

# NARTH

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Therapy of Homosexuality

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## Female Homosexual Development

It is often claimed that sexual orientation is an innate and normal variation of sexuality and therefore immutable or unchangeable aspect of a person's core self or identity. But, there is no conclusive evidence that female homosexuality is innate or solely genetic or biologically based. (1, 2, 3) Most respected scientists agree that homosexuality is due to a combination of social, psychological, and biological factors.

Dr. Dennis McFadden, a University of Texas neuroscientist who has studied lesbianism, explains:

“Any human behavior is going to be the result of complex intermingling of genetics and environment. It would be astonishing if it were not true for homosexuality.” (4)

In a study exclusively focused on the causes of homosexuality in women, a popular researcher on the genetics of homosexuality, Dr. Michael Bailey, of Northwestern University, and his associates, admit that “although both male and female sexual orientation appear to be at least somewhat heritable, environment also must be of considerable importance in their origins.” (5)

In Bailey's most recent study on the genetic and environmental influences on sexual orientation, he again admits that while genetic factors are implicated, environmental factors are also important. (6)

After reviewing all major biological explanations and studies on homosexuality, Byne and Parsons proposed “an interactional model in which genes or hormones do not specify sexual orientation per se, but instead bias particular personality traits and thereby influence the manner in which an individual and his or her

environment interest as sexual orientation and other personality characteristics unfold developmentally.” (7)

### Why Are the Psychological Factors Not Acknowledged?

Dr. Rogers H. Wright in his book *Destructive Trends in Mental Health*, states:

“Gay groups within the APA have repeatedly tried to persuade the association to adopt ethical standards that prohibit therapists from offering psychotherapeutic services designed to ameliorate “gayness” on the basis that such efforts are unsuccessful and harmful to the consumer. Psychologists who do not agree with this premise are termed homophobic. Such efforts are especially troubling because they abrogate the patient's right to choose the therapist and determine therapeutic goals. They also deny the reality of data demonstrating that psychotherapy can be effective in changing sexual preferences in patients who have a desire to do so.” (8)

In fact, an investigation of the developmental factors correlated with homosexuality would constitute career suicide for most researchers. As Dr. Jeffrey Satinover explains:

“The research agenda is being distorted by the political requirement that no...associated traits should be discovered, and that homosexuality should be falsely presented as directly inherited.” (9)

There is, in fact, a wealth of older research identifying many common developmental, temperamental and family patterns connected to homosexuality. This research has never been scientifically refuted. (10, 11)

## Fluidity of Homosexual Attraction

In more recent studies the fluidity of homosexual attraction in women has been emphasized. Dr. Ellen Schechter of the Fielding Graduate Institute presented her research to the American Psychological Association. Her qualitative study included in depth interviews with 11 women who had been self-identified as lesbian for more than 10 years. All of these women were currently in heterosexual relationships, which had been ongoing for more than a year. (12)

These findings support the research of Dr. Lisa Diamond who concluded, "Sexual identity was far from fixed in women who aren't exclusively heterosexual." After following 80 non-heterosexual young women (lesbian, bisexual and unlabeled) over a two-year period, Dr. Diamond found that half of the women "reported multiple changes in sexual identity, and nearly one fourth of lesbians pursued sexual contact with men." (13)

Dr. Kenneth Zucker, in his careful analysis of the innate/immutable argument of homosexuality, rostered a plethora of studies to support his conclusion that "sexual orientation is more fluid than fixed." (14)

Dr. Kristine Falco, a gay affirmative therapist, in her book on *Psychotherapy with the Lesbian Client*, objects to the notion that sexual identity is either or proposition: lesbian or heterosexual. She believes sexual identity falls along a continuum, especially for women, and notes, "both identity and behavior can fluctuate over a woman's lifespan." (15)

The concept of sexual fluidity, defined as the spontaneous evolution or transformation of one's sexual preferences, is different from the concept of changeability involving intentional effort directed towards altering or changing one's sexual preferences. As mentioned, many researchers attest to the reality of female sexual fluidity. This does not directly translate into proof that any woman can easily change or alter her same sex attraction. It does however confirm that sexual feeling and behaviors are not absolutely immutable or unchangeable. The degree to which a woman can or will experience change will be uniquely determined based on her history and motivation to do so.

