DOES RESEARCH INTO HOMOSEXUALITY MATTER?

(1965)

Franklin Kameny

PART I

On Some Aspects of Militancy in the Homophile Movement

As little as two years ago, "militancy" was something of a dirty word in the homophile movement. Long inculcation in attitudes of cringing meekness had taken its toll among homosexuals, combined with a feeling, still widely prevalent, that reasonable, logical, gentlemanly and ladylike persuasion and presentation of reasonable, logical argument, could not fail to win over those who would deny us our equality and our right to be homosexual and to live as homosexuals without disadvantage. There was-and is-a feeling that given any fair chance to undertake dialogue with such opponents, we would be able to impress them with the basic rightness of our position and bring them into agreement with it.

Unfortunately, by this approach alone we will not prevail, because most people operate not rationally but emotionally on questions of sex in general, and homosexuality in particular, just as they do on racial questions.

It is thus necessary for us to adopt a strongly positive approach, a militant one. It is for us to take the initiative, the offensive-not the defensive-in matters affecting us. It is time that we began to move from endless talk (directed, in the last analysis, by us to ourselves) to firm, vigorous action.

We ARE right; those who oppose us are both factually and morally wrong. We are the true authorities on homosexuality, whether we are accepted as such or not. We must DEMAND our rights, boldly, not beg cringingly for mere privileges, and not be satisfied with crumbs tossed to us. I have been deeply gratified to note in the past year a growing spirit of militancy on the part of an increasing number of members of the homophile organizations.

We would be foolish not to recognize what the Negro rights movement has shown us is sadly so: that mere persuasion, information and education are not going to gain for us in actual practice the rights and equality which are ours in principle.

I have been pleased to see a trend away from weak, wishy-washy compromise positions in our movement, toward ones of strong affirmation of what it is that we believe and want, followed by a drive to take whatever action is needed to obtain our rights. I do not of course favor uncontrolled, unplanned, ill-considered lashing out. Due and careful consideration must always be given to tact and tactics. Within the bounds dictated by such considerations, however, we must be prepared to take firm, positive, definite action-action initiated by us, not merely responding to the initiatives of others. The homophile movement increasingly is adopting this philosophy.

PART II

On the Homophile Movement and Homosexuality as a Disease

Among the topics to which we are led by the preceding, is that of our approach to the question of homosexuality as a sickness. This is one of the most important issues-probably THE most important single issue—facing our movement today.

It is a question upon which, by rationalization after rationalization, members of the homophile movement have backed away from taking a position. It is a question upon which a clear, definite, unambiguous, no-nonsense stand MUST be taken, must be taken prompt-

ly, and must be taken by US, publicly.

There are some who say that WE will not be accepted as authorities, regardless of what we say, or how we say it, or what evidence we present, and that therefore we must take no positions on these matters but must wait for the accepted authorities to come around to our position—if they do. This makes of us a mere passive battlefield across which conflicting "authorities" fight their intellectual battles. I, for one, am not prepared to play a passive role in such controversy, letting others dispose of me as they see fit. I intend to play an active role in the determination of my own fate.

As a scientist by training and by profession, I feel fully and formally competent to judge good and poor scientific work when I see them—and fully qualified to express my conclusions.

In looking over the literature alleging homosexuality as a sickness, one sees, first, abysmally poor sampling technique, leading to clearly biased, atypical samplings, which are then taken as representative of the entire homosexual community. Obviously all persons coming to a psychiatrist's office are going to have problems of one sort or another, are going to be disturbed or maladjusted or pathological, in some sense, or they wouldn't be there. To characterize ALL homosexuals as sick, on the basis of such a sampling—as Bieber, Bergler, and others have done—is clearly invalid, and is bad science.

Dr. Daniel Cappon, in his recent appalling book *Toward an Understanding of Homosexuality* (perhaps better named "Away from an Understanding of Homosexuality" or "Toward a Misunderstanding of Homosexuality") acknowledges at least this non-representative sampling and actually shows some faint signs of suggesting that perhaps there are two classes of homosexuals: patients and non-patients.

Notwithstanding Dr. Bieber's cavalier dismissal of it, Dr. Evelyn Hooker's work involving non-clinical homosexual subjects, with its very careful sampling technique and its conclusions of non-sickness, still remains convincing.

One sees secondly, in the literature alleging homosexuality as sickness, a violation of basic laws of logic by the drawing of "conclusions" which were inserted as assumptions. Dr. Bieber does this (and by implication, attributes it to his entire profession) in his statement: "All psychoanalytic theories ASSUME that homosexuality is psychopathological." Dr. Cappon says: "... homosexuality, BY DEFINITION, is not healthy...." (Emphasis supplied in both quotations.) Obviously, if one assumes homosexuality as pathological or defines it as unhealthy at the outset, one will discover that homosexuals are sick. The "conclusions," however, can carry no weight outside the self-contained, rather useless logical structure erected upon the assumption or definition. The assumptions must be proven; the definitions must be validated. They have not been.

