HOMOSEXUALITY IN PERSPECTIVE: THREE VIEWS


[Much of the media reaction to this book has been concentrated primarily on one or two aspects of the data involved in the research. For a well-rounded, comprehensive coverage, SIECUS has asked three experts in the field—Warren J. Gadpaille, MD, David P. McWhirter, MD, and Wardell B. Pomeroy, PhD—to review it from their own specific points of view. The psychiatric and sex counseling practices of both Dr. Gadpaille and Dr. McWhirter include heterosexual and homosexual couples and individuals with sexual dysfunction, although Dr. Gadpaille is primarily a psychoanalyst working with individuals with sexual and other conflicts. Dr. Pomeroy, who recorded 8,500 of the 17,000 sex histories for the books he co-authored with Alfred Kinsey, subsequently spent 10 years in the practice of psychotherapy before assuming his present position. Their comments follow. —Ed.]

Warren J. Gadpaille, MD

The newly published research from the Masters and Johnson Institute, released in Homosexuality in Perspective, is likely to have an impact considerably beyond the physiological, behavioral, and limited therapeutic data presented.

It probably is no surprise to professionals that the physiology of sexual response in male and female bodies responding to homosexual stimuli is no different from that in heterosexual response. Nor is it surprising that sexual dysfunctions among homosexuals can be reversed by methods similar to those used for heterosexual couples. Without doubt, the research data had to be generated to supplant ignorance and speculation. But aside from those who are determined to regard each increment of genuine knowledge as a potential threat to deeply held prejudices, few are likely to regard these data as controversial.

Other findings, however, may well lead to professional, homophile, and general public controversy. The most

Continued on page 5

David P. McWhirter, MD

Masters and Johnson have done it again! This time the research has focused on persons with same-sex orientation, offering a series of perspectives on homosexuality in an attempt to dispel some of the myths about the sexual expressions and lives of homosexual men and women. It is a remarkable thing that the work was undertaken, and the health care professions once more must thank these pioneers for their work.

Controversy over the findings has already appeared in the public and scientific literature as well as in publications from the homophile community. Inevitably sex research will have critics.

My response to the laboratory portion of the study seeking to determine if homosexuals and heterosexuals have similar physiological responses was a sense of wonder that the question had never before been seriously addressed. Now, should it arise, this study has shown that they are identical. Then to find these researchers discover

Continued on page 8

Wardell B. Pomeroy, PhD

Masters and Johnson have spent many years in studying persons with both homosexual and heterosexual experiences, and are to be commended for devoting so much time and effort to this important aspect of human sexuality. It is especially important to have more data on female homosexuality because of the paucity of information on this subject. They are also to be commended for a very open and honest report on their findings with emphasis on their failures rather than their successes. Also, their willingness to observe sexual behavior in the laboratory and to supply partners for both their research and clinic subjects is to be lauded.

At the outset, a group of "homosexuals," including Kinsey ratings 1-6, was chosen because all were highly orgasmic and functional. The group consisted of 94 males and 82 females recruited during 1964-68. These males and females were contrasted with two similar groups of highly functional "heterosexuals" (Kinsey 0-1)—Study

Continued on page 6
SIECUS was founded with the goal of establishing human sexuality as a health entity. Now, 15 years later, it is evident that in this country and in an increasing number of countries around the world this concept of sexuality is not just being accepted but is forming the cornerstone of important new research and programs. Witness the proliferation of literature, resources, training programs, workshops, national and international conferences and colloquia (including the recent SIECUS-NYU Colloquium in Sweden)—all concerned with issues of human sexuality. SIECUS shares credit for this accomplishment with many other organizations, and is proud that its early initiatives pioneered in the field.

Now SIECUS's goal is to broaden its work, to move toward sharing this vast accumulation of new sexual knowledge, interpreting for as many people as possible what it means to be sexual human beings from birth to the last days of our lives. As an important first step in this direction, SIECUS is creating model learning centers open to the general public. Information about sexuality—for parents, foster parents, children, preadolescents, adolescents, adults in general, the aging, those with physical or mental disabilities, as well as for the professional community—will be available there through books, journals, pamphlets, and audio-visual materials.

Under the direction of professional sex educators, the SIECUS Sexuality Learning Centers will provide a comfortable, reassuring environment for people with sexual questions and concerns. We hope that this open learning environment will promote the integration of sexuality as a part of total health, and encourage responsible decision making.

On Thursday, November 29, 1979, at 7 P.M., friends and supporters of SIECUS will gather at the Sheraton Centre in New York City to launch the fundraising campaign to establish the SIECUS Sexuality Learning Centers. This celebration will take the form of a “toast”

- to SIECUS on its 15th anniversary
- and to Dr. Mary Calderone, a cofounder and president of SIECUS, who this year celebrates her 75th birthday.

This is a unique opportunity for us all. We will share, for a moment in time, the past, present, and future of SIECUS with the people who have been, are, and will be involved with its growth. The growing list of co-hosts includes Dr. Carleton Chapman, Muriel Fox, the Reverend Theodore M. Hesburgh, CSC, Ann Landers, Dr. Karl Menninger, the Right Reverend Paul Moore, Jr., Lawrence Phillips, Harriet Pilpel, Esq., Dr. John Rock, Dr. Howard A. Rusk, Dr. John C. Sawhill, Dr. Virginia B. Smith, Dr. Christopher Tietze, Dr. John Toll, and Abigail Van Buren.

The dinner will cost $100 a person, the proceeds going toward the Sexuality Learning Centers.

Friends and supporters of SIECUS who cannot attend but who wish to be part of this celebration may send contributions (addressed to me at the SIECUS office), and short messages of support for this exciting and creative venture.

Michael A. Carrera, EdD
Chairperson
SIECUS Board of Directors
WHERE THE ACTION IS

SIECUS Library Open for Business

Leigh Hallingby, MSW, MS
SIECUS Librarian

Room 53 in the Health Education Department at New York University has undergone quite a metamorphosis during the past eight months. Advice offered by one of the faculty members to “take a deep breath” before walking in there to begin work on January 8, 1979, was entirely appropriate. When I arrived, the unassembled bookcases were piled on the floor, and the books packed in boxes were locked in another room. Now, however, with its walls lined with shelves full of the best current sexuality books and periodicals, there is no mistaking that Room 53 has become the SIECUS Library.

The room is not all that has been in a state of flux—even its name is in transition, from the SIECUS Library to the SIECUS Resource Center. Although it now contains the traditional library books, periodicals, and vertical file materials, we look forward to a further transformation into a true resource component of the proposed Sexuality Learning Centers where sex educators will find the many different types of materials they need for research in planning courses and curricula. Thus we hope soon to begin collecting films, models, tapes, and other relevant audio-visual materials.

One of the primary reasons why SIECUS can now begin to fulfill its long-term dream of opening its library is our recent affiliation with the School of Education, Health, Nursing, and Arts Professions (SEHNAP) at NYU. One part of the agreement was that SIECUS would establish its library in the Health Education Department. Thanks to the Commonwealth Fund this was made possible. In the fall of 1978, at the time when the affiliation agreement was signed and I was completing my MS in Library Service at Columbia University, the position was opened which allowed me to combine my new profession with my background of five years of social work experience as a family planning and pregnancy counselor.

