Preface to the Revised and Expanded Edition

Disorders of Desire tells the story of U.S. sexology over the forty-year period from the late 1940s to the late 1980s. The first edition, published in 1990, centered on the researchers, professional debates, social changes, and political movements that shaped the field. It underscores the high stakes in the ongoing contests of authority over sexuality and gender. From the exposure of individual lives lived under the scrutiny of sexual science to the inside world of scientific research, from the celebratory and brazen street politics of early gay liberation to the anonymous sufferers in self-help movements, from the pathologies of the marriage bed to the legitimation of transsexualism, Disorders of Desire traces the influence of sexology in mid- to late-twentieth-century American life. Now the second edition returns to print this chapter in the history of U.S. sexuality, with new material and commentary.

Preparing for a new edition posed special challenges regarding what and how much to revise from the original book. In anticipation of this task, I was hyperattuned to how other authors approached it. Judith Shulevitz's intriguing article on the revision of literary texts, "Get Me Rewrite," warns that revising years later might violate the "integrity of the original" and might constitute a form

of "cannibalism, the devouring of the younger self by the older." Since I agree with her about the dangers of that sort of revision, I have largely left the original manuscript intact so as not to suddenly lapse into a different voice or introduce jarring anachronisms into the text. *Disorders of Desire* was written very early in the development of the still burgeoning field of sexuality studies and thus had little recourse to its array of theoretical tools and trove of historical research. Although I would not now use some forms of argument I used in the first edition and some of my predictions failed to materialize, I have left such things intact since they reflect the fact that *Disorders of Desire* is the product of its particular historical moment.

I am less persuaded, however, that Shulevitz's notion of "the original" applies to academic texts in the same way it does to literary texts. The very concept of "original" is problematic since academic books are (one hopes) revised many times before publication. Indeed, the "original" 1990 published version of Disorders of Desire was a revised version of an earlier dissertation. Since the goal of reissuing this book is to make its historical analysis available to a new cohort of scholars, I have taken certain steps to enhance it while preserving the integrity of the "original." I have not undertaken the impossible task of a comprehensive update. Rather I have expanded the original edition with a substantive Afterword that examines key developments, such as the "Viagra Revolution" and the ongoing controversies over the research of Alfred Kinsey. I have confined all of my new reflections on some of the broader theoretical issues implicit in my earlier analysis of twentiethcentury U.S. sexology to this Afterword. In addition, I have added a chapter (Chapter 7) that is based on my article, "Regulated Passions: The Invention of Inhibited Sexual Desire and Sexual Addiction," which compares the invention of the sex addiction diagnosis with that of the sexological disorder, Inhibited Sexual Desire. I edited the book to correct errors and tighten some of the original writing. Noting that some of the contextual material that was important to the original Introduction is now unnecessary for the twenty-first-century reader, I significantly shortened the Introduction for this new edition.

Acknowledgments

Many thanks to Janet Francendese and Temple University Press for this opportunity to re-engage with my earlier work. Janet is the type of sharp, generous, hands-on editor of which writers dream, and I have been fortunate to work with her. In addition, I cannot overstate my gratitude to my friends and intellectual colleagues Barbara Cruikshank, Margaret Hunt, and Judith Levine for their careful readings and astute suggestions about numerous drafts of the new material for this second edition. This book is dedicated to Barbara Cruikshank, who encouraged me to release this new edition.

My goal is to make people take our field seriously, so that, when we say we are sexual researchers, people will no longer laugh.

DONALD MOSHER, former president, Society for the Scientific Study of Sex

On May 23, 1983, the sixth World Congress of Sexology convened in Washington, D.C.¹ For one week, more than a thousand delegates considered the history and future of the complex field of sexual science. The diverse group of conferees at the Washington Hilton—educators, physicians, biologists, psychologists, and others—participated in an array of workshops while erotic films ran continuously in adjoining rooms. Official Washington looked the other way; both the White House and the mayor's office refused to send their routine welcoming message, saying that it would be "inappropriate." The *Washington Post* covered the conference in an article titled "Only One Thing on Their Minds." It featured a picture of sex researcher Shere Hite standing in front of a blackboard with SEX scrawled across it in huge letters. Some conference speakers alluded to the aura of disrepute surrounding sexology and acknowledged the difficulty of securing funding for sex research in a conservative political climate. Overall, however, the mood of the World Congress was one of celebration for the growth and progress of the controversial science of sex.