## Temperament

Therapist and teacher, Janelle Hallman, summarizes the most common traits she has seen in her work with women and same sex attraction. She describes above average intelligence, far reaching giftedness and creativity, curiosity and keen observance, deep sensitivity and capacity to feel, a strong sense of justice,

energetic, active and often athletic, and natural abilities and interests outside of stereotypical female interests (gender nonconformity) as the main qualities observed in these women. (16) Many of these traits can cause a girl to "feel different" from other girls, creating a gender insecurity or inferiority. In fact, "gender nonconformity in childhood may be the single most common observable factor associated with homosexuality," as well as "the retrospective sense of having been different from other children," says Dr. George Rekers, professor of neuropsychiatry at the University Of South Carolina School Of Medicine. (17)

Janelle Hallman states, it is the interaction of her unique innate characteristics and traits (nature) with her surrounding environment and relational experiences (nurture), resulting in a variety of perceptions, beliefs, responses and internalizations, that forms all that is human, including the possibility of same-sex attraction. In understanding female same sex attraction, it is therefore important to look at how a little girl perceives and processes the effects of her environment or experiences of relationship. That is why two children can grow up in the same family and yet describe their family and childhood experiences differently.

"Sexual orientation is assumed to be shaped and reshaped by a cascade of choices made in the context of changing circumstances in one's life and enormous social and cultural pressures." (18)

## Mothers and Fathers

**Relationship with Mother.** Typical in the history of women with same sex attraction are failures of attachment with the mother resulting in disidentification (rejection as role model). This can arise from:

- 1) A real maternal deficit or weakness arising out of mother's personal attachment history and developmental difficulties,
- 2) Actual maternal neglect, abuse, abandonment or trauma,
- 3) Accidental or uncontrollable separation, such as death, adoption, major illness, or mandatory absences due to the necessity of work,
- 4) A defensive detachment arising out of the daughter's perceptions, sensitivities and immature conclusion and/or beliefs with respect to mother, or
- 5) Difficulties during pregnancy, birth and after birth. (19)

A disruption in attachment means that many women with same sex attraction most likely lacked consistent moments of caring attunement. They may have missed

significant ongoing experiences of being the object of another's undivided, engaged, and regulating attention.

Dr. Elizabeth Moberly states, "to the very young child, the parent is his or her source of being, and so one's very being is felt to be endangered if the attachment to the parent is disrupted." (20) Moberly first proposed the model of "defensive detachment" from the same-sex parent as a cause of homosexuality, although the concept of defensive detachment itself was not new. Moberly states:

"...one constant underlying principle suggest itself from amidst a welter of details: that the homosexual-whether man or woman has suffered from some deficit in the relationship with the parent of the same-sex: and that there is a corresponding drive to make good this deficit-through the medium of same sex or "homosexual" relationships." (21)

She theorizes that this disruption interrupts the process of gender identification and role-modeling that typically occurs through that attachment. The child defensively withdraws from identification with this primary love source and sets up within herself what Moberly calls a "reparative love urge." (22)

Moberly presents the female "reparative drive" as an unconscious search for mothering. She also notes that defensive detachment can spontaneously resolve, and that no parent is necessarily culpable in disrupted attachment and that an event causing trauma in one child might not necessarily be so for another. (23)

**Relationship with Father.** Women dealing with same sex attraction more often than not report difficulty in their relationship with father and describe their father in negative terms, such as angry, weak, cold indifferent, remote, or sick. (24) Yet, in many cases, women claim that they were closest to their father, feeling like his best friend, or identified with and desired his power and freedom. This can result in a disowning of her femininity as she is treated like a son or one of guys.

