

The Nature of Homosexuality

Copyright 2006 © Vic Comello

Posted on hdbkpersonality.com July 30, 2006

I am personally indifferent as to whether intimate attachment relationships between two people involve men and men, women and women, or men and women. I am indifferent also as to whether sexual aspects of those relationships involve protuberances and protuberances, orifices and orifices, or protuberances and orifices, and indifferent, too, as to what the protuberances and orifices are anatomically in each case. Humanistically speaking, I do not consider these to be important questions. Furthermore, I can imagine many situations in which a homosexual relationship would be preferable to an attempt at a heterosexual one. So this is not going to be a diatribe against homosexuality.

Neither is this going to be an attempt to relate homosexuality to the existence and operation of pathogenic beliefs. Pathogenic beliefs are unconscious beliefs that inhibit a person from obtaining important life goals. Applying that definition to intimate sexual relationships of all types leads to the conclusion that all such relationships are influenced by pathogenic beliefs without exception. So there will be no attempt to claim that people are driven to homosexuality by pathogenic beliefs not shared by heterosexuals.

With that said, it must be admitted that public discussions and theatrical presentations on the subject of homosexuality are cluttered with nonsense, both when advocating or defending homosexuality and when opposing it. The purpose of this article is to address the nonsense from a psychoanalytic point of view in the hope that such a discussion will permit more rational debate on the issue in the future.

I am not an expert on homosexuality. I don't know of anyone who is. And I would distrust anyone who claimed to be. I'm a member of the San Francisco Psychotherapy Research Group (<http://controlmastery.org>), which makes me something of an expert on one form of psychoanalytic therapy and scientific inquiry, that informed by Control-Mastery theory, which was formulated by the late San Francisco psychotherapist Joseph Weiss. Joe Weiss never dealt with the subject of homosexuality per se, although he did write at some length about the psychoanalytic determinants of various so-called "deviant" forms of sexual expression. Before he died, he imparted his insight into the subject of sexuality to Michael Bader, whose own extensive research and theorizing led to publication of the book *Arousal*. This book also fails to deal with the subject of homosexuality per se. What is presented here, therefore, represents an extension of Control-Mastery theory into the area of sexual development.

Evidence for an Innate Cause

The first bit of nonsense I would like to address is the claim sometimes made that there is unequivocal scientific evidence linking homosexuality to one or more genes. All there actually is is suggestive evidence, which means that the scientific standing of the evidence may be overturned by future research. For example, on June 26, 2006, a story appeared on the MedlinePlus website, which is published by the National Institutes of Health, carrying the headline "Homosexuality Again Linked to Biological Factors." The story is based on a paper by Anthony F. Bogaert (Bogaert, A.F., 2006, *Proceedings of the*

National Academy of Sciences 103(28):10771–10774), which claims to confirm that the more older brothers a male has, the more likely he is to be gay. This is a follow-up study by Bogaert, who discovered the so-called “fraternal birth order effect” a decade ago. According to Bogaert, men with no older brothers have about a 2-3% chance of being gay. If they have three or four older brothers, however, the rate goes up to about 5%. Bogaert says that about 20 studies have reinforced the link between fraternal birth order and male homosexuality. No similar link has been found in lesbians.

The fundamental question to be answered is whether this effect is caused by environmental factors (e.g., years spent living with older brothers) or by prenatal factors. If there are prenatal factors, they are not likely genetic because the straight older brothers and the gay survey participants would usually get their genes from the same gene pool.

To decide the question, Bogaert examined surveys of 944 Canadian men, both gay and straight, about their sexuality and family histories. The effect of the number of biological brothers was found to be constant regardless of whether the men were raised with natural, adopted, or stepbrothers. That is, only the number of biological older brothers was significantly related to sexual orientation, whether or not they were reared with the participant. The result was independent of the number of nonbiological brothers reared with the participant. It also didn't matter if participants weren't raised with their biological mothers.

It must be admitted that this is a very strange effect, particularly since something like it is not seen in lesbians, which raises serious questions about Bogaert's sampling techniques and modes of analysis. Data from 905 men actually participated in the analysis (329 heterosexual, 151 bisexual, and 425 homosexual). Bogaert continually describes this sample as consisting of homosexual and heterosexual males, which suggests that the 151 “bisexual” males were included in the “homosexual” number. A possible problem with this is that a range of different “sexual orientation” responses got one labeled as bisexual, which opens the door to the possibility that the 151 “bisexuals” included people who saw themselves and lived their lives as basically heterosexual. Therefore, there is a possibility that Bogaert's data was skewed to include as “homosexual” individuals who were not.