"Sexology" is an umbrella term denoting the activity of a multidisciplinary group of researchers, clinicians, and educators concerned with sexuality. With a

2

history of persecution and a somewhat controversial presence in contemporary society, sexology is attempting to develop fully as a science and profession. Yet even after a century of sexual science, sexology is relatively obscure as a profession and is as likely to evoke blank stares, or snickers, as nods of respectful recognition. The "sex expert" is often the object of parody or the butt of off-color jokes. Yet thousands in this country count themselves as professional sexologists. They work as therapists, educators, researchers, or administrators in settings that range from universities and social service agencies to religious institutions and private practice. Because of the multidisciplinary nature of sexology, practitioners usually identify with another field of study, such as medicine or psychology. For many, however, the very invisibility, isolation, and disreputability of sexual science galvanize their commitment to a larger professional identity as sexologists. Conferences such as the sixth World Congress of Sexology are more than a forum in which to network and discuss the latest research; for the sexologist, who might be the only sex researcher in a university or the only sex therapist in a town, they provide a vital connection to a larger professional network. More than individual support is at stake, however. Ultimately, the claim to unique expertise and authority in the area of human sexuality depends on the successful consolidation of sexology as a field of inquiry within which designated groups of specialists operate.

Disorders of Desire recounts the process by which sexology professionalized, sought cultural legitimacy, and created markets for itself. It has done so in a climate of concurrent hostility, titillation, and eager receptivity toward these endeavors. As U.S. sexology develops a professional identity, one sees a strong emphasis on biomedical science both as a methodology and as a legitimizing strategy for the study of sex. This emphasis is, however, at odds with the diversity of this field in which scientists, pornographers, feminists, transvestites, therapists, and others uneasily share the podium. Modern sexual science is an amalgam of theoretical and philosophical systems that have evolved within the dynamic social and political climates of mid-twentieth-century United States. Disorders of Desire examines the myriad factors that have given rise to these identity fractures within sexology and the attendant turf wars over the control of cultural definitions of sexuality and gender.

The sixth World Congress of Sexology can be seen as a microcosm of the field. Professional identity was a central theme. The program notes welcomed participants, declaring "a new pride in the progress of our science" and exhorting them "to lead sexology into a richly deserved bright future." Keynote addresses focused on the history of sexology from the 1900s to the present and chronicled current successes and new directions in the field.

As the professional identity of its practitioners depends largely on sexology's identification as a true science, the proceedings consisted largely of a paean to

scientific theory and method. Historian Edwin Haeberle pointed out the distinction between erotology—the practical study of sex (for example, the early Hindu love manuals or more contemporary works such as The Joy of Sex)—and sexology, the scientific study of sex.5 Haeberle noted that, for sexologists, scientific objectivity is not merely an ideal, but the only justification for their existence. Shirley Zussman, past president of the American Association of Sex Educators, Counselors, and Therapists (AASECT), stated that the real sexual revolution involves the application of scientific method to achieve the objective study of sex.6 A glance through the schedule for the congress confirms the appeal of science and technology for sex analysts: "A Telemetric Method for Registration of Vaginal Sexual Response," "Failure of an Attempt to Differentiate Psychogenically from Organically Impotent Males (by Arterial Lesions) by Means of a Standardized Questionnaire and MMPI," and "An Update on the Neurophysiology of the Clitoris." The same can be said of the substance of the proceedings. For example, the male presenter of a paper on women's orgasms cautioned, "We must not politicize sexual response and become pro-clitoris or pro-vagina, but we must be good sexual scientists."7 The mystique of science has been invoked by sexologists from Iwan Bloch to Alfred Kinsey and William Masters and Virginia Johnson in the hope that scientific methodology will render acceptable their research into issues that mainstream society often considers unacceptable.