My work with SIECUS began with a visit to the Institute for Sex Research in Bloomington, Indiana, which is the model for our library. We are using its classification numbers and its thesaurus of 2500 subject headings, Sexual Nomenclature, in our cataloging. Thanks to the fact that 50% of the SIECUS collection overlaps that of the Institute, only half of our books must be catalogued “from scratch,” a fortunate saving of labor and of costs, which amount to approximately $10 for each new book processed to the shelves.

The 2000 books in our collection represent about 1500 titles. Most of them have been published during the ‘50s years since SIECUS was founded in 1964, coming to us from the publishers as review copies for the SIECUS Report at the rate of about 10 titles per month.

In addition to books, the library also contains about 60 periodicals. These fall into five major categories: the major professional journals in the field of human sexuality (now numbering around 12); serials in related fields such as family planning, public health, and marriage and the family; periodicals of related agencies such as the Mental Health Materials Center; newsletters of a variety of sexual behavior groups; and popular erotic magazines.

Finally, the other major part of the collection is the vertical files. The two cataloged drawers include all the clippings, reprints, and miscellaneous materials that have arrived at the library since January. There are many drawers of older materials waiting to receive subject headings as soon as the cataloging of the books is complete. Cross-references to subjects covered in the vertical files will be made throughout the card catalog.

Beginning on September 20, 1979, the SIECUS Library will be open, on a noncirculating basis, on Mondays through Thursdays from 2 to 6 P.M. and on Fridays from 9 A.M. to 1 P.M. There will be an annual user fee for those who are not SIECUS associates or NYU students and faculty. Anyone interested in knowing whether we have certain books or periodicals in our collection, or whether we have material on a certain subject, is welcome to call me directly at (212) 533-2923 or to write me at 51 West 4th Street, Room 53, New York University, New York, NY 10003.

DO YOU KNOW THAT...

Resources to Write for . . .

Human Sexuality Methods and Materials for the Education, Family Life and Health Professions: An Annotated Guide to the Audiovisuals, Volume I, compiled by Ronald S. Daniel, is an impressively comprehensive listing of technical resources in human sexuality. The cross-referenced guide provides descriptions of 3100 audio-visuals, along with professional comments on their effective use in teaching, counseling, and therapy. The 28 subject headings cover topics offered in units, courses, and programs in the field. There are seven audience level indicators, ranging from professional groups to primary school grades. Copies cost $24.50 each, plus $1.85 for postage and handling. To order, or to receive a descriptive brochure, write Heuristicus Publishing Company, Order Department, 401 Tolbert Street, Brea, CA 92621.
Junior Help Line in Holland

Dutch children between the ages of 8 and 15 who want someone to turn to anonymously for help, advice, or information can now dial an Amsterdam number to discuss their problems over the telephone. Subsidized by a Dutch Year of Therapy, the Child commission, this junior help line has been kept busy since it was started earlier this year. Some of the more common problems discussed include friendships, sexuality, home life, and criminality. If the project is successful, a similar service may be provided in other centers and the commission hopes the government will take over subsidization next year. Crisis lines for children have been operating in several German centers for over a year.

Sex Therapy Training

The Masters & Johnson Institute, formerly the Reproductive Biology Research Foundation, announces the inception of a six-month full-time training program in sex therapy. Persons with a doctorate and one year of psychotherapy experience, or a master's degree and three years of psychotherapy experience, are eligible to apply. The program includes an intensive series of lectures, conferences, and simulated sex therapy role-playing situations, as well as individually supervised clinical conduct of sex therapy. For further information, write to: Robert C. Kolodny, MD, Director of Training, Masters & Johnson Institute, 4910 Forest Park Boulevard, St. Louis, MO 63108.

SSSS Conference

The Western Region of the Society for the Scientific Study of Sex, Inc., will hold a weekend conference in San Diego, California, on September 28–30, 1979, on the theme “Sex Therapy Update: Who's doing it? How is it being done? Who says who can do it? Who needs it?” The conference will deal with questions and issues involved not only in therapy but also in sex education and counseling in the medical, psychological, counseling, teaching, social work, and pastoral professions. For further information, write to: Robert Reitman, PhD, Program Coordinator, WR/SSSS, 6355 Topanga Canyon Boulevard #311, Woodlands Hills, CA 91367.

Resources to Write for ...

Signs of Sexual Behavior by James Woodward is a 96-page introduction to basic sexual vocabulary in American Sign Language. It includes a discussion of language attitudes and sexual signs, 132 illustrations of signs of sexual behavior, and notes on each of the signs. To order, send $5.95 to T. J. Publishers, Inc., 817 Silver Spring Avenue, Suite 305-D, Silver Spring, MD 20910.

Children as a Factor in Marital Satisfaction: A Selected Bibliography, compiled by Carole Baker Goldman, is a 14-page annotated listing of books and articles dealing with goals and values in marriage and how children affect the attainment of these various goals. It is available for $1.50 from the National Alliance for Optional Parenthood, 3 North Liberty Street, Baltimore, MD 21201.

A Training Manual for Working with Adolescents as Peer Counselors, by Judith Segal-Favor, is a recently published 86-page manual outlining how the Pasadena Planned Parenthood Peer Counseling Project was organized, how the peer counselors were trained, and how the training was implemented, giving samples of training devices and techniques, and including a useful resource and reference list. Designed for use with groups of adolescents in social service agencies, school settings, and youth organizations, this manual would be especially helpful for people setting up such programs who have had no previous group experience. To order, send $10 to Pasadena Planned Parenthood, 1045 North Lake Avenue, Pasadena, CA 91104.

Conference Materials on “Substance Abuse and Human Sexuality,” compiled after their April 26–27, 1979, conference in Cincinnati, have been made available by the sponsoring organizations, the Central Community Health Board and the Social Health Association. The general sessions explored typical sexual response, how drugs affect sexual functioning, family reaction to substance abusers, and special sexuality problems encountered by counselors. Small-group sessions dealt with such topics as adolescent problems of substance abuse, myths about sexuality, and the relationship of drugs to sex and violence. Copies may be obtained for $5.50 from Consultation and Education Team, Central Community Health Board, 530 Maxwell Avenue, Cincinnati, OH 45219.

Myth-Information! is a game developed by Jacqueline R. Reubens for young people and adults. It includes cards each listing a myth or a true statement concerning human sexuality (e.g., “When people reach old age, they do not masturbate,” “Girls begin to menstruate earlier today than they used to,” “Sex education in school leads to greater sexual activity”), and an answer book with verifying information and discussion guide. More a discussion stimulator than a game, it is designed not only to correct misinformation but also to foster and develop a more relaxed attitude toward using sexual vocabulary and discussing sexuality topics. It can be used both in family and school settings with some discretion and selectivity based on the ages of the young people involved. The game can be purchased for $8.95 plus 70¢ postage from Family Life Publications, Inc., 219 Henderson Street, P.O. Box 427, Saluda, NC 28773.
Gadpaille, Continued from page 1

obvious is the authors' report of an unusual degree of success in the shifting from homosexual to heterosexual orientation of roughly three-quarters of those who requested change and were accepted for treatment. These outcome statistics have already been attacked by some professionals on the basis that these patients were very carefully selected, and were not "real homosexuals." In actuality, what reputable professional does not carefully select patients who present with a specified treatment goal? And how greatly does the patient population in this study differ from the patients requesting shifts to heterosexuality treated by those of us who have worked with many such people for years? Not much; we all know that a large proportion of preferential or currently exclusive homosexuals have had heterosexual experiences, been married, and often had children. A careful reading of the meticulous descriptions of the treatment populations and case histories given in this book makes it clear that Masters and Johnson were, indeed, working with an appropriately "homosexual" patient population.

