the request of a number of gay physicians, the President of the Northern California Psychiatric Society appointed a Committee on Homosexuality in 1978. The charge of the Committee was broadly written to allow it to deal with all issues related to psychiatry and homosexuality. The membership was largely gay.

Since the time of its formation the Committee has undertaken a variety of projects with an amazing degree of success. In one of the first projects, the Medical Society consulted with the Committee concerning a tape on homosexuality which was used in an educational project. Other educational programs have been developed. These include presentations at the annual meeting of NCPS and a six-hour course which will be presented at the APA meeting in May. Currently a curriculum for residency education programs is being formulated. There is a strong possibility that a presentation will be given at the next annual meeting of the American Association of Directors of Psychiatric Residency Training.

From a more political standpoint the Committee provided the impetus for NCPS to oppose the Briggs Initiative in California and to publicly hold a press conference with other mental health disciplines in this regard.

The Committee also was actively involved in the recent immigration cases in San Francisco in which the Immigration Service attempted to bar homosexuals from entering the United States. A statement condemning the action of the Immigration Service was adopted by NCPS and was circulated to all the local members of Congress and appropriate government officials along with a letter calling for an end to discrimination

against homosexuals. There was a significant favorable response to the letters from the recipients. NCPS also appointed Dave Kessler to represent their position in court if necessary. Other issues which were raised by the immigration cases were referred to APA committees for action. These included issues of ethics and of the abuse of psychiatry.

Perhaps some of the most significant gains of the Committee have been in the areas of achieving a sense of legitimacy and a positive working relationship with organized psychiatry. Chairperson Jim Krajeski reports that he feels that the members and leaders of NCPS have become more sensitive to gay issues and more comfortable with and understanding of homosexuals and homosexuality. Indeed, the local organization has been most supportive of gay issues and recently nominated both Jim Krajeski and Dave Kessler for offices within NCPS. Jim feels that the personal contact among gay psychiatrists, NCPS, and the national APA has been invaluable and he recommends establishing similar committees wherever possible.

WASHINGTON, D.C.

Gay psychiatrists, only some of whom are GCMAPA members, are meeting regularly in the greater Washington, D.C., area. Each month, there is a case presentation, and recent (usually psychiatric) literature is often discussed. According to area coordinator, Dr. Constantine Kyropolous, most of the discussions are devoted to clinical issues encountered in practice. Sensitivity sessions are currently being evaluated. Those interested in working with the Washington group are encouraged to contact Dr. Kyropolous at 2110 Bancroft Place, N.W., Washington, D.C. 20008.

WANTED: CLINICAL EXECUTIVE DIRECTOR

A qualified applicant is being sought for the newly created position of executive director. A top-level management position will be filled by a person with dynamic leadership skills. Responsibilities include the clinics, expansion of programs, project development, and ongoing operations. Salary negotiable. Liberal fringe benefits. Send inquiries to: Search Committee, Howard Brown Memorial Clinic, 2676 North Halstead, Chicago, Illinois, 60614 (312) 871-5777.

GCMAPA EXHIBIT SET FOR SF

The GCMAPA will feature "Homosexuality: A Decade of Research" as the theme of its exhibit for the forthcoming APA convention in San Francisco. Designed to bring to the attention of APA members recent research, literature, and studies concerning homosexuality, the exhibit will offer a special complementary reference list of some of the Seventies' most important scientific reports. This list tentatively includes 25 selections, 10 of which are from the Journal of Homosexuality.

GCMAPA & Journal of Homosexuality: An Alliance?

Haworth Press Editor Bill Cohen has recently proposed that the GCMAPA consider a bulk membership subscription to its publication, the Journal of Homosexuality. According to Mr. Cohen, subscriptions could then be made available to members at \$12/yr., half the regular price for individuals.

The Journal of Homosexuality is an established and recognized research journal. It was selected for inclusion in both Index Medicus and Excerpta Medica some time ago. Out of approximately 23,000 medical journals received by the National Library of Medicine, approximately only 2,000 are selected by the Intramural Committee on Index Medicus, which includes the deans of several of the most prestigious medical schools in the country.

The Journal, publishing as it does a body of peer-review research literature, may be a publication that the Caucus can indicate that it helps to sponsor, with the benefit of adding research as well as political goals for the Caucus's activities. If you like the idea of having a subscription to the Journal become a GCMAPA membership benefit, please let us know, either by mail to the Newsletter, by word of mouth, or at the San Francisco convention.

Homosexuality & the Law

Edited by Donald Knutson, J.D.
The Haworth Press, 149 Fifth Avenue
New York, N.Y. 10010
Publication date: December 1979
Hardbound. \$19.95

Homosexuality and the Law is the first comprehensive book dealing with the current legal issues, problems, and court decisions

relevant to female and male homosexuality.

Comprehensive chapters review major areas of litigation and scholarly research, including: homosexuality and the constitutional right to privacy; employment discrimination and the rights of gay people; immigration law and the rights of homosexual aliens; child custody cases; discussion of solicitation statutes; homosexuality and the military; and associational rights for homosexual persons.

