Questioning the appropriateness of generating a theory from a single case (that of Schreber), concludes that "the data, examined from a clinical-statistical point of view, do not support the analytical theory. ... The frequency of homosexual elements does not appear to be high in paranoid syndromes compared with other forms of schizophrenia."

Reviews the relevant experimental research pertaining to homosexual actions, fantasies, and defenses, finding that males are more likely to fit the theory than females.


F. PSYCHOTHERAPY: GENERAL

The older model of psychotherapy with homosexuals was to replace the deviant orientation with a heterosexual one acceptable to society. The term "cure" encapsulates this attitude. In contrast, many therapists now stress that they accept a homosexual orientation as normal and healthy, and need not be changed. Their intervention is based on their claim to be able help the patient remove obstacles to happy adjustment within it. See also "Counseling and Social Services," XV.A.

Collection of short pieces by psychiatric dissidents gathered under the rubric "therapy means change not adjustment." Many reflect the viewpoint of the journal The Radical Therapist.

A crisis-oriented center must deal with challenges to
therapists' value systems and speedy identification of patients' priorities.

Existential therapy seeks to enable the homosexual to form loving, "normal" sexual attachments, and to correct his "distorted view of existence" by providing strong emotional experiences.

The existential approach recommended is prolesbian without minimizing the "contributing pathologies" afflicting many lesbians who seek help in leading happier and more productive lives.

3757. BERILLON, EDGAR. "Le traitement psychologique de l'homosexualité basé sur la rééducation sensorielle," Revue de l'hypnotisme, 23 (1908), 44-46.
An early psychotherapeutic technique based on the premise that "in the evocation of images capable of arousing his sexual appetite, the male is olfactory and gustatory, while the female, on the contrary, is in her sexual orientation visual and tactile."

Account of Gilhooly's three-year struggle with compulsory psychiatric incarceration, in which shock treatments and drugs were employed in an attempt to "cure" her lesbianism.

Discusses three treatments: antiandrogen or other hormonal agents; surgical castration; and stereotaxic neurosurgery. Extensive references. See also: Linda S. Gross, "Research Directions in the Evaluation and Treatment of Sex Offenders: An Analysis," ibid., 421-40; and R. M. Wettstein, below.

In responses of 675 lesbians, female therapists--heterosexual or lesbian--were assessed as more beneficial than male therapists. The sex-role ideology of therapists may be even more important.

3761. BROWN, LAURA S. "The Lesbian Feminist Therapist in Private Practice and Her Community," Psychotherapy
Suggests that the lesbian therapist's relationship to her community should be likened to living in a small town, where many overlapping relationships occur. See also Jo-

Claims that cure rates are on the increase and, for the majority of homosexuals, it is a matter of choice if they desire to be changed.

Challenging the illness or maladaptive presupposition, a new model is emerging to assist homosexuals to recognize, accept and value their sexual identity.

Discusses the applicability of concepts derived from family therapy to work with homosexual couples.

It is probable that the very existence of change-of-orien-
tation programs strengthens societal prejudices against homosexuality and contributes to the self-contempt and embarrassment that are determinants of the "voluntary" decision by some homosexuals to become heterosexual. See discussion by Seymour L. Halleck, ibid., 167-70; and Ellie T. Sturgis and Henry E. Adams, ibid., 46 (1978), 165-69.
Davison replied to the latter critique, ibid., 170-72.
Davison's paper was reprinted in JH, 2:3 (1977), 195-204, where it is followed by another discussion.

Points out that homosexual families are not being treated by family psychotherapy despite an obvious need, and seeks to uncover the reasons for the neglect.

The approach combines the use of stimulus-modeling video-
tapes with behavioral rehearsals, videotape feedback, and home assignments.
Holds that attempts to change homosexual's sexual orientation should not continue because social changes may be sufficient to reduce distress in these persons and because there is as yet no real "cure."

Advocates the use of the dream as a diagnostic, prognostic, therapeutic, and curative index.

Discusses the therapeutic potential of hypnosis with several types of homosexuals. See also R. G. Roden, "Threatening Homosexuality: A Case Treated by Hypnosis," Medical Hypnoanalysis, 4 (1983), 166-69.