This reviewer's only cavil (a serious one) concerns the questionable ethics of their purposeful refusal to publish, until some unstated future time, the details of the therapeutic techniques by which they achieve such a relatively low rate of failure. Not only does this make replicative studies and peer evaluation impossible, but it also creates the unpalatable condition of therapeutic monopoly.

Granting the credibility of this report's outcome statistics, what will be the effect on the homophile population? No one, even were he homosexual, could speak for so diverse a group. But many of the more extreme homophile spokesmen have publicly insisted that there is no record of any therapeutically induced shift from homosexuality to heterosexuality, blindly ignoring the already sizable documentation in the literature. To whatever extent any individual's or group's demand for basic human rights and dignities is based upon so untenable a premise, this research will arouse turmoil, anger, accusation, or denial. Hopefully, among the broader homophile community, it will be gratefully welcomed. If only because of the continued—and probably continuing—social handicap so many of them suffer, homosexuals deserve the right to make a choice where desired and possible, and to know that an additional and possibly more practical route to that choice may be available.

Might the general public take these reported findings out of context, twist them to mean that any homosexual could change if he or she only wanted to, and misuse them in a renewed effort to enforce treatment or to denigrate those who do not so choose? There is some suggestion that various religious groups may already be considering this position. It would be a grave misapplication of therapeutic research and potential if it were put to coercive, sociopolitical misuse, rather than be recognized as a liberating potential, opening up one more avenue to possible freedom of choice.

Space permits only mentioning other findings with psychosocial implications. The rich chapter on erotic fantasies contains data that could be disquieting to some homosexuals and heterosexuals alike. It is noteworthy that in a study population especially selected for highly successful function in its respective orientation, sexually exciting cross-orientation fantasies occur with high frequency in both homosexuals and heterosexuals, and are even more common in homosexuals. Despite the inclusion in their homosexual group of many with considerable heterosexual experience. Masters and Johnson state that the frequency of cross-preference fantasies was just as great in exclusive homosexuals.

Conceptions and Misconceptions: Sexuality in Children's Books is a 34-page annotated bibliography of recommended and not-recommended fiction and nonfiction titles for grades preschool through eight which concern birth, reproduction, puberty, sexual identity, sexuality, and relationships dealing with sexual tensions. It was compiled in conjunction with the Association of Children's Librarians' Institute on Sexuality in Children's Fiction, which was held in 1978 in Berkeley, California. A limited number of copies is available at $2.00 each from ACL, 2420 Mariposa Street, Fresno, CA 93721.

Your Introduction to Sex Therapy: What's It All About? a pamphlet by Robert W. Birch, PhD, a psychologist and marital and sexual therapist, presents a brief introduction to sex therapy for prospective clients. It answers such questions as: What is sex therapy? Why is it necessary? How does one find a qualified sex therapist and what criteria are involved? Single copies at 35¢ can be ordered from the Humanistic Institute of Ohio, Inc., 1568 Guilford Road, Columbus, OH 43221.
Group A, consisting of 57 males and 57 females all gathered during 1967–68, and Study Group B, consisting of 286 males and 281 females secured during 1957–65 and culled from the larger sample used in their previous research. This reviewer questions the use of two different control groups of heterosexuals, and the inclusion of Kinsey 1s in the heterosexual and the homosexual groups. At any rate, the basic finding was that, from a physiological standpoint, there were no differences in sexual functioning between the “homosexual” group and the two “heterosexual” groups.

Since the Kinsey 0–6 scale will be referred to several times in this review, an explanation of the chart may be helpful: 0—exclusively heterosexual with no homosexual behavior or psychic response; 1—predominantly heterosexual, with only incidental homosexual behavior or psychic response; 2—predominantly heterosexual, but more than incidental homosexual behavior or psychic response; 3—equally heterosexual and homosexual; 4—predominantly homosexual, but more than incidental heterosexual behavior or psychic response; 5—predominantly homosexual, with only incidental heterosexual behavior or psychic response; 6—exclusively homosexual with no heterosexual behavior or psychic response.

The authors use this particular datum (no physiological difference) as evidence that there are no genetic differences between homosexuals and heterosexuals (pp. 206–7), but properly leave the door open to the question of etiology by stating that more research is needed. Others have claimed that Masters and Johnson have a conditioning or environmental explanation for the “cause” of homosexuality, but a careful reading of the book does not warrant such a sweeping statement. Their research does not address itself to etiology.

They found, however, a significant difference between the heterosexual and the homosexual groups in the patterns of sexual stimulation. In both male and female homosexuals, a considerably longer time was spent in sex play before orgasm than in the heterosexual groups. Homosexuals appeared to be more process oriented and the heterosexuals (both males and females) were more goal oriented. Since much of sex therapy is concerned with the advantages of a process orientation, it appears that the heterosexual part of the population may have a great deal to learn from the homosexual group in this regard. However, it must be remembered that the homosexual groups were selected on the basis of a long-time commitment to another person of the same sex. A cross section of homosexual males would include a substantial proportion of cruisers whose goal orientation is notorious. (Kinsey data show that 25% of homosexual males had over 100 different male partners.)

Let us now, however, back up for a consideration of the way the authors use the Kinsey 0–6 scale, a factor crucial to this study. Two fundamental errors were made: (1) On pages 8–9, the authors claim that the Kinsey 0–6 scale was based on overt experience only. On page 639 in Sexual Behavior in the Human Male, we specifically stated that both sexual experience and psychic reactions were taken into account in determining where a person fell on the scale. We repeated this in Sexual Behavior in the Human Female (p. 468). (2) On the same cited pages in the Male and the Female volumes, we also said that these patterns may fluctuate up and down the scale at different periods in the person’s life. We pointed out that it is necessary to rate each person on the Kinsey scale for each year of his or her life in order to describe accurately the person’s heterosexual–homosexual balance. It would be essentially impossible for a person to be living with a person of the same sex for the previous three months and be classifiable as a Kinsey 1, as was done in the current book. When Masters and Johnson write about the “homosexual group,” they are talking about a group with a grand mixture of homosexuality and heterosexuality, and they might as well have called this the “heterosexual group” (with the exceptions of the few 6s in it).

Let us look at the mischief this confusion causes when Masters and Johnson write about fantasy patterns (Chapter 9). On page 179 they say, “Of particular interest was the high incidence of cross-preference fantasies [i.e., heterosexual fantasies] in the homosexual study population.” With a “homosexual” group made up primarily of Kinsey 1–5s, how could one expect anything other than a high incidence of cross-preference fantasies?

I believe the authors made a serious error in calling persons or groups “heterosexual” and “homosexual” instead of characterizing their behavior as such. As we said in Sexual Behavior in the Human Male (p. 617), “It would encourage clearer thinking on these matters if persons were not characterized as heterosexual or homosexual, but as individuals who have had certain amounts of heterosexual experience and certain amounts of homosexual experience. Instead of using those terms as substantive which stand for persons, or even as adjectives to describe persons, they may better be used to describe the nature of the overt sexual relations, or of the stimuli to which an individual responds.”