The book is a special, hardbound double issue of the Journal of Homosexuality. It is also the first in a series of hardbound books to be published by the Haworth Press in a series called "Research on Homosexuality."

Professor Donald Knutson, J.D., editor of Homosexuality and the Law, is Professor of Law at the University of Southern California, and Director of Gay Rights Advocates, a public interest law firm in San Francisco.

SANDERS, MARMOR STUDY "SUCCESSFUL HOMOSEXUAL MEN"

David S. Sanders, who wrote the chapter "A Psychotherapeutic Approach to Homosexual Men" for Marmor's soon-to-be-published Homosexual Behavior, has been working with Marmor on "A Study of Successful Heterosexual and Homosexual Men." According to Marmor, preliminary work for this study has been under way for nearly two years and has recently received NIMH funding. As characterized by Marmor, the study will attempt to bring out some of the positive aspects of homosexual life-style and character adjustments. Directly or indirectly, it will comment on such phenomena as gay creativity, intelligence, and altruism. Requests for additional information should be addressed to Drs. Sanders or Marmor.

GAYS AND SUICIDE

Eric E. Rofes is preparing a book entitled I Thought People Like That Killed Themselves: Homosexuality and Suicide. Recognizing the difficulty or impossibility of collecting specific statistics, he is focusing on several aspects of being gay in our society which may be especially relevant: coming out, loss of a lover, youth, age, alcoholism, and life-styles. Anyone with information or relevant experiences is asked to contact Eric at 45 Garden Street (#6), Boston, MA 02114.

NEWSLETTER OF THE GAY CAUCUS

of Members of the American Psychiatric Association

Whereas homosexuality per se implies no impairment of judgment, stability, responsibility, or general conduct or of educational capabilities, therefore, be it resolved that the American Psychiatric Association deplore the public and private discrimination against homosexuals in such areas as employment, housing, public accommodations, and financing and devote that no burden of proof of such judgment, capacity, or responsibility shall be placed upon homosexuals greater than that imposed on any other persons. Further, the American Psychiatric Association supports and urges the enactment of civil rights legislation at the local, state, and Federal levels that would offer homosexuals, under the same protection now guaranteed to others on the basis of race, creed, color, etc. Further, the American Psychiatric Association supports and urges the repeal of all discriminatory legislation targeting and discriminating against homosexuals, adults or minors etc.

Editor.....Lawrence Mass, M.D.
Production.....Richard Hannemann

This newsletter is published six times a year and is available upon request from Lawrence Mass, M.D., Newsletter Editor; 133 West 17th Street (#4a); New York, N.Y. 10011

Health, Happiness, and Gay Couples

Psychiatrist David McWhirter and his lover, psychologist Andrew Mattison, partner therapists at San Diego's Clinical Institute for Human Relationships, are co-authoring a new study, tentatively entitled Male Homosexual Couples. As first reported in an exclusive cover story of THE ADVOCATE ("Working Relationships" by Scott Anderson, 2/7/80, issue 285), the study is based on in-depth interviews conducted over the last five years with 156 couples, covering day-to-day details of their relationships: work, division of labor in the home, finances, socializing, relations with family and children, sex with each other, and outside sexual activities.

- Highlights reprinted from THE ADVOCATE
- every couple together over five years had outside sexual contacts.
 - a high percentage of couples reported that outside relationships enhanced rather than detracted from their own.
 - no data suggested that homosexual men are really seeking to be women.

- very few couples engaged in stereotypical "husband-wife" role playing.
- very few men were financially supported by their lovers.
- there was a very high correlation (98%) in the two partners' agreement about the importance of sex.
- men in heterosexually modeled relationships had fewer outside friendships; they viewed such friendships as threatening to their primary relationship.
- tension was dissipated and the relationship renewed by "ritualizing" certain activities (special meals, collecting things, and so on).
- partners have little trouble being passive in some areas of the relationship and assertive in others.
- 26% of the men report major sexual dysfunction at some point.
- men do not decide to couple on the basis of sexual attraction, but rather for other reasons, such as compatibility.

STRAIGHT ANSWERS FROM JUDD MARMOR

Continued from page 1

I think that many gay psychiatrists remain closeted because in spite of the APA decision in '74, the dominant trend in our society is still one that involves anti-gay prejudice, even within the psychiatric profession. Before gay psychiatrists can really come out en masse and treat it as a perfectly normal aspect of their personalities, I think we have to go a little farther in removing anti-gay prejudices in the whole structure of our society. But the fact that the APA came out in '74 and said that it does not necessarily mean mental illness to be gay--I think that opened the door for gay psychiatrists to come out of the closet, at least for more of them to come out.

Q: What do you think of the idea of preparing guidelines for gay people who independently seek psychotherapy?

A: I think that's a perfectly legitimate thing to attempt.