"Some Mechanisms Involved in Homosexuality" (pp. 9-44) offers recommendations for psychotherapy: if the resolution of the emotional problem with the parent of the same sex is achieved, the homosexual inclination will subside.

Problems and therapeutic needs of women in the process of identifying themselves as lesbian--including denial rationales.

Homosexuality is not connected with any typical psychiatric disorder, and final acceptance is the goal of therapy.

Constructionist theory, while it holds promise, has not taken into account clinical evidence that clients may adhere to "essentialist" beliefs.

Dispensing with sophisticated psychotherapeutic theories, Hatterer retreats to an old-fashioned reliance on will power and moral conformity. Unlike other clinicians who have made similar claims, he gives a clear, often disquieting picture of what occurs in his therapy sessions.

Emphasizes the value of a psychoanalytic model in helping people to attain their desired sexual identities.

Six papers addressing the question of how the therapeutic process can aid in resolving the problems that result from negative attitudes about gay and lesbian people.

Treats psychoanalysis, hypnosis, brain surgery, aversive conditioning, covert sensitization, and combined treatments--generally from the standpoint of changing orientation. See the reply by Eugene May, ibid., 14 (1977), 18-20.

In this account by its founder of one of the leading pop psychiatric fashions of the 1970s, see pp. 83-97. See also his The Primal Scream: Primal Therapy--The Case for Neurosis (New York: Putnam's Sons, 1970), pp. 281-321; and [anon.], "Can Primal Therapy Cure Homosexuality?" Journal of Primal Therapy, 3 (1976), 226-29.

Describes a collaborative treatment approach for lesbian couples who are experiencing problems within their relationships--especially those too closely merged.
Advocates his own "Syntonic Therapy," an eclectic mixture of Reich, Perls, and Reik.

Group therapy and image therapy have been found useful in overcoming such difficulties as the egocentric, egosyntonic, and erotically gratifying nature of pedophilia to the patient, his unwillingness to give up his behavior, his tendency to rationalize his acts, and to see the child as consenting. Many references.

3784. LEGO, SUZANNE M. "Beginning Resolution of the Oedipal Conflict in a Lesbian about to Become a 'Parent' to a Son," Perspectives in Psychiatric Care, 19 (1981), 107-11.
The article presents a series of dreams of a lesbian patient, who was contemplating having a child by artificial insemination.

Contends that direct modification of fantasies will provide an effective treatment method, reporting on results with homosexuals, fetishists, rapists, and pedophiles.

Homophobic attitudes are the major problem. The therapist may inadvertently reinforce the patient's homophobia or inquiry into the causes of the patient's homosexuality or into his/her failure to function heterosexual.

Focuses on professional and ethical issues, adopting an intermediate position on the question of homosexual functioning.

Finds two schools: One focuses upon the replacement of homosexual behavior with heterosexual behavior; the other has as its goal the elimination of anxiety and discomfort in the homosexual, but not of his homosexual behavior per se.

Holds that the directive-suggestive approach that has dominated the treatment of homosexuality rests on unproven presuppositions, a conceptual unclarity concerning the nature of activity and passivity, and an overvaluing of behavioral alterations at the expense of internal constructive factors.


On the dynamics of lesbian social dyads where there is intense fusion and the devices that may be used to achieve distancing.


Claims that "imagery therapy" not only reduced unwanted homosexual fantasies but other symptoms as well.


Examines various theoretical frameworks—developmental, experiential, and feminist—and their impact on lesbians.


The traditional mandatory attempt to eradicate homosexual behavior has been expanded into three options: (a) modification of homosexual in favor of heterosexual behavior; (b) enhancement of homosexual behavior; and (c) ignoring homosexual behavior if it is functionally unrelated to the presenting symptoms.


Traces three aspects of women's socialization—self-concept, feminine sex-role behavior, and sexuality—that have particular relevance for lesbians.


Examines the issue of whether to treat or not treat adolescents with sexual identity problems.

3796. ROTHBERG, BARBARA, and VIVIAN UEBELL. "The Co-existence of System: Theory and Feminism in Working
As feminists enter the field of couple and family therapy, they are faced with the issue of how to integrate feminism and family systems therapy. Offers some suggestions for achieving this.