It has been standard practice for some therapists to treat persons who engage in homosexual behavior but who have a sexual dysfunction in the same manner as they treat persons with the same dysfunctions who engage in heterosexual behavior. This book confirms this approach, so it is not breaking new ground in this area. Success with “heterosexuals” is about the same as with “heterosexuals.” The authors correctly point out that success rates are not complementary to failure rates. On page 381 they say, “It must be emphasized that a 20 percent treatment failure rate should not automatically be converted into the suggestion that the therapy program was blessed with an 80 percent success rate. A 20 percent treatment failure rate means just that—and nothing more.”

The authors repeatedly castigate therapists for refusing to deal with sexual dysfunctions in the homosexual population. I heartily agree with them in this matter, but I suggest that the other side of the coin is that, if therapists are antihomosexual or homophobic, it is better for them to leave such clients to others who are emotionally capable of treating them.

The authors make it very clear that in the treatment of “dissatisfied” homosexuals, they are dealing only with males and females who want to change their sexual orientation. They consider those who want to “revert” to heterosexuality as persons who fall between Kinsey 2–4 and those who want to “convert” as falling at 5–6. There were 45 males and 10 females in the first category and 9 males and 3 females in the second. Nearly a 30% failure rate was reported, but nowhere could I find what constituted a “success.” One has to assume that this means a change to a Kinsey 0, but when psychic response is taken into account, as it should be, this seems a
American College of Sexologists Formed

On June 9, 1978, the articles of incorporation of the American College of Sexologists were endorsed by and filed with the Office of the Secretary of State of the State of California. The specific and primary purpose this corporation is to provide professional standards for, and certification of, sexologists, defined by ACoS as “persons who have a proven thorough knowledge of sexology in all of its aspects, i.e., anatomical, physiological, psychological, medical, sociological, anthropological, historical, legal, religious, literary and artistic.” The Examining Board is composed of: Dudley Chapman, DO; Erwin J. Haeberle, PhD, DA; Loretta Haroian, PhD; Fred Klein, MD; David McWhirter, MD; John Money, PhD; and Wardell B. Pomeroy, PhD. For membership information, write to: The American College of Sexologists, 1423 Franklin Street, San Francisco, CA 94109.

The PTA and Comprehensive Health Education

In 1975, through a contract from the Bureau of Health Education, DHEW, the National Congress of Parents and Teachers (PTA) undertook a major project designed to increase awareness and understanding of health education needs on the part of community leadership. The first phase of this program has been completed, and reports on the six pilot projects in Arkansas, California, Colorado, Georgia, Indiana, and Pennsylvania are now available from the National PTA, 700 North Rush Street, Chicago, IL 60611. The contract was recently renewed and new demonstration projects, now encompassing eight states, will work toward increasing public awareness of the need for education in such health issues as sex education, sexually transmitted diseases, and alcohol abuse. The coordinator for the PTA Comprehensive School/Community Project is Pauline Carlyon, MS, MPH, a former member of the SIECUS Board of Directors.

Medicare Statement on Coverage of Transsexual Surgery

The following statement from the DHEW Health Care Financing Administration concerns the Medicare program’s policy on transsexual surgery coverage as of July 13, 1979:

“There has been much misunderstanding about whether or not the Medicare program covers transsexual surgery and makes payment for such surgery. This misunderstanding has occurred because of certain erroneous and misleading newspaper reports which received widespread publicity several months ago alleging that Medicare had decided to cover this procedure.

“The Medicare program does not cover transsexual surgery and has never authorized payment for it.

“Medicare coverage for transsexual surgery would be possible only if it is determined that its use is generally accepted by the professional medical community or there is authoritative evidence establishing its safety and efficacy. In the case of infrequently used procedures, such as transsexual surgery, these determinations are based on medical advice which the Medicare Bureau receives from its medical consultants. So far, our medical consultants have not advised us that there is adequate evidence supporting the safety and efficacy of this procedure to warrant payment but this question is continuing to be reviewed.”

Pomeroy, Continued from page 6

highly unlikely outcome. Absence of overt homosexual experience hardly seems an adequate criterion for becoming classifiable as a Kinsey 0–1 heterosexual. My guess is that conflict over fantasy and erotic arousal accounts for much of this group’s lack of cooperation, both during treatment and during follow-up.

Although the authors are careful in their conclusions, others who have an axe to grind have not been and will not be. They may well say that this research shows that homosexuality is “learned” behavior and that Masters and Johnson have shown that it can be unlearned. So, if over 70% have “changed,” why can’t you?

Finally, the authors differentiate between bisexuality and ambisexuality. According to them, an ambisexual has no preference for a male or a female partner and no interest in any continuing relationship, preferring sex qua sex regardless of gender of partner. He or she is “primarily concerned in fantasy with past or anticipated sexual opportunities or experiences. He or she rarely individualizes a partner in fantasy.” They further state, “It was decided that fantasy patterns . . . would not be included as a primary selection criterion” (p. 146). Here again, the authors’ failure to be concerned with fantasy and erotic arousal is, as I see it, the major weakness of the book. Also, after personally interviewing over 10,000 subjects, I have failed to see any significant differences between bisexuality and ambisexuality. Therefore I must state my conviction that the differentiation is a meaningless one.

In conclusion, I think Homosexuality in Perspective is a monumental effort toward a better understanding of homosexuality, but that it is a seriously flawed one. A, PR

Wardell B. Pomeroy, PhD, is Academic Dean, Institute for Advanced Study of Human Sexuality, San Francisco, California.
erating that the way homosexual men and women make sexual contact actually has something to teach the heterosexual community is a ground-breaking contribution. In their previous work with heterosexuals, Masters and Johnson sharply distinguished the need for sexually dysfunctional persons to be less goal-oriented in their sexual encounters. To find this very point borne out in their laboratory work with homosexual couples, especially the women, should encourage all therapists to reinforce it with all of their patients.

The researchers' own apparent absence of homophobia may explain the omissions in this critical area of understanding the homosexual person, and more especially the homosexual couple, in sexual distress. Not dealing with the deeply ingrained homophobic responses in homosexual clients is a major cause of treatment failure. With the many cases of individual and couple dysfunction that we have seen in our clinic over the past five years, the detrimental effects of both intrapsychic and intrasocietal homophobia have been present in almost every case. In presenting the cases described as "failures," Masters and Johnson seem to have overlooked homophobia as a cause. Lack of adequate therapeutic intervention with the homophobic is the most common cause of unsatisfactory outcome.

It is to be regretted that, in the studies of homosexual men, so little attention was given to the practice of anal intercourse. In other studies as well as in my own recent work, it is shown that over 35% of practicing homosexual men use this as a sexual outlet, and it is in this area that we have found a large amount of sexual dysfunction. Either one partner is averse to the anal intercourse the other enjoys, or the person wishing to be penetrated finds his partner unable to maintain erection for penetration.

