

THE SENSUOUS HIPPIE PART II: GAY/STRAIGHT DIFFERENCES IN REGARD TO DRUGS AND SEXUALITY

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ABSTRACT

This paper derives from an extensive questionnaire study of the sexual practices and drug use of a sample of clients of the Haight-Ashbury Free Medical Clinics in San Francisco, California. A separate paper described how the "junkie" and "nonjunkie" portions of this sample differed [1]; the present paper attempts a similar analysis of the "straight" and "gay" subsamples.

Heterosexual/Homosexual Patterns of Drug/Alcohol Use

An exhaustive survey of the literature unearthed very few studies dealing with heterosexual/homosexual patterns of drug or alcohol use. There were a few case studies of a nonrepresentative sort, and also a few studies which tested with generally negative results — the psychoanalytic notion that alcoholism is linked to repressed homosexuality. Cain in a study of forty alcoholics of varying ages, sexes, social classes, and ethnic backgrounds, concluded that "homosexuality occurs no more frequently among alcoholics than among nonalcoholics [2]." On the other hand, Greenberg (1973) found that the incidence of illicit drug use, mostly marijuana, was higher among his sample of eighty-six homosexual men than among a control group [3]. Greenberg's sample, generally a youthful, college-educated group, was obtained through homophile organizations — which may have given him a "drug-liberal" biased selection of the gay population. Saghir's sample of eighty-nine gay men was also drawn from homophile organizations, but was carefully matched with a sample of thirty-five *unmarried* straight men similar in distribution by age, race, and occupation [4].

He found that the incidence of excessive drinking among the gays was somewhat higher than among the straights, but that actual alcohol dependence was similarly low for both groups. However, a significantly higher proportion of the gays than of the straights admitted to the use of nonprescription drugs, mostly marijuana but also amphetamines, psychedelics, barbiturates, and amyl nitrite. The study of Bluestone et al of thirty-one adolescent homosexuals in a New York City prison concluded that imprisoned homosexuals have higher educational levels, better work histories, and less drug addiction than do other prisoners [5]. Finally, Springer's study of drug-dependent adolescents discerned no increase in homoerotic activity as a result of nonprescription drug use [6]: these drugs seemed actually to decrease sexual appetite and to redirect latent homoeroticism into the desexualized shared ecstatic union of the drug "high." It is clear that no conclusive answers are available to the question of whether or not a gay population uses drugs or alcohol more than a demographically similar straight population.

The present study's sample was obtained by approaching every third client on random days of operation of the Clinics' Medical Section, and on random days of operation of the Clinics' Drug Detoxification Section, during the Spring of 1974. A two-dollar incentive was provided, to minimize the refusal rate on what was after all a fairly extensive (137 item) questionnaire. By this means, some ninety-five completed forms were obtained. One item asked the client to characterize his present "choice of sexual partners" as "heterosexual," "bisexual," or "homosexual"; those making one of the latter two responses were classified, for the purposes of this study, as "gay."

The "gay" group consisted of nineteen males and eleven females. A similar sex ratio obtained in the "straight" group, with forty males and twenty-five females. The two groups were very similar in terms of age, the median for both being just over twenty-five years. Both groups were likewise similar in racial composition, with about three respondents in four being Caucasian. The gays, however, were rather better off in terms of occupation: a significantly higher proportion were employed, and of those employed, the gays had a higher proportion holding down middle-class jobs. (See Table 1.) This difference was noted for both sexes. In regard to years of education, though, only among females was a difference in favor of gays noted. Both the gay males and straight males had about a three-fifths proportion who had had at least some college.

Findings

Nothing much was found that would shed light on the etiology of a gay or a straight sexual style among the present sample. The gay males and straight males described the same median age of learning about masturbation, intercourse, pregnancy, menstruation, orgasm, and homosexuality; the gay and straight females were likewise similar in their age of learning about these issues.

Table 1. Occupation v. Sex-Orientation Group

	<i>Straight Males</i>	<i>Gay Males</i>	<i>Straight Females</i>	<i>Gay Females</i>
White-Collar	10	9	4	5
Blue-Collar	16	5	2	1
Unemployed	16	3	18	5

Our inquiries about the experience of various sexual activities turned up some interesting differences. Among males, there were of course certain activities that one group or the other favored because of their sexual orientation — but aside from these, the gay men were found to be more enthusiastic about (i.e., wished to experience for the first time, or wished to continue past experiences) masturbation, group nudity, group sex, and the use of dildos or other mechanical devices. The straight men were more enthusiastic about attending erotic films, spanking their partner, having sex with a prostitute, and accepting money for engaging in sex. The relative preferences among gay females were for group nudity, group sex, sex with an animal, having sex with a prostitute, committing adultery, transvestism, anal intercourse, spanking, being spanked, cunnilingus, and masturbation. In no respect — even those relating to heterosexual activity — were the straight women more “into” sexuality than their gay counterparts.