The largest sample (521) was “a community sample of gay/bisexual and heterosexual men raised in nonbiological or blended families recruited from various regions of Canada (Toronto and the surrounding regions, Montreal, and Vancouver).” To recruit these individuals, advertisements were placed in a number of gay-oriented publications, and similar advertisements were placed in general publications to recruit heterosexual participants. It is of interest to know what these advertisements said, including what contact information was included, as it seems likely that Bogaert's earlier research would be known in the gay/bisexual communities targeted by the advertisements. Presumably Bogaert himself was not mentioned, but it could be enough to mention Brock University or St. Catharines, Ontario, to recruit a disproportionate number of participants whose family histories corresponded with Bogaert's alleged “fraternal birth order effect.”

Problems with Bogaert's "fraternal birth order effect" continue with regard to a possible explanation of what sort of prenatal influence could be responsible for it. Here is Bogaert's explanation:

"A theory of male homosexuality consistent with the present findings is a maternal immune response to succeeding male pregnancies. This explanation is partly based on the idea that a woman's immune system would appear to be capable of remembering the number of male fetuses she has previously carried and of progressively altering its response to the next fetus according to the current tally of preceding males. A mother's body may have a memory for male (but not female) fetuses because she herself is female, and thus the immune system may interpret and remember male (but not female) fetuses as foreign. If this immune theory is correct, then the link between the mother's immune reaction and the child's future sexual orientation would probably be some effect of maternal anti-male antibodies on the sexual differentiation of the brain."

There is no real evidence for this "theory," as Bogaert admits. It is simply something made up out of whole cloth apparently because nothing else is remotely credible. Interestingly if Bogaert's theory were correct, it would mean that a mother's immune response would become progressively more aggressive with each successive male birth, but this attack would not be aimed at killing the fetus. The attack would be waged, rather, on the maleness of the fetus, with the aim of the attack being to alter the maleness in the direction of femininity. In other words, the only way Bogaert can support the notion of homosexuality being a prenatal effect is by embracing the prejudiced view of homosexual males as being sissy boys made so by their mothers.

Science is a mode of inquiry that yields great precision. The price paid for that precision, however, is a lack of perspective, which must be gained through the agency of many studies that attack a problem from numerous viewpoints. The required body of evidence that would permit a definitive conclusion simply does not exist. Of course none of that prevents people from writing press releases, magazine articles, or books in which the hedged language of the scientists doing the research is replaced with definitive-seeming conclusions that the scientists had not reached nor would support.

Evidence against an Innate Cause

In a sense, the lack of definitive evidence for a homosexuality gene or other factor is irrelevant, because even if there were such evidence, I daresay that most who see themselves as being homosexual would be found to lack it.

The reason I say this relates to the instincts that guide the development of infants and young children, specifically those related to sexuality. By about three years old, a child sorts out its sex with respect to its parents. At that time, its modeling takes on a sexual flavor, in that the child focuses upon its parent of the same sex as its model of what it should become while simultaneously engaging in a competition with that parent for the love, affection, and attention of the parent of the opposite sex. It is this instinctive complex that normally directs the development of sexual attraction toward the opposite sex. If homosexuality were purely innate, one would expect to find a change in this

instinctive complex. That is, one would expect to find that this instinctive complex was homosexually directed long before an individual “came out” to declare a sexual preference for members of the same sex, yet no such case I am aware of has been reported.

Whenever a person has shown homosexual tendencies early on, it has turned out that normal heterosexual tendencies have been thwarted by problems in the relationship between the child and its parents. In no case that I have seen has homosexuality arisen when the child enjoyed a psychologically beneficial relationship with both of its parents that was not marred by inhibiting pathogenic beliefs. As Joe Weiss (http://controlmastery.org/docs/Weiss1998_2.pdf), Michael Bader (<http://michaelbader.com>), and others have shown, sexual expression is controlled by the need for psychological “safety.” This pursuit of safety is belief-driven and can result in a wide variety of sexual practices, including homosexuality and bisexuality. Only psychoanalytic naivety leads people to conclude that they must be gay on the basis of unexamined feelings.

Now, of course it is possible that genetic or other prenatal factors act more subtly than I have supposed, but were this true, it would not be evidence of an innate cause for homosexuality, since such a circumstance would tip the scales of causality even farther in the direction of homosexuality being primarily due to environmental factors.

Straight and homosexual intimate relationships are alike plagued by pathogenic beliefs, with the confluence of such beliefs determining whether the burdened relationship is homosexual or straight. The problem with homosexuals is that they become public about their psychological problems when they come out, whereas those in straight relationships can present a “normal” face to the world, while confining their abnormalities to the privacy of their intimate relationships. This difference provides straights with an opportunity for hypocrisy in denouncing homosexuals and in denying them rights and privileges they themselves enjoy.