Masters and Johnson also state that too rapid ejaculation is far easier to reverse in the homosexual than in the heterosexual male, because the latter must learn ejaculatory control during cooperative introvaginal thrusting patterns with a responsive woman—that the homosexual man's concern about control is primarily to extend his own personal pleasure factor, while the heterosexual man's need is primarily focused on having his companion's personal pleasure factor. Again, it is unfortunate that they have apparently not seen the distressed, pressured homosexual man with premature ejaculation at each and every attempt at anal intercourse. Although the dysfunction can be reversed with considerable reliability, I have found it a problem for homosexual just as for heterosexual men. They have evidently not seen the homosexual man whose best orgasmic experience is from anal penetration, and who suffers as a consequence of his partner's prematurity. Also, in older male homosexual couples we find increasing incidence of lack of interest in sex with the committed partner, rather than frank aversion to sex.

The introduction of the new nomenclature of DSM III for psychosocial dysfunctions seems to have more phenomenological as well as physiological rationale than the terms originally proposed by Masters and Johnson. Although giving up old terminology is admittedly difficult, I wish that Masters and Johnson had seen fit to do so, especially in the case of their persistent use of the term "impotence," instead of the preferred "erectile insecurity."

Some of the study's major flaws are addressed by Dr. Pomeroy and Dr. Gadpaille. The use of the Kinsey scale to represent a lifetime of sexual experiences does seem to move the numbers more toward the lower end of the scale, thus failing to provide a full picture of the current and most recent sexual behaviors of the subjects, for we see many patients with a Kinsey 0 or 1 (totally or primarily heterosexual) behavior history and a Kinsey 5 or 6 (primarily or totally homosexual) fantasy life. Not relating the psychological orientation to the actual sexual behaviors can be a serious therapeutic error. Most of us are clearly aware that the orientation of the behaviors is easier to alter than the orientation of the fantasies, so the issue of conversion or reversion to heterosexuality from homosexuality, that could, if validated by replication, strike a telling blow for all of us who have been working for years to find a solution to this major human problem, remains up in the air.

Thus the major difficulty with Masters and Johnson's work is that they do not reveal their method for accomplishing conversion or reversion. And, as stated, to make things worse they admit at the very beginning of the book that they are looking only at behaviors and not at fantasy. Yet, using "Playboy therapy," G. C. Davison (The elimination of a sadistic fantasy by a client-controlled counterconditioning technique, Journal of Abnormal Psychology, 1968, 73, 84-90) showed that, although a homosexual male's masturbation fantasies could be moved from homosexual to heterosexual, this did not change his sexual behavior preference. I suspect that the claimed successes of Masters and Johnson will turn out likewise. There is something almost cruel in holding out a cup of water to a burning man without being able to produce the firehose that could really douse the flame. On the other hand, I am not sure how many homosexual persons, male or female, would be interested in entering into the heterosexual world either. Training homosexual persons to be able to function heterosexually is not as difficult as helping them to live their intrapsychic lives at one with themselves. Behaviors are far from the whole story, as those of us who see so many distressed human beings know!

Lest I leave the impression that I am too critical of Masters and Johnson's work, let me repeat that these pioneers have caught the cutting edge and are pointing a direction for many of us to follow. We should take up the challenge and move forward on all that still remains to be done. A, PR

David P. McWhirter, MD, is Medical Director, Clinical Institute for Human Relationships, San Diego, California; and Assistant Clinical Professor of Psychiatry, School of Medicine, University of California at San Diego, La Jolla, California.
In the book's Preface, Sha'ked correctly states: "Despite the importance of sexuality and sexual adjustment for patients in medical and rehabilitation situations, sexual concerns and difficulties of disabled and chronically ill patients are not adequately attended to by health-care professionals." He goes on to point out that a major problem is that practitioners lack basic knowledge and information regarding the interrelationship between sexuality and various medical conditions and disabilities. Therefore, the obvious purpose of this book is to broaden practitioners' knowledge and information by providing an annotated bibliography of the related literature available, including abstracts of journal articles, monographs, books, and other published materials from 1940 through 1977. The beginning date 1940 was chosen because the author's research convinced him that prior to that time virtually no professionally meaningful material on the subject was available—a conclusion of considerable historical importance in itself.

The book breaks the subject down into very specific topics. There are chapters on internal medical conditions, genito-urinary conditions, muscle and joint pain, sensory disabilities, psychiatric and mental disorders, and so on. There is a chapter on sex and the aging, and the final chapter is a media review, compiled and edited by Susanne M. Bruyer.

The Appendix, composed of a "selected list of primary sources," will be helpful to those wishing references giving quickly and easily a broad overview of the subject. A few pertinent journals and a number of conferences, with their proceedings, are also listed here.

This reviewer predicts that Sha'ked's annotated bibliography will be welcomed and widely used by physicians, social workers, sex educators, counselors and therapists, nurses, librarians, and others whose work confronts them with an obligation to provide help with sexual and sex-related problems of the ill and disabled. Moreover, it will be an excellent resource for those professionals who, although they do not work directly in the field, wish to help alert the public at large to the special needs of what is in actuality a very large group of people in any population—people with thoroughly human interests and desires in the sexual aspects of life. PR


Reviewed by Dennis Kubini, DPh (Oxford), Fellow of the Royal Historical Society; The Graduate School, Temple University, Philadelphia, Pa.

This work marks the coming out of gay academics who are said to be no longer willing to "drink the hemlock," as portrayed in David's The Death of Socrates on the book's back cover. The editor helps them prescribe their own antidote in "twenty-five selections from ten different disciplines which form a multi-disciplinary showcase...of new scholarship spawned in the gay liberation movement." The strongest area is literature in which there are discussions of homosexuality in the works of Mailer, Merrick, Vidal, Richard Howard, Hart Crane, Isherwood, Ackerley, Proust, Gide, and Rilke.

The best essay in the collection, however, is a historical one, Louis Crompton's "Gay Genocide: From Leviticus to Hitler." Dr. Crompton is one of those rare scholars who is at home in both the literary and historical disciplines. His thorough research has even unearthed an 18th-century purge of homosexuals in Holland—complete with engravings of the gory executions.

J. Lee Lehman's provocative essay describes the problems of gay students, and Barbara Gittings provides an interesting piece dealing with the conflicts in the American Library Association over questions relating to gay literature. This essay will remind many readers of the 1950s when they traveled to the nation's greatest libraries to find out what there was to know about the subject of homosexuality. I remember my own shock when, standing in the vast cathedral-like expanses of Yale's Sterling Memorial Library, I saw how tiny and yet unbelievably dog-eared was that section labeled "homosexuality." While scholars owe Ms. Gittings and her ALA Task Force a great debt of gratitude, her ALA bibliography is by no means comprehensive. Until the writings of such scholars as Laud Humphreys are included, the list, in my estimation, must be considered incomplete.

Other chapters aid one's understanding of the variety of ways in which gays are forced to view a hostile society. Lawrence Rosan provides a review of the philosophical questions often raised by the gay minority in trying to fathom its place in the universe, while Norman Pittenger suggests that gays can take solace in the realization that the Deity takes little account of sexual orientation in his deliberations. More earthy is John Lee's "Meeting Males by Mail" which should prove particularly useful for those who counsel gay males.
in general, and asexual or dysfunctional gay males in particular. Many of the conclusions reached in De Cecco's and Shively's stimulating "Conflicts over Rights and Needs in Homosexual Relationships" have been confirmed in Bell's and Weinberg's Homosexualities (1978).