I am able to speak as a professional scientist when I say that we search in vain for any evidence, acceptable under proper scientific standards, that homosexuality is a sickness or disorder, or that homosexuals per se are disturbed.

On the basis of a disguised moralistic judgement (sometimes not at all disguised, as with Dr. Cappon), mixed both with a teleological approach to sexual matters, and with a classification as sickness of any departure from conformity to the statistical societal norms (on this basis, Dr. Cappon seems to come close to defining left-handedness as sickness), homosexuality has been DEFINED as pathological. We have been defined into sickness.

In logic, the entire burden of proof in this matter rests with those who would call us sick. We do not have to prove health. They have not shouldered their burden or proof of

sickness; therefore we are not sick. These are things which it is our duty to point out, and, having pointed them out, to take strong public positions on them.

Then there are those who say that the label appended really doesn't matter. Let the homosexual be defined as sick, they say, but just get it granted that even if sick, he can function effectively and should therefore be judged only on his individual record and qualifications, and it is that state of being-judged-as-an-individual, regardless of labels, toward which we must work. This unfortunately is a woefully impractical, unrealistic, ivory-tower approach. Homosexuality is looked upon as a psychological question. If it is sickness or disease or illness, it becomes then a mental illness. Properly or improperly, people ARE prejudiced against the mentally ill. Rightly or wrongly, employers will NOT hire them. Morally or immorally, the mentally ill are NOT judged as individuals, but are made pariahs. If we allow the label of sickness to stand, we will then have *two* battles to fight—that to combat prejudice against homosexuals per se, and that to combat prejudice against the mentally ill—and we will be pariahs and outcasts twice over. One such battle is quite enough—

Finally, as a matter of adopting a unified, coherent, self-consistent philosophy, we MUST argue from a positive position of health. We cannot declare our equality and ask for acceptance and for judgement as whole persons, from a position of sickness. More than that, we argue for our RIGHT to be homosexuals, to remain homosexuals, and to live as homosexuals. In my view and by my moral standards, such an argument is immoral if we are not prepared, at the same time, to take a positive position that homosexuality is not pathological. If homosexuality indeed IS a sickness, then we have no right to remain homosexuals; we have the moral obligation to seek cure, and that only.

When we tell the various arms of organized society that part of our basic position is the request for acceptance as homosexuals, freed from constant pressure for conversion to heterosexuality, we are met with the argument of sickness. This occurred recently at a meeting between Washington Mattachine members and eleven representatives of all three major faiths, at which we asked for such acceptance of the homosexual into the religious community. Our entire position, our entire raison d'etre for such meetings, falls to the ground unless we are prepared to couple our requests with an affirmative, definitive assertion of health—as we in Washington did in that instance.

I feel, therefore, that in the light of fact and logic, the question of sickness is a settled one and will remain so until and unless valid evidence can be brought forth to demonstrate pathology. Further, I feel that for purposes of strategy, we must say this and say it clearly and with no possible room for equivocation or ambiguity.

PART III On Research and the Homophile Movement

Movements tend to get themselves tied up with certain ideas and concepts, which in time assume the status of revealed and revered truth and cease being subjected to continuing, searching re-examination in the light of changed conditions. As an habitual skeptic, heretic, and iconoclast, I wish here to examine critically if briefly the value and importance to the homophile movement of research into homosexuality, of our commitment to it, and of the role, if any, which such research should play in the movement and in the activities of the homophile organizations.

I recognize that, with the deference granted to science in our culture, it is very respectable and self-reassuring and impressive to call one's group a research organization or to say that the group's purpose is research. However, at the outset one fact should be faced directly. For all their pledges of allegiance to the value of research, for all their designation

of themselves as research organizations, for all their much-vaunted support and sponsorship of research, NO American homophile organization that I know of has thus far done any effective or meaningful research, has sponsored any research, has supported or participated in any truly significant research. (With the single exception of Dr. Evelyn Hooker's study, and while I grant that to be a major and important exception, the participation involved nothing more than supplying candidates for experimentation.) The homophile movement's loss from its failure to contribute to research has been not from that failure, but from the diversion into talking ("maundering" might be a better term) about research—diversion of effort, time, and energy better expended elsewhere.

For purposes of this discussion, we can divide the objectives of relevant research into two loosely delineated classes: research into the origins and causes of homosexuality, and research into collateral aspects of the homosexual and his life and his community.