The inquiry into current sexual activity showed some remarkable trends. Naturally the gay group had had much more homosexual activity. But both the gay males and females matched their straight counterparts in the extent of heterosexual activity — which means our “gay” groups might better be termed “bisexual” groups. The gay men actually reported a lesser incidence of premature ejaculation during heterosexual intercourse than did the straight men, but the latter group claimed to have enjoyed recent heterosexual activity more. The gay men and particularly the gay women were more into masturbation than the straight men or women: they had started it earlier, enjoyed it more, and had engaged in it more during the past year.

It was fascinating to note that nearly three-quarters of the straight men reported having “accidentally hurt their lover,” while only one-half of the gay men reported thus. A slightly higher rating of “your own body’s sensitivity as compared to others” was given by the gays, but the gay men also slightly exceeded the straight men in their preference for touching their partner rather than being touched.

The gay men’s attitudes toward masturbation and (of course) toward homosexuality were significantly more favorable than the straight men’s. The gay women exceeded the straight women in their favorability toward masturbation, “discipline”-type sex, women’s sexual liberation, and homosexuality.

Thus the gays — and especially the gay women — showed a rather more libertarian attitude toward sexual activity in general.

A slightly higher proportion of the straight men than of the gay men reported having a steady sexual partner at present. However, those gay men who were involved with a steady partner reported a somewhat higher level of satisfaction with their situation. No such differences were noted among the women. Among both sexes, the gays reported somewhat greater satisfaction with their current sex lives in general (see Table 2). The gays of both sexes also appeared to be rather more active sexually, of late (see Table 3).

The group was asked, "How do you feel your knowledge of sex compares with that of your friends?" It was intriguing to note that the gay men significantly exceeded the straight men in claiming "more knowledge than others," while the reverse relationship was found among the gay and straight women.

LIFETIME USE OF DRUGS

The group was asked about their lifetime use of various drugs, their use of drugs during the last two months, and their use of drugs "to make sex better." In terms of claimed lifetime experience, the straight men spoke of more contact than the gay men with psychedelics, amphetamines, cocaine, heroin, and tobacco

Table 2. Enjoyment of Recent Sex v. Sex-Orientation Group

	<i>Straight Males</i>	<i>Gay Males</i>	<i>Straight Females</i>	<i>Gay Females</i>
"Pleasant"	27	12	19	8
"Neither Pleasant nor Unpleasant"	5	3	1	0
"Unpleasant" or "None"	5	0	1	0

Table 3. Frequency of Sexual Intercourse During
Past Six Months v. Sex-Orientation Group

	<i>Straight Males</i>	<i>Gay Males</i>	<i>Straight Females</i>	<i>Gay Females</i>
Twice a week or oftener	22	10	17	8
Three to five times/month	6	4	4	1
Twice or less per month	11	4	4	1

The gay men exceeded the straights only in regard to amyl nitrite ("Poppers" act as short-term smooth-muscle dilators, and hence permit a rush of oxygen-rich blood to the brain through dilated blood vessels. The psychic "peak" thus obtained has an active, directed quality that is perhaps more consonant with the male than the female orgasm. This differential-quality might in turn account for the observation [1] that gay men were the first to use amyl nitrite widely.) As for recent drug experience, psychedelics, barbiturates, and quaaludes were evidently more in current favor among the gay men, while only tobacco had a greater extent of claimed use among the straight men. The two types of men had a very similar pattern of use of drugs "to make sex better," although the gay men seemed to favor alcohol somewhat more. Among the women, all the differences were in favor of the gays. For nearly every drug, the gay women spoke of a more extensive lifetime use than did the straight women, and their recent use of marijuana, cocaine, alcohol, tobacco, amyl nitrite, and quaaludes was also higher than the straight women's. The gay women apparently were also more prone than the straight women to use psychedelics, cocaine, and amphetamines to enhance their sexual experience, and were more likely to say that their sex lives were better since they started using drugs. The query, "If you could do any drug of your choice or have sex with anyone of your choice, which would you do?" was answered overwhelmingly in favor of sex by the gay men and largely in favor of sex by the straight men and the straight women — but fully half of the gay women opted in favor of drugs, particularly cocaine (see Table 4). Nevertheless, all four groups were about fifty-fifty as regards enjoying sex "more while you are straight" or "more while you are high." And only the straight males claimed to any extent that "drugs increased your attraction to possible sexual partners."