**Marital Distress.** In their path analysis for lesbianism, Bell et al. found a "negative relationship between parents" as a possible contributing factor in why a girl might disengage from either parent and move toward homosexuality. (25) On going problems in the marriage can cause either parent to become dependent on the daughter to meet their emotional needs, forcing the daughter to lose respect for both parents.

### **Sexual Abuse**

Although sexual abuse does not directly cause same sex attraction, studies report male sexual abuse of lesbians as

generally being twice as high as of heterosexual women, that is, on average, 50 percent of lesbian women report a history of sexual abuse. (26, 27) If family relational dynamics and gender nonconformity are already in place, sexual abuse can clench the direction of detachment, gender insecurity, and disidentification possibly leading to same sex attraction. Sexual abuse can be emotional, verbal, or physical. A girl who is sexually objectified through inappropriate sexual comments, denied age appropriate privacy or whose father has voyeuristic tendencies, has been sexually violated without ever being touched. (28, 29)

### **Eroticization of an Emotional Need**

In work done at Wellesley College, the Stone Center, the importance of "self-in-relation" has been identified in women's development, individuation and maturing process. The development of empathy and mutuality are seen as foundational in women's experience of this "self-in-relation," and is believed to originate in the mother-daughter relationship. (30) Jean Baker Miller, a developmental theorist states, "women's sense of self becomes very much organized around being able to make and then maintain affiliation and relationships." (31)

Carol Gilligan, a developmental theorist and feminist writer, also validates the importance of the mother-daughter relationship. She describes a woman's development as, "individuating in the context of relationship," which is maintaining connection with family while striving toward the goal of developing her talents and abilities, as her individuation occurs. (32)

According to therapist Mary Beth Patton, a woman dealing with same sex attraction is longing for a connection with the feminine in herself that was denied in her own development because of an inadequate identification and attunement in relating to mother. This longing often transforms into emotional dependency with another woman and is generally the defining feature of female homosexuality. Rather than finding the feminine in herself, she looks to another female to give her the identification and connection she is missing. (33)

Psychoanalyst Dr. Elaine Siegel describes this experience of the little girl who later turns to homosexuality. She states:

The women dealt with this basic lack of attunement to their infantile needs with great adaptive strengths and an amazing variety of creative maneuvers that nonetheless express: Mother didn't teach me who I am. Therefore, another like myself must show me that I have a sexual self. But the mirroring they received from their female lovers was as distorted as

their primary maternal experience had been, locking them into the never-ending cycle of the repetition compulsion. (34)

### How Society Influences a Gay Identity

We live in a society where children are experimenting with adult sexual activities while their sexual identity is still solidifying. Finding the right sexual partner or experimenting with a variety of sexual situations is often presented as the key to happiness and the solution to everyday problems and dissatisfaction with life. This is true of many young women dealing with same sex attraction. This desire to find one answer and a quick gratifying solution to a deep, painful and complex situation is a diversion from the grief work and painful understanding that will lead to change and growth.

### Summary

Women who deal with same sex attraction, possess a history of disidentification with their mothers, and therefore with their femininity. This leads to a longing for connection with the feminine that becomes sexualized in adolescence or adulthood. Without a secure attachment to mother, she fails to identify with mother as a female role model losing the opportunity to develop trust and a healthy gender identity. Because of an empty or distorted view of her feminine self she has an inability to connect in a healthy way with other girls. Her sexual development is arrested.

This can create an underlying depression and anxiety within the little girl that may follow the remainder of her life. She does not have a sense of well-being and lives with restlessness within her as she searches for security and stability. She seeks validation for her dependency needs that were denied as a child and longs to be connected with a loving caretaker and ultimately with herself. Rather than finding the feminine within her, she looks to another woman to give her the identification and connection she is missing.

Like all other deep-seated identity issues, same sex attraction is difficult to overcome. Psychotherapy consists of understanding the emotional roots of the attraction, strengthening feminine identification, grieving the losses of childhood and learning to meet same sex needs for attention, affection and affirmation with emotional dependency and in a non-erotic manner.

### Endnotes

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