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THE ORIGINS OF SEXUAL IDENTITY: A CLINICIAN'S VIEW

It is not possible to be completely objective about a subject as value-laden and emotionally evocative as sexual preference. Instead of indulging in illusions about my dispassionate, critical thinking in this area, I want to make my biases explicit. The perspective of this essay is clinical. It has evolved over a decade of helping men and women with concerns about their sexual preferences. My clinical bias is developmental. It is based on the assumption that all mental and behavioral phenomena involving sexual preferences are products of the child's integration of biologic, intrapsychic, and social forces. My perspective is also psychodynamic, because I sense that such traditions place more emphasis on the child's unique integration of inherent capacities, internal processes, and social influences than do strictly sociologic, behavioral, or biologic perspectives.

I am mindful of the fact that all clinical traditions share one fundamental scientific limitation — i.e., psychotherapies are retrospective methods. At best, a retrospective method is only capable of generating hypotheses [34]. Psychotherapy involves inferences about causal links between events and processes that occurred in the distant past. The transformation of clinically generated hypotheses into scientific explanations is only accomplished by subsequent retrospective and prospective studies. The generation of similar hypotheses by different clinicians does not constitute proof of their validity.

Finally, my views are influenced by my sexual preferences. I am a masculine, heteroerotic heterosexual with peaceable intentions for mutuality. These characteristics lead to my assumption that other sexual preferences result from less than adequate developmental opportunities. I do not, however, believe that I am determined to prove my assumption correct. I think I am more curious than judgmental about the origins of sexual preference.

Terms such as ‘sex role,’ ‘sex role preference,’ ‘sexual preference,’ ‘orientation,’ ‘sexual object,’ and ‘sexual aim’ refer to aspects of sexual identity. The sexual identity of any adult may be described along three separate dimensions: gender identity; sexual orientation; sexual intention. These three dimensions, separately or together, are basically parts of a subjective, psychological, intrapsychic phenomenon. As one facet of a many-faceted sense of the self, sexual identity exists with other identities, such as political, ethnic, religious, generational, vocational. Although there are important objective, behavioral aspects of sexual identity, its uniqueness can be more clearly perceived from its subjective aspects.

Gender Identity

Gender identity is the first aspect of sexual identity to form. The child develops a sense of being a boy or girl early in the second year of life – probably based upon an inconspicuous, repetitive, labeling process underway since birth. The child is taught its gender and subtly steered in various directions by the family (the society of early life). Families have many conventional, and some very unique, attitudes about appropriate behaviors for boys and girls. By accepting their labels and the early steering, most children ‘choose’ to be further influenced in a masculine or feminine direction. Normal children, between the ages of one and one-half and three, show many subtle signs of temporary gender confusion and envy of the opposite sex [16, 24, 37]. Perhaps as many as ninety percent of children develop what is known as a core gender identity, consonant with their biologic sex, by the middle or end of the third year of life [30]. In recalling early childhood, most parents and children seem to completely forget the instances of cross-gender identifications, curiosities, envy, and fantasy that are often part of the ‘cuteness’ of early life. This forgetting or inattention to cross-gender preoccupations misled many people into thinking that gender sense is solely a biological phenomenon that simply unfolds, rather than a feeling that the child acquires and elaborates on. The establishment of core gender identity is based on identifications with others, particularly those with whom the child has a trusting relationship. As a consequence of establishing core gender identity at the usual time, boys and girls will