3797. SHERNOFF, MICHAEL J. "Family Therapy for Lesbian and Gay Clients," Social Work, 29 (1984), 393–96. Discusses self-disclosure to other family members such as parents or children, including possible legal complications. Also describes the use of "family sculpting" to clarify perceptions. See also Scott Wirth, "Coming Out Close to Home: Principles for Psychotherapy with Families of Lesbians and Gay Men," Catalyst: A Socialist Journal of the Social Services, 1 (1979), 6–23.


Collection of papers concerned with contemporary male roles and their relationship to the practice of psychotherapy. Topics discussed include: male inexpressiveness; the older man; men's groups; and the effect of changing sex roles on male homosexuals.

In Dianetics [i.e. Scientology], homosexuality is thought to endanger "potential survival through the family unit." The hope of cure is offered through dianetic processing.

Therapy is to be directed primarily at reducing depression and feelings of isolation. (Nonetheless, the writer makes an implicit comparison with tuberculosis.)

Advocates control of paraphilias (including fetishism, transvestism, pedophilia, s & m) through hormonal alteration of sexual arousal with antiandrogens. See also J. M. W. Bardford, above.
3803. WILLS, SUE. "The Psychologist and the Lesbian.,"
Refractory Girl, 9 (1975), 41-45.
While most lesbians have never sought treatment from a
psychiatrist, most have suffered because of them through
the ripple effect of the sickness theory.

G. DSM CONTROVERSY

A prolonged controversy, described in the entries below,
led the American Psychiatric Association to abandon its
earlier definitions of homosexuality as an illness, while
retaining the curious diagnostic category of "ego-dystonic
homosexuality." Apart from the outcome, the history of
the dispute is revealing for its indication of the major,
in some instances perhaps decisive role that political
considerations may play in the resolution of what the lay
public regards as purely scientific issues.

3804. AMERICAN PSYCHIATRIC ASSOCIATION [APA]. Diagnostic
and Statistical Manual of Mental Disorders [DSM].
This version of the APA's standard manual, like the first
edition of 1952, incorporated the classification of homo-
sexuality as a mental disorder (p. 44). After intense
discussion and prodding by gay activists, on December 15,
1973, the APA Board of Trustees voted to remove homo-
sexuality per se from the manual, substituting "sexual ori-
entation disturbance" for those individuals "who are
bothered by, in conflict with, or wish to change their
sexual orientation." When the third edition, often re-
ferred to as "DSM-III," appeared (Washington, DC: APA,
1980; 494 pp.), it was found to include controversial new
material defining "Ego-Dystonic Homosexuality" [302.00],
p. 281-83. Hence the continuing debate among those who
(1) insist that homosexuality is still "sick" and the
definition of DSM-II should not have been changed; (2)
defenders of the DSM-III compromise; and (3) those who
feel that further liberalization should take place,
striking both "ego-dystonic homosexuality" and the para-
philias from the DSM.

3805. BAYER, RONALD. Homosexuality and American Psychi-
atry: The Politics of Diagnosis. New York: Basic
This excellent book is noteworthy not only for its clear
and balanced reconstruction of the discussions that lay
behind the APA's 1973 decision, but also for its presenta-
tion of the larger issue of psychiatry's saturation with
moral and political concerns. See also: Bayer and Robert
L. Spitzer, "Edited Correspondence on the Status of Homo-
sexuality in DSM-III," Journal of the History of the Be-

The APA classification has spurred much dialogue, which may eventually lead to a clearer understanding of homosexuality.

Reviews changes in the DSM during the past quarter century reflecting alterations in views about the relationship between sexual orientation and psychopathology.

Disapproves of the APA's efforts to eliminate the definition of homosexuality as a disease.

Offers two hypotheses to account for the APA's change in DSM-III: (1) homosexuality is now viable as a lifestyle and therefore has become socially regulated; and (2) the normal is the intractible. Further argues that there is no reason to keep the paraphilias in DSM. See also his: "Even Psychiatry Can Profit from Its Past Mistakes," JH, 2 (1976-77), 153-57.


Argues that the "normalizing" of homosexuality and the consequent revision of DSM reflecting this position will slow scientific progress, produce despair in those with a sexual deviation, and diminish efforts at prophylaxis.

Describes the controversy surrounding the creation of the DSM-III category of Ego-Dystonic Homosexuality, arguing that the major issue involves a value judgment about heterosexuality rather than a factual dispute about...