Perhaps the most interesting entry is the editor's own contribution dealing with the findings of a survey sponsored by the Modern Language Association dealing with the attitudes of chairpersons of English departments toward their colleagues who are homosexual. Despite the low level of response (29%), the survey seems worthy of being considered representative if only because the results tend to confirm one's commonsense suspicions: the worst place for a gay academic to apply for employment is a small department at a small religious community college in the South, the best is a large department at a private university in the northeastern megalopolis where gays can give up community for the sake of protective anonymity. Informed readers will realize that an update is now needed: owing to the precipitous decline in 18-year-old cohorts (particularly in the Northeast), the universities will experience not only no new teaching blood but probably also considerable letting of the old. Such new jobs as appear will be preponderantly in the expanding community colleges, particularly those in the homophbic sunbelt. Dr. Crew's advice will therefore prove most relevant for those who already have jobs and are wondering what they should do to try to keep them. Certainly the survey indicates that for men the masculine image is de rigueur and transvestism strictly out. This reviewer adds a further cautionary note for the 1980s: Do not rely upon liberal, straight colleagues for fair-minded peer-group review; supportive resolutions from the professional associations and the American Association of University Professors will be most helpful, but it will be more important to keep abreast of the growing body of gay academic case law and to be prepared for litigation. A, PR


Reviewed by Paul J. Fink, MD, Professor and Chairman, Department of Psychiatry and Human Behavior, Jefferson Medical College of Thomas Jefferson University, Philadelphia, Pa.

This handbook, a collection of articles covering a full range of topics in sexology, is essential reading for anyone in the field of sex therapy. While a number of the chapters are reprinted because they are critical to a broad understanding of the progress which has been made in the field, a considerable number were written especially for this anthology to update specific areas of therapeutic intervention or to give an overview of a specific area.

A major proportion of the techniques described are essential to the armamentarium of a professional in the field. Many chapters emphasize a behavior therapy approach, but the book suffers from an overemphasis on behavioral models. There is some limitation to the comprehensiveness of this anthology since it ignores intrapsychic factors and only minimally touches on interpersonal factors. An integration of dynamic theory with behavioral theory would have given this book greater breadth.

The more balanced approach taken by Helen Singer Kaplan in her book The New Sex Therapy encourages a combination of psychoanalytic theory and a variety of behavioral and nonbehavioral modalities in the treatment of a wide variety of sexual dysfunctions. In this present volume, some of the chapters are uneven because they take a strict behavioral approach, where others are more comprehensive and describe behavioral techniques in great detail, yet leave room for discussion of a variety of therapeutic orientations.

Nevertheless, this book goes beyond most other sex therapy books because it is instructive in its detailed coverage of the topic. While most of the authors give credit to Masters and Johnson for their pioneering work in the field of sexology, they have refined and extended these techniques into application to a much wider range of patient populations. Thus there is no adherence to strict rules for patient inclusion or exclusion.

A number of chapters are particularly noteworthy. In discussing the direct treatment of sexual dysfunctions, Joseph LoPiccolo explains his own concepts of sex therapy with great clarity. He offers practical advice with regard to diagnostic criteria for intervention, and includes some of the philosophical tenets of a behavioral approach to sexual dysfunction.

For those not familiar with the PLISSIT model, including sex educators who might want to use this model in their own teaching activity, the chapter by Annan and Robinson is especially useful. Heiman's chapter on the uses of psychophysiology in the assessment and treatment of sexual dysfunctions is excellent because its comprehensiveness facilitates application to a wide assortment of therapeutic techniques. Morokoff and Singer and Singer have written important chapters related to the female orgasm. For those interested in pubococcygeal deficiencies in women, the chapter by Graber and Graber is noteworthy in that their extraordinary lucid material allows readers to incorporate the prescribed exercises into their own procedures. In addition, the chapters with instructions for dealing with coital discomfort, ejaculatory incompetence, and premature ejaculation are valuable resources.
This book is more than the author's personal testimony, for she has carefully studied the literature, and has interviewed not only Dr. John Billings, the gynecologist on whose research the method is based, but also hundreds of couples who use NFP.

Of course, the stumbling block for many people is the abstinence required during the fertile period. In our hedonistically oriented culture, any postponement of an urge or impulse is often considered unacceptable. The author holds that this abstinence, however, really becomes an asset in the eyes of those couples who persist beyond the initial, admittedly difficult, transition period.

To use this method, both the husband and wife must understand how a woman's body functions, and work together to respect that functioning. This means they must learn to be open in their sexual communication and sensitive to each other's feelings, and to avoid coercion concerning intercourse.

Having jointly determined their goals and chosen this method, they will subsequently find many nongenital ways of expressing their love and tenderness during the fertile period. And, since intercourse is not always available, the couple finds that it is never taken for granted. Tensions and desires do build up, but when intercourse is again available, the experience, according to one of the couples cited, is like having "a honeymoon every month." When a child is desired, the more accurate prediction of ovulation (in advance, not after as in BBT) makes possible intercourse as a deliberate act for the purpose of conceiving—and this also serves to enhance the togetherness and shared experience of the couple.

The NFP movement has been growing for 15 years and now has more than 700 groups and agencies in 47 states. It has worked with the Department of Health, Education and Welfare and the World Health Organization, and held its first international conference in Colombia, South America, in June 1977.

Although accurate studies for an overall success rate for this method are not reported, Mrs. Shivanandan has given us a beautifully and sensitively written account of the growth of the movement, and of its impact on the lives of those couples, married and unmarried, who have successfully used the method.

Getting Together is better than most such sexual enrichment books, primar-

Reviewed by Anne Backman, MA, SIECUS Publications Officer.

One of a series of 25 Annual Editions on specialized topics, Readings in Human Sexuality 78/79 is a compilation of 60 articles which appeared primarily in the public press during a 10-year period beginning in 1967, with slightly under half datelined 1977. Divided into five sections entitled “Sexuality and Society,” “Sexual Biology and Health,” “Sexual Behavior,” “Psychosexual Development,” and “Current Concerns,” the contents endeavor to provide an overview of the subject of human sexuality in contemporary America.

As in most collections of this kind, the quality of the material is uneven, but the editors have done a conscientious job in selecting articles dealing, even if only briefly, with just about every major concern in the field. While it certainly cannot be considered a scientifically oriented reference work, this book does provide a kind of “Time magazine” approach to human sexuality for those who want to keep in touch with “what’s been happening” for the past decade.


Reviewed by James A. Siefkes, MDiv, Director for Discovering Ministries, Division for Service and Mission in America, The American Lutheran Church, Minneapolis, Minn.; member, SIECUS Board of Directors.

The length of this little book should not detract from its significance. An intensive and thoughtful study built around the Old Testament book, Song of Songs (Song of Solomon), it was first presented at the 17th Kirchentag (Church Day), a week-long festival held in 1977 in Berlin under the auspices of the German Evangelical Church. The author, who until his retirement in 1975 was professor of systematic theology at the Free University of Berlin, writes with the wisdom of his years and, for the most part, the freedom of retirement from institutional boundaries.