Almost always, when the homosexual speaks of research on homosexuality, he means the former class in one aspect or another: "What is the nature of homosexuality?" "What are its causes?" "Why am I a homosexual?" "Is homosexuality a sickness?" "Can the homosexual be changed?" Objectionably, "How can homosexuality be prevented?" etc.

A consideration of the rationale behind the homosexual's interest in such questions will quickly show that they are symptomatic of a thinly-veiled defensive feeling of inferiority, of uncertainty, of inequality, of insecurity—and most important, of lack of comfortable self-acceptance.

I have never heard of a single instance of a heterosexual, whatever problems he may have been facing, inquiring about the nature and origins of heterosexuality, or asking why he was a heterosexual, or considering these matters important, I fail to see why we should make similar inquiry in regard to homosexuality or consider the answers to these questions as being of any great moment to us. The Negro is not engrossed in questions about the origins of his skin color, nor the Jew in questions of the possibility of his conversion to Christianity.

Such questions are of academic, intellectual, scientific interest, but they nor NOT—or ought not to be—burning ones for the homophile movement. Despite oft-made statements to the contrary, there is NO great need for research into homosexuality, and our movement is in no important way dependent upon such research or upon its findings.

If we start out—I do, on the basis presented in Part II above—with the premises (1) that the homosexual and his homosexuality are fully and unqualifiedly on par with, and the equal of, the heterosexual and his heterosexuality; and (2) (since others have raised the question) that homosexuality is not an illness—then all these questions recede into unimportance.

We start off with the fact of the homosexual and his homosexuality and his right to remain as he is, and proceed to do all that is possible to make for him—as a homosexual (similarly, in other contexts, as a Negro and as a Jew)—as happy a life, useful to self and to society, as is possible.

Research in these areas therefore is not, in any fundamental sense, particularly needed or particularly important. There is no driving or compelling urgency for us to concern ourselves with it. Those who do allege sickness have created THEIR need for THEIR research; let THEM do it.

In the collateral areas mentioned, well planned and executed research on carefully chosen projects can be of importance, particularly where it will serve to dispel modern folklore. Evelyn Hooker's research (referred to above) showing no difference outside their homosexuality itself, in its narrowest, denotive sense, between homosexuals and heterosexuals, is one case in point. A study in the Netherlands by a Dr. Tolsma, which showed that the seduction of young boys by homosexuals had no effect upon their adult sexual orientation, is another.

The study now under way by the Mattachine Society of Washington to obtain the first meaningful information on the actual susceptibility of homosexuals to blackmail, will probably be a third.

These are all useful projects. Dr. Hooker's has turned out to be one of our major bulwarks against the barrage of propaganda currently being loosed against us by the agents of organized psychiatry. (However, as I pointed out above, this is a bulwark not needed, in strict logic.) I shall in fact probably be using the results of all three of these collateral research projects from time to time in my presentations of our case. But these studies are not of the vital importance which could properly lead many of our homophile groups to characterize themselves as research organizations (only one of these projects actually involved a homophile organization to any significant degree) or to divert into research resources better expended elsewhere.

Research does not play the important role in our movement which much lip-service attributes to it. It plays a very useful and occasionally valuable supporting role, but not more than that.

More important than the preceding, however, is the matter of this emphasis upon research, in terms of the evolution of our movement. In the earlier days of the modern homophile movement, allegiance to the alleged importance of research was reasonable. As the philosophy of the movement has formed, crystallized, and matured, and more important, as our society itself has changed—and it has changed enormously in the past fifteen years and even in the past two—the directions and emphases in our movement have changed too. As indicated in Part I of this article, the mainstream has shifted toward a more activist mode of operation.

Continued placing of primary or strong emphasis within our movement upon research will only result in the movement's loss of the lead which it is taking in the shaping, formation, and formulation of society's attitudes and policies toward homosexuality and the homosexual.

Thus, while as a scientist I will never derogate the value of research for its own sake in order to provide additional knowledge, as an active member of the homophile movement my position must be quite different. It is time for us to move away from the comfortingly detached respectability of research into the often less pleasant rough-and-tumble of political and social activism.

With the notion of a homosexual "culture" follow questions about the ways in which that culture is or should be manifested. Those who have argued for a culture have made analogies between homosexuals and racial, ethnic, and religious groups to argue for politics based on that shared position and ethos. Those who deny

LEO EBREO

politics based on that shared position and ethos. Those who deny the cultural aspect, who present sexuality as not giving rise to any larger differences, generally promote a politics of equal rights and assimilations.

Leo Ebreo's article uses the analogy between Judaism and homosexuality to argue for an increased pride in a distinctive identity, but one that opens connections between homosexuals and others, rather than isolating us. Though written in 1965, the arguments presented here continue to be important in lesbian and gay politics.

