

Expert opinion

'When is a pervert not a pervert?'

(Rachel Cunningham [1991]. *British Journal of Psychotherapy*, 8, 48–70).

The title seems chosen to catch the eye. This it does, but as being perjorative. In contemporary writing about sexual variations only psychoanalysts and a few psychotherapists retain the term 'perversion'; others have abandoned it as stigmatising.

"Rachel Cunningham" is a pseudonym for "a psychotherapist with a philosophy background." But who knows? Anonymity breeds mistrust in the reader. Sociologists have demonstrated the impossibility of choosing a pseudonym that does not have significance for the chooser. So this author may be identifiable at least by his/her immediate circle. Is this unconscious risk-taking? I wondered whether the paper was a plea on behalf of homosexual persons who wish to train as psychotherapists, as the paper purports, and who risk rejection. Or is it a more personal plea as implied in the paragraph: "The Inquisitorial (author's capital) attitude concerning sexuality should be dropped by training establishments while investigation and understanding should be left to *one's* (my italics) personal analysis."

A further bar to easy comprehension of this long (c. 12,000 words) paper is that the author seems to base his/her presentation on the style of a symphony or an opera with major and minor themes weaving in and out of the text. Writing as an opera buff I cannot fault Wagner but a conceptual-clinical paper would do better with a systemic exposition.

A major theme is that training committees in psychoanalysis and psychotherapy are anti-gay and anti-lesbian. The author may be correct in this; but how can he/she be certain? Surely some psychoanalysts and psychotherapists are gay and have slipped through the net? Why should the prevalence of homosexuality in the helping professions be significantly less than in other professions, medicine, the law, or politics?

'Perversion' is seen by many contemporary psychoanalysts in terms of character structure—narcissism, depressive concern, part object relations etc. However, these characteristics may be found in others, irrespective of sexual orientation. A person's object choice is a poor indicator of a 'perverse' character structure.

In a section entitled 'What is mental health?' it is suggested that homosexual persons may be

emotionally mature. Does anyone who has homosexual or lesbian persons in therapy or as friends still doubt this?

If creative ability is one marker of mental health, the immense contribution homosexual persons have made to the Arts is ignored by the psychoanalytic cognoscenti. Interestingly, the author does not extend this thought to ask how much creativity has come from psychoanalysts apart from the pioneers who had, by present day standards, scrappy personal analyses.

Are there problems in the counter-transference in relation to homosexuality? The question is justifiably raised whether homosexuality in an analysand increases the susceptibility of the analyst's unconscious. Morgenthaler, a Swiss analyst, is quoted: "The ideally analysed psychoanalyst would have no difficulty with the analysis of homosexuality." I would add analysts and therapists, being human, have their own personal problems and susceptibilities so that clients and trainees with a wide variety of problems, not limited to homosexual orientation, may cause anxiety.

The author seems to assume that the psychologically stable make the most effective analysts and therapists. I suggest a variation on the cliché: "It takes one to spot one." A neurotic therapist may fit better with a neurotic client. Possibly this could be relevant to homosexuality and lesbianism. Perhaps homophile therapists would be more appropriate with these clients.

The reader may be surprised at the author's personal ruling on the types of person he/she would not select as an analyst "... a homosexual male favouring phallic-masochistic part-object relations ... Nor a lesbian imbued with a neurotic (perhaps psychotic) hatred of men ...". So some homophiles are discriminated against! One can only wonder, given the difficulty in psychotherapy research of validly and reliably assessing even simple defences, how these complex character structures could be assessed by a training committee.

Freud's drive theory with its emphasis on the "polymorphous perversity" of early sexuality is seen as a possible way out of one impasse. If the child's drives become attached to fixed objects in relation to

the vicissitudes of life, it would be inaccurate to label homosexuality as "perverse." Kleinian theory on the other hand seems to imply 'heterosexual idealism' in that infantile drives are said to be inherently related to fixed opposite sex objects. Bion also seems to accept a biological essentialism in relation to object choice, as does Melzer in his concept of "perverse states of mind."

The limitation of all psychoanalytic conceptions of sexuality is that they are based on the psychology of the unconscious mind as revealed through psychoanalysis. They are at odds, therefore, with the contemporary acceptance by authorities of various theoretical backgrounds, of the multi-determination of sexuality including social-cultural learning. Of recent psychoanalytical theorists whose writings are relevant, Lacan is mentioned. His writing is difficult to follow and this is not helped by the author who quotes at length rather than assisting our understanding through his/her assimilation of the arguments. A major thrust of Lacan's argument relates to the socio-political expression of homosexuality and lesbianism. The social world, including the gender and sexual world, is transmitted through language and culture rather than through biology and "nature." In this context homosexuality may be discovered as a form of sexual relation rather than as a form of deviance.

The heterosexual ideal, which persists in psychoanalysis, is an obstacle to greater tolerance of homosexuality. Heterosexuality should be stable, harbour no envy of the opposite sex etc, an ideal that has no place for the concept of the "normal" homosexual. It also seems possible that psychoanalysts who take homosexual persons into therapy to work towards greater integration and personal autonomy are committed to the imposition of ideas of the "correctness" of hetero-sexuality. As the author notes, these

assumptions seem to leave no place for personal growth and development within a homosexual or lesbian frame.

As a counterbalance, Stoller, an influential contributor to many areas of sexual deviance, draws attention to the "ubiquity of sexual pathology in heterosexuality" and the need to understand heterosexuality, which is also not biologically determined.

In terms of ordinary human relations, the preoccupations of psychoanalysts and some psychotherapists seem to leave the person, as a person, out of the reckoning in a similar fashion to how the Church of England seems preoccupied with the sexuality of priests rather than with their emotions. Recent public expressions of the depth and commitment of homosexual relationships are deeply moving. To take one example, that of the gay clergyman 'For the love of God and Man' (*The Times*, 4 December 1991). He comments, cuttingly, "When Archbishop Runcie talks of homosexuality as a 'disablement' that's my relationship he's talking about".

The author makes a Plea for Dialogue, particularly between analysts and homosexuals of both sexes who wish to train. But why? To adapt the aged Groucho Marx joke, any club that would have me I wouldn't wish to join. If the author's point about the negative attitudes to training homosexuals is accurate, one wonders why any sensitive homosexual person would wish to join them. Surely not just to beat down barriers, nor to risk personal denigration?

There are so many reputable psychotherapy training set-ups I would be surprised if they all regarded homosexual orientation as a bar. If, however, this is so then the paper under review could provide the stimulus for an effective challenge.

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