Q: What do you think of these quotes:

"If you cannot imagine two men making love without compromising their maleness, don't treat gay men," and "If you cannot imagine yourself making love with another male without compromising your maleness, don't treat gay men"?

A: I would certainly agree with the first

quote. I would question the second one because I think it is not necessary, for example, to be a woman in order to treat a woman. A critical factor for being a good psychotherapist is the capacity for empathy; and empathy implies the ability to feel with another human being without necessarily being in that person's place. I don't think it's necessary to have homosexual inclinations to treat a homosexual any more than it's necessary to have a primary feminine identification in order to treat a woman. There's a prejudice on the other side that I often hear expressed: that a gay psychiatrist cannot treat straight people, and that's not true. One doesn't have to be straight in order to deal with the problems of straight people. Likewise, one doesn't have to be gay in order to deal with the problems of gay people. It's quite possible that a gay psychiatrist may have a level of understanding of gay problems that no straight psychiatrist does, just as a woman may have a certain identification with the problems of women that no man can have. But I would hesitate to set up artificial barriers against people treating people in other groups, because then we get where no white person can treat a black person, no man can treat a woman, no Anglo, an Hispanic, etc.

"ANDROCENTRIC" BIAS IN THE EARLY SEX EDUCATION OF CHILDREN SEEN

Instructor in Psychiatry at Harvard Medical School, Dr. Nanette Gartrell, with the assistance of Diane Mosbacher, Ph.D., has concluded a study that "demonstrates a sex differential in the early sex education of children. Female and male respondents reported learning correct anatomical names for male genitalia earlier than they learned names for female genitalia. Most female respondents learned either a non-anatomical name or no name for their genitalia, whereas most males learned either a correct anatomical name or a non-anatomical name for their genitalia. Very few female respondents remembered learning a correct anatomical name for their genitalia. Despite the fact that the clitoris is capable of erotic response from birth onward, female respondents reported identifying this organ only in mid-adolescence or later. Furthermore, three female respondents learned at least one ana-

tomical name for female genitalia from the labeled diagrams on the questionnaire."

Gartrell concludes that "the androcentric era in human sexuality is coming to a close. Physiologists, embryologists, psychologists, and sociologists have now established the importance of female sexuality in its own right. Parents and sex educators should be encouraged to provide accurate and useful information about female and male sexuality to children of all ages. Children should be taught correct anatomical names for the genitalia of both sexes. Every human being deserves the right to 'know' her/himself, and 'knowing' oneself includes the ability to name and identify one's own genitalia."

Requests for reprints/information should be sent to Nanette Gartrell, M.D., Department of Psychiatry, Beth Israel Hospital, 330 Brookline Avenue, Boston, MA. 02115.

Psychiatry and Homosexuality: The Early Years

Continued from page 3

Hirschfeld and the Scientific Humanitarian Committee, writing in 1928, "I have always championed the view that Dr. Magnus Hirschfeld's lifelong struggle against the cruel and unjustified interference of legislation in human sexual life deserves universal recognition and support."

Indeed, Hirschfeld had a long and distinguished career, both as a clinician and as an educator and researcher in the field of sexual orientation, though today his conceptualization of homosexuals as a "third sex" or an "intermediate sexual type" seems quaint and dated. In 1919 he organized the Institute for Sexual Science in Berlin, the first institution of its kind anywhere in the world, and the Institute was a distinguished predecessor of the Kinsey Institute of Sex Research. Further, Hirschfeld was the key organizer of the first congress of the World League for Sexual Reform, which took place in Berlin in 1921. Further congresses were held throughout the 1920s in various European capitals, and some 130,000 people were affiliated with the organizations supporting the League. Thus Hirschfeld inspired a broad social movement with clear political objectives, and whose scientific and humanitarian spirit we continue to celebrate today.

The early homosexual rights movement was extinguished in the years preceding World War II, and following the Nazi assumption of power in Germany in 1933, the Insti-

tute was forced to close, its books, journals, documents, and medical records were publically burned, and Hirschfeld himself was driven into exile in France, where he died in 1935, his life's work in ruins. It would be another 30 years before the gay liberation movement would be reborn, this time in North America.

Meanwhile, the successors to Freud in the analytic movement increasingly came to view homosexual adjustments as pathological, and their powerful influence in mid-twentieth-century psychiatric thought needs no explanation for the readers of this article. But, as Judd Marmor noted in his address to the Gay Caucus in Atlanta in May 1978, it is ironic that today's professionals opposed to the depathologization of homosexuality in the nomenclature are precisely the followers of Freud. There is no doubt in my mind that if Freud were living today he would support the goals and the objectives of the GCMAPA with as much enthusiasm as he supported Hirschfeld and his organization.

CORRECTION:

The Sigmund Freud quotes in the Fall issue of the newsletter were first published together in THE BODY POLITIC ("The Gay Rights Freud" by Herb Spiers & Michael Lynch--TBC, May '77). Requests for reprints should be addressed to TBC, Box 7289, Station A, Toronto, Ontario, Canada M5W 1X9.