Walking through the exhibits lobby, however, participants encountered a variety of conflicting representations of sexology. For example, Dr. Haeberle's scholarly pictorial display on the birth of European sexology was flanked by the booths of major drug companies, which displayed recent technical innovations such as Flexi-Rod (a penile implant with "natural concealability") and the Clinical Perineometer (a biofeedback instrument that trains women to strengthen the pubococcygeus, the muscle that tightens the rectum and vagina). Sexology's professional meetings are certainly the only ones at which academic texts are marketed alongside dildoes, vibrators, and sex toys (some endorsed by sexologists or, like the new "G-Spotter" attachment for the Hitachi vibrator, "designed in conjunction with a Certified Sex Therapist"). Booths representing major sexological organizations sat side by side with Magcorp, publishers of "the Rolls Royce of swingers' magazines," and with *Forum* magazine, published by *Penthouse*.

The conference presentations reflected the diversity of a field whose enterprises range from the staid and scientific, to the politically controversial, to the mildly fetishistic. Throughout the week gender scientists debated the efficacy of sex reassignment surgery, and sex physiologists from around the world disputed the existence of the G-spot. Celebrity sex researchers presented their work, among them sex therapist Helen Singer Kaplan, gender sexologist John Money, and sex researchers William Masters and Virginia Johnson. Meanwhile, a couple from

California spoke on amelotatism (the erotic attraction to amputees) and displayed copies of a newsletter they publish, containing articles such as "A Young Lady with One Pump and One Stump." On the first evening, the "media extravaganza," which featured pornographic movies and the live appearance of some of the stars, prompted some controversy. One sex educator from Australia noted, "I have never in my professional life been eye to eye with people like that. We are all liberals and more comfortable with ourselves than other people, but some of us feel that the adult film scene is almost totally destructive."

There were moments of tension between sexual science and sexual politics. At an open discussion of women's issues and concerns, some women charged that although sexologists typically espouse an encompassing definition of sex as an aspect of one's total personality, in actuality conference presentations reflect what these women considered a male preoccupation with genital expression. Other women asserted that gender politics permeate the very institution and practice of sex research. Most participants in the discussion, however, focused on how women practitioners could achieve equality and better representation within the field. A more radical critique was offered by local feminists who protested the event. D.C. Feminists Against Pornography passed out leaflets urging sexologists to eliminate male bias in sexual science, and a review in the Washington-based feminist newspaper *Off Our Backs* criticized the "sexist sleaze" at the conference, such as a presentation that focused on the "loving nature" of "most" father-daughter incest, a claim that is at odds with contemporary feminist and therapeutic opinion.9

Such criticisms notwithstanding, the optimism expressed about the future of the controversial science was striking. Attempting to bask in the cultural approbation accorded to science, and particularly biomedical science, sexologists consistently contend that scientific research will vanquish troubling sociosexual problems. Sexologists see themselves as pioneers fording a murky river of sexual ignorance and repression. Helen Singer Kaplan stated that as recently as ten or fifteen years ago, an individual with a simple sexual problem was "doomed to a lifetime of sexual inadequacy. Today ... a patient with a sexual problem is fortunate indeed."10 Since sexologists have largely grounded their professional mandate in the alleged ubiquity of sexual dysfunction and the ever-increasing efficacy of their treatment techniques, progress in sex therapy is indeed good news for the profession. As Wardell Pomeroy, a Kinsey team researcher, assured those attending the congress, sexologists "would ultimately prevail, if not in two years, then surely in twenty." The shade of doubt in this declaration stems, perhaps, from the difficulties that have beset sexology in its first century and have impeded the formation of a professional identity. This book examines the efforts of sexology to develop into a viable profession that would wield cultural authority over issues of sex and gender.

Disorders of Desire begins with the Kinsey era and proceeds to the late 1980s. However, sexology has a longer history with many of the same internal tensions and controversies that plague contemporary sexology. The scientific study of sex arose indirectly in western Europe as a result of late-nineteenth-century public concerns about issues such as prostitution and venereal disease. The formal conception of a specific sexual science is attributed to the German physician