Chairman's Introduction to Symposium on
Research Design Considerations
in the Study of Sexuality
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Before introducing the speakers, I would like to point out that the topic as it appears in the program has been broadened to include the entire sphere of human sexuality and not merely homosexuality. Heterosexuality and other types of sexual orientation will also be dealt with. This was one of the conditions I insisted on in accepting the chairmanship and I trust that my colleagues will bear me out.

My appearance as chairman is probably due to the fact that the organizer of this symposium, Professor Marvin Siegleman, regarded me as a fellow sex-researcher. Actually, I am not engaged in sex research, at least not for publication, but have been interested in the role that sexual adjustment plays in psychopathology. Freud had assumed that there was a causal relationship between psychosexual development and psychopathology and based his psychodynamics on this premise. In the course of time, however, it has begun to dawn on many workers that Freud had confused an indicator with a causal factor and that psychosexual difficulties, because they interfere with interpersonal relationships, can serve as sensitive indicators of the presence of psychopathology rather than be the cause of psychopathology.
By the same token, if no failure in interpersonal relationship is
involved, perhaps there is no reason for suspecting psychopathology.

The reason why Dr. Siegelman invited me, I believe, was the fact
that I had recently edited a book with John Money on Contemporary Sexual
Behavior giving the proceedings of the APPA Symposium on this topic.

The APPA, whose programs I have helped organize over the past 30
years, has given me the opportunity to organize programs on emerging
issues in psychopathology and when Kinsey was still relatively unknown
we offered him one of his first public platforms in our 1949 symposium
on "Psychosexual Development in Health and Disease."

The 1971 symposium of the APPA was on Contemporary Sexual Behavior,
recently published, which brought me to the attention, undeservedly, of
Dr. Siegelman, organizer of this symposium. As a matter of fact, the topic
for the symposium was suggested by Leon Eisenberg and the actual organiza-
tion was accomplished by John Money with my assistance.

One reason for my interest is the controversy conducted under
the aegis of the American Psychiatric Association regarding whether homo-
sexuality should be regarded as a disease, i.e., be included in the
nomenclature of psychiatric disorders, as it now is. Dr. Robert L.
Spitzer, who is head of our Evaluation Section in Biometrics Research,
spearheaded the movement to alter the current status of homosexuality in
the nomenclature and replace it with "Sexual Orientation Disturbance".
This would assume that sexual orientation itself, whether it follows the
major-cultural orientation or not, is not to be classified as a disorder
but those who have problems with their sexual orientation would be given a chance to be treated as patients. This raises some issues. Other conditions such as color-blindness, universal insensitivity to pain, obesity, physical disabilities like blindness and deafness also often are associated with problems of adjustment, self-acceptance etc. Are they too to be placed in the nosology?

This proposal opens the door to situational categories similar to the plethora of locations for phobias -- fear of high places, fear of neighbors, fear of falling etc. The essential factor in the proposed new category is associated with the disturbance resulting from non-acceptance of social norms regarding orientation of sexuality. Why not propose in the new category -- disturbance accompanying conflict with social norms or social expectancy. This would include all instances where the conflict with norms -- racial prejudice, aggressive behavior, vegetarianism, religious fanaticism etc. -- would fall, including conflict about sexuality.

If we accept the notion that disturbance associated with sexual orientation is the better way to regard excessive devotion to one option be it homo- or heterosexual, in sexual congress, we are faced with the relativistic problem of the dependence of disturbance on two factors: (1) the degree of internal stress and external stressors that the individual can tolerate and (2) the tolerance of the community towards deviation from its mores. In other words, it will depend upon two thresholds -- the tolerance of the community for deviation and the tolerance of stress on the part of the individual. If we are to follow the paradigm that the Supreme Court established for obscenity, we may have to relegate the decision on the acceptability of
sexual practices to each community.

This is one of the issues that will need to be dealt with if we are ever to develop a scientifically objective approach to the problem.

When faced with the question of the causes of disturbances in sexual orientation we are as much at sea as we are with regard to the causes of schizophrenia, neurosis, criminality, violence and similar behavioral problems of unknown origin. Here, however, we have a double problem: (1) why did the non-conforming behavior develop and (2) why does it cause disturbance in some but not in others. Let us first take up the first question—how did the non-conforming behavior develop. Because of our ignorance, we have to postulate "as if" causes in the form of scientific models, derive hypothesis from these models and test them for their tenability. What are the models that have been proposed? First, perhaps, is the developmental model which assumes that man must pass through certain stages of sexual development and that the transition between some of the stages may be difficult for some individuals. It is in this transition stage that the trouble develops. Harlow's non-sexually functioning monkeys are an example. A second model is the learning theory model which stipulates that man learns to become homosexual even in the same way that he learns to become heterosexual—through the laws of learning and reinforcement. Early sexual experience may be the conditioner. A third model is the ecological model which stipulates that the niche the person occupies is the cause of his good or bad development. Such factors as overcrowding, socio-economic status, deprivations educationally, socially and culturally. A fourth model is the genetic model which stipulates that a homosexual or heterosexual is born that way. A fifth model is the internal environment model which
would implicate metabolic and endocrine deviation as culprits in causing sexual deviation from the majority. A sixth model is the neurophysiological model which would implicate brain functioning, perhaps in the limbic lobe as MacLean suggests, with the olfactory sense and feeding behavior playing important roles. Which of these models is the true one? (Story of hen)

We can not afford to miss any bets and must get researchers to work in each model if we are ever to uncover the roots of the problem. Perhaps, methodologically speaking, the main effects of each model pale when confronted with their interactions!

Now, why do some individuals feel troubled, while others, equally deviant from their culture, feel untroubled? Is it due to different types of interaction between the forces represented in the 6 models or is it independent of these causes and is merely a reflection of personality? Some personalities can tolerate their inner stresses and alienation from most social peers, while others can not. In other words, the disturbance
may be allegedly independent of its origin and the individual would have been troubled by any other type of deviant behavior that might have characterized him. This, of course, is the same problem we face in psychopathology. Some depressives can live and tolerate their troubles, others, whose psychopathology may be no greater, succumb. The difference is probably to be sought in their premorbid personality, or in the various interactions between the postulated causes.

Our first speaker ...