Gollwitzer suggests that in a rediscovery of the Song of Songs, the power of the old ecclesiastical sexual morality and the civil religion (which is a strange mixture of social custom and ecclesiastical sanction) “is broken.” He points out that the centuries-old idea that “only lawful sexuality is pleasing to God and anything else is impure and sinful” is based on the premise that sexuality in itself is something negative. The Song of Songs—“it’s in the Bible”—extols an illicit kind of love, i.e., “the love that has no legitimation except itself.” This does not mean to say that the Song gives “a carte blanche for the uninhibited living-out of sexuality”; rather, it can provide “some guidelines for life in today’s climate of freedom. . . . In such a climate it is quite possible for love not only to prosper but also to suffer harm. The old guidelines based on legality and discrimination are gone, and it would not be good to try to reestablish them out of fear or in an attempt to escape the new freedom.”

Chapter 4 is a historical treatment of the church’s complicity, through reinforcement of the social order, in training people to accept subservience and affirm the power structure: “The church helped in this both by defaming sex and by specifying a place where sexual activity was permitted, namely, within that controlled relationship between two persons known as marriage. Marriage provided both a remedy for sin and an opportunity for having legitimate descendants who could lawfully inherit property.” Then the church “ensured its own dominance inasmuch as the bad name given to such a powerful natural drive inevitably evoked strong guilt feelings that drove men and women to the confessional. Through its sacrament of absolution, which alone was able to allay these guilt feelings, the church thus became indispensable. It had the invincible means of ruling and controlling both soul and mind.” This chapter gives the clue to the political implications of this book and of sexuality to the established order of church and state.

In the next three chapters, Gollwitzer does struggle. Some “old tapes” of the “yes, but . . .” nature rise to the surface. He remains consistent, however, in his conclusions as he continues to lift up the evangelical and positive aspects of sexuality. “The individual case is not under the general law but above it. . . . The same church that wants to make love dependent on legal sanction has also been concerned wherever possible to bring the Spirit of God under its dominance and make the Spirit move through the church’s channels.” Authorization must serve “as an aid to a life in which love will be enduring, whole, and of benefit to the larger world of which it is a part.”
Violable, we are blind to how it has been. To be sure, we are not blind to how freedom under the gospel is undoubt-edly enjoyed. The name Margaret Sanger conjures up the most extreme form of women's sexual rights, the book contributes useful background material to the historical picture of evolution in the field of human sexuality. A, PR

Gollwitzer's discussion of the relationship between sex, eros, and agape, he sees eros as contained in agape and neither is to be construed as mutually exclusive.


Reviewed by Susan Fox Ziff, MA, SIECUS Information Officer.

The name Margaret Sanger conjures up for some people a large family planning clinic in New York City, and for others her battles with the church and government as the first to win for women freedom to control their fertility. Few, however, know the Margaret Sanger depicted in Madeline Gray's new biography.

Gray does not paint an entirely positive or happy picture of Sanger. She shows an unusually strong woman who had to have her own way at any cost, sometimes even at the expense of the very movement she promoted. Unable to share the spotlight, she was often a manipulator leaving behind her trails of dedicated but disillusioned and angry people.

She loved sex, lectured extensively on human sexuality, and had many long-lasting, intimate sexual relationships with men who were willing to share passion without commitment. Unwilling to accept the restrictions of monogamy, she created for her second marriage a formal contract of "free love," permitting herself the freedom to have sexual relationships with whomever she pleased. Even today this would be regarded as ultra-liberal. While many women of her time demurely stopped having sexual relations after menopause, Sanger continued her active pursuit of partners well into her seventies—a pioneer still, in sex for the senior citizen.

There are lessons to be learned from Gray's biography. As a young sex educator, only too aware of the fact that some of the battles Sanger fought are still raging, I recognize some of her tactical errors and make mental notes to avoid repeating them. But I also appreciate the consistency in the pattern of her life as she actively, often dogmatically, affirmed the joy and naturalness in sexual expression. As Gray points out, "Undoubtedly one reason for her interest in birth control was its connection with sex. She enjoyed sex so much that she wanted all women to enjoy it too—without having to bear children they didn't want."

In presenting an expanded picture of Sanger's life as a perhaps still-controversial champion of women's sexual rights, the book contributes useful background material to the historical picture of evolution in the field of human sexuality. A, PR


Reviewed by Barbara Whitney, RN, MS, SIECUS Executive Officer.

In this book, much of the data in the concise and frequently updated Contraceptive Technology, written for health care providers, has been revised and expanded for a consumer audience to include other gynecological concerns such as fertility problems, surgical procedures, menopause, etc. The authors' fine track record for writing about complex issues in a simple and easily understood manner is herein well maintained.

In the introduction, they state: "Some of the most momentous decisions a woman makes have a direct and immediate impact on the health of her reproductive organs. As you decide whether to have a baby or to begin a sexual partnership, health probably is not your primary consideration, nor should it be. But health certainly is one factor that you will want to consider and plan for." By giving women sound, detailed medical information about what is and should be involved in the health care of their bodies, the authors succeed in demystifying medical terminology and in providing women with a basic understanding of medical procedures. The clear illustrations greatly enhance this process.

Especially refreshing is the authors' inclusion of individually oriented sexual issues in their discussion of con-
tracpetive decision-making and usage. In conjunction with data or effective-
ness and risk, they discuss “matters of the heart,” asking such questions as:
How much cooperation can you expect from your partner? How do you feel
about touching yourself? Do you like a lot of spontaneity in your sex life?
An excellent book for all women, complementing the popular Our Bodies,
Ourselves, My Body, My Health would be a useful resource in any
human sexuality course which covers women’s health concerns. A, PR

The New Old: Struggling for Decent Aging. Ronald Gross, Beatrice Gross,
Reviewed by Jane Porcino, MSW, Assis-
tant Professor, and Director of Geron-
tology Project, School of Allied Health
Professions, State University of New
York at Stony Brook; Co-director, Na-
tional Action Forum for Older Women.
The editors have brought together an
extraordinary collection of some 60 ar-
ticles by concerned people who are
actively struggling for decent aging in
America. Voices as diverse as those of
Senator Charles Percy, Alex Comfort,
and the National Caucus on the Black
Aged join in expressing their common
concern for the growing elderly popu-
lation in the United States.
Parts I and II express not only the
rage the various authors feel about the
shameful treatment afforded the aged,
but also the emerging hope that a new
group of vigorous and concerned older
people will begin to rectify these condi-
tions.
In the following sections the elderly
speak out eloquently for themselves:
Tish Sommers, the voice of older
women in America; Lou Cotin, the
writer whose rallying cry for action ap-
ppears in 400 newspapers across the
country; Maggie Kuhn, the self-styled
“wrinkled radical” of the Gray Pan-
thers. Many books are written about the
aged, but few include the words of
older people themselves. Therein lies
the uniqueness of this collection.
Much of the book is fun to read and
you will applaud the inclusion of Bruce
Bliven’s humorous Christmas letters,
written from 1968 to 1975. I wish I had
been on the list of his 500 friends who
received them. “At 82 I feel perhaps it
is time I picked out a life career for
myself, but I don’t want to choose the
wrong one by being too precipitate.”