About two-thirds of the gay males claimed that sexual contacts were "quite seldom" related to drug-using situations. This proportion dropped to one-third for the straight males and straight females, and to nearly zero for the gay females. (See Table 5.) A similar trend was noted in reply to the question, "In the evolution of your sexual behavior, have you found drugs helpful when trying something new?" (See Table 6.) The role drugs play in the sexuality of this particular group, therefore, seems to have a peculiar correlation: the more females

Table 4. Choice of "Sex With Anyone of Your Choice" or "Drug of Your Choice" v. Sex-Orientation Group

	<i>Straight Males</i>	<i>Gay Males</i>	<i>Straight Females</i>	<i>Gay Females</i>
Drug	8	1	6	5
Sex	31	15	13	5

Table 5. "How Often Are Sexual Contacts Related to Drug-Using Situations" v. Sex-Orientation Group

	<i>Straight Males</i>	<i>Gay Males</i>	<i>Straight Females</i>	<i>Gay Females</i>
"90% or more of the time"	12	2	2	3
"About 2/3 of the time"	4	1	7	4
"About 1/3 of the time"	10	3	6	2
"Quite seldom"	14	11	8	1

Table 6. "In the Evolution of Your Sexual Behavior, Have You Found Drugs Helpful When Trying Something New?" v. Sex-Orientation Group

	<i>Straight Males</i>	<i>Gay Males</i>	<i>Straight Females</i>	<i>Gay Females</i>
Yes	17	5	7	7
No	21	12	16	4

(from zero to two) involved in a pairing, the greater the likelihood that drugs will be involved!

It was fascinating to find that the majority of the gay females and one-third of the straight females reported having been raped. And fully six of the gay males – plus two of the straight males – claim themselves to have been raped. By contrast, the incidence of rape *reported to the police* in San Francisco is about 500/year, or only about one rape for every 160 females between fifteen and thirty.

These findings emphasize the notion that gay males must be discussed separately from gay females – at least, the gay males of this sample strike one as having active but separate enjoyment of both drugs and sex, while the gay females tended to combine the two types of enjoyment. Both gay groups seem active sexually (including heterosexually), seem happy with their sex lives, and are widely experienced and open to more experience. The early 1970's were a time of great improvement in the social consciousness of gays; perhaps this accounts for these observations among the gays of our sample. Or perhaps the age-group and city of residence of this group explains some of the above-noted findings.

The straight males appear to be somewhat less evolved in their attitudes and practices than do the other three groups. However, this group appears to be

from a somewhat lower social-class background than the other groups, and this may account for most of the differences.

In general, conclusive answers regarding gay *v.* straight drug use must await studies which carefully control for all the major demographic variables: marital status, age, occupational status, education, size of city of residence, and ethnicity. Such studies should also separate the predominantly homosexual subgroup from the bisexual subgroup, and should also begin to examine differences in the style of use of certain drugs (amyl nitrite, alcohol, barbiturates) in gay and straight social milieux. Finally, it is probably best to select the sample from the population at large and then determine their sexual orientation, rather than to attempt to select separate gay and straight samples.

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SEX DIFFERENCE AND MALE HOMOSEXUALITY IN FRENCH MEDICAL DISCOURSE, 1830–1930*

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 Near the end of the nineteenth century, psychiatrists first began systematically to identify and describe a spectrum of sexual disorders they called “perversions.” Around 1900, however, Frenchmen who imagined themselves the guardians of the public welfare believed themselves justified in singling out the perversion of male homosexuality as a particularly grave danger to the nation. In the words of the politician Ernest Charles, “If there is one vice or sickness especially repugnant to French mentality, to French morality, to French health, it is—to call things by their name—pederasty.”¹ A public pronouncement of this kind would have been literally unthinkable only a few decades earlier, but, despite the fact that private homosexual activity was not illegal under the French penal code, a widespread consensus had emerged which held male homosexual behavior to be, at the very least, a symptom of profound individual pathology, and, at worst, a sign of imminent national collapse.

In this paper I hope to reconstruct the reasons male homosexuality reached this high level of public visibility by 1910, concentrating in particular on the role that medical language played in shaping its image. The layman Ernest Charles may have hesitated about whether to call “pederasty” a “vice” or a “sickness,” but in characterizing it a threat to the “health” of the fatherland, he demonstrated a dependence on a medical discourse on sexual perversions shared by many of his contemporaries. This discourse was of relatively recent historical vintage. It linked together effeminacy and reproductive sterility in male homosexuals, and masculinity and sterility in lesbians—invoking a kind of elementary *inversion* of the “normal” qualities of each sex. I wish to focus here on the reasons such a linkage was made for males; but, as we shall later see, in the binary classificatory system that regulated sexual identity in that era, changes admitted on one side of the sex/gender spectrum entailed proportional changes on the “opposite” side.²

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¹Ernest Charles, *La Grande Revue*, 25 July 1910.

²For a discussion of some of the implications of historical studies of sex/gender systems, see Joan W. Scott, “Gender: a useful category of historical analysis,” *Amer. Hist. Rev.*, 1986, 91: 1053–75.