Readers will be moved by the selec-
tions on death, in particular “A Very
Old Lady Dies in Style.” Since many of
us are the future aged, if we are lucky,
it is important to consider the question
posed by Dr. Siegmund May, “What
makes some older people so brave and
content, so interested and so intensely
human, and what makes others so
sour, cranky and demanding?” Which
will we be?
Mary Calderone, in her article on
sexuality and aging, reminds us all of
our basic human need for intimacy,
which only intensifies as we grow
older—the intimacy which can occur
“when two people delight each other
and delight each other.”
The New Old concludes with an
annotated selection of books and
magazines on aging, as well as a valu-
able inventory of innovative programs
and organizations. One of the groups
cited is SAGE of California, which takes
an exciting new mental health ap-
proach in perceiving old age as a time
for growth, and which has been de-
scribed as “this crazy group in Berkeley
that’s turning older people on.”
I found quite frustrating the book’s
failure to identify all the authors. How-
ever, as a relatively inexpensive non-
textbook containing a wealth of infor-
mation which presents facts and
touches heartstrings, The New Old is a
unique and welcome addition to
gerontological literature. A

Identity Management in Lesbian
Women. Alice Moses. New York:
Praeger Publishers, 1978 (118 pp.;
$17.95).
Reviewed by Petra Liljestrand, MA, Re-
search Associate, Center for Homosex-
ual Education, Evaluation and Research,
San Francisco State University, San
Francisco, Calif.
Self-disclosed homosexual men and
women are often asked, “Why do you
have to tell everyone that you are gay?”
The question reveals how little is
thought to whether they are identified
as lesbians and the more concerned
she is about being so identified, the
more management she will engage in’;
and (2) “the more heterosexual experi-
ence a woman has, the less manage-
ment she will engage in.” In 1975,
Moses distributed questionnaires to
300 lesbians in California, New York,
and Ohio, of which 83 were returned.
The questions range from asking how
awkward the respondent would feel
when getting a motel room for herself
and her partner, to how free she feels
use nicknames for her lover while
visiting relatives, to whether she has
ever used “he” instead of “she” to
refer to a lover. A picture emerges of a
group of women who feel positive
about being lesbian, do not feel highly
visible as lesbians, do not give much
thought to whether they are identified
as lesbian when associating with
heterosexual people, but who
nevertheless engage in some “man-
agement.” Heterosexual experience
does not decrease this management.

Moses’s book is notable not so much
for the report of the research as for the
excellent prelude, in which she
delineates her theories of “labeling” and
“management.” I think heterosexual
and homosexual readers alike will find
it fascinating and to the point. She
describes how deviance is a matter of
social definition rather than something
inherent in a given act; how the limits
of acceptable behavior are stretched
for certain individuals or under certain
circumstances but are not stretched
for persons labeled as deviant; and how
this labeling of deviance becomes a
central part of the individual’s life. Also
explained is the difference between
visible and invisible deviance and how being invisibly deviant complicates management of day-to-day life: "I know that she knows that I'm lesbian, but does she know that I know that she knows?" The author points out that the deviant engages in many more normal than abnormal behaviors and at times must help the nondeviant to act without awareness of the deviance.

The final chapter successfully ties theory together with the reality of the lesbians’ lives through direct quotes from their responses. The tone of Muses's report is unbiased, the manner in which she deals with her topic is compassionate. A, PR


Reviewed by Lorna Brown, MA, Vice-President, Ned Brown Associates, New York City; Member, SIECUS Board of Directors.

"Ann Landers" is, I imagine, one of the most widely recognized names in America today. Her advice column is carried in hundreds of papers, and her opinions are "the final word" for countless numbers of people. In her massive encyclopedia, Ann Landers has pulled together information on hundreds of topics which have been mentioned in her columns. And, as is her practice in these columns, she turns to specialists—many of them leaders in their fields such as Dr. Howard Rusk on rehabilitation medicine, the late Senator Hubert Humphrey on politics as a career, Dr. Robert Butler on sex and aging, and Dr. Elizabeth Kübler-Ross on humanizing death and dying—for some of the most up-to-date and accurate information on a given subject.

Topics covered run the gamut from Abortion to Zoonoses (diseases people can get from animals); from a very few specific medical conditions such as diverticula of the colon, to a lot on general subjects such as religion today, to matters of etiquette such as how to behave at a funeral. However, most of the topics are concerned with medical, psychological, or behavioral phenomena—a clear reflection of her newspaper column.

As can be expected, many of the items covered are related to human sexuality in its broadest definition. In these as well as in most other sections, facts rather than advice predominate. On controversial topics (e.g., homosexuality, abortion), more than one opinion is usually presented. In doing this, Ann Landers puts minimal emphasis on what she herself states are her own biases. At the same time, recognizing that her readers want and expect to hear her own opinions, she intersperses the material with some of the letters and responses from her column.

I read this encyclopedia cover-to-cover, which is certainly not how one would usually approach such a volume. I am glad that I did, however, because even though there is a detailed index and a table of contents with a list of the hundreds of contributors, I would still not have known what I could expect to find in the book. For instance, in the area of sex, there is no listing for premarital sex, and no cross-reference from "teenage sex" where part of this topic is in fact covered. This is a symptom of the book’s major flaw: one expects an encyclopedia to be encyclopedic, or at least predictable and orderly in its contents. This volume is a potpourri in which some topics are covered from many angles—such as death—while other areas—such as pregnancy—are covered sporadically and eclectically: "The Last Month," "The Pregnancy Test," "Sex During Pregnancy."

In the area of sex education, while there is a very good entry from Sol Gordon on sex education in the schools, sex education in the home is given only a very brief paragraph in a section on parenting, and I could find nothing on sex education either in general or within a religious or organizational setting other than a school.

For the most part, the items pertaining to sexuality contain sound information, especially when several viewpoints are presented. However, a few areas such as pornography are, in my opinion, dealt with inadequately and do not correctly interpret the latest findings on the topic. People with more conservative or traditional views about human sexuality may find the sex-related entries too liberal, while the liberal-minded will be disappointed that Ann Landers has not carried the banner of enlightened thinking on all sexual topics.

In conclusion, my advice is that readers not consider this volume an encyclopedia and expect to use it as such. Because of its eclectic nature, it is rather a book for the coffee table or family bookshelf. Its contents will provide grist for many family discussions, as well as for personal education and reflection. LT, A, P


Reviewed by Anne Backman, MA, SIECUS Publications Officer.

Based on the widely acclaimed feature-length film of the same name which was shown commercially in movie theaters and noncommercially on public television during 1976 (reviewed in SIECUS Report, Vol. VI, No. 6), this book includes the complete, uncut text of the filmed interviews conducted with 29 homosexual men and women, 130 black and white photographs, a commentary on the making of the film, and an extensive bibliography in gay studies.

Readers who have seen and been impressed by the film will enjoy the opportunity to meet these interesting people again and to learn more about them. The photographs evoked for me an almost total recall of their voices, their individual personalities. While the book obviously lacks the film's dynamic dimension, those who missed the screening will nevertheless get a very real sense of each person's human experience within his/her culture and lifestyle. The interviews are frank, often humorous, spontaneous, and touching.

The inclusion of both Nancy Adair's detailed description of the making of the film (in which she also discusses how she learned to relate to her own homosexuality) and the selected bibliography of gay literature diminishes the effectiveness of the book for me. They tend to turn it into a hybrid kind of presentation. Word Is Out is dedicated to, among others, "the twenty-nine men and women who are the book" (italics mine). And they are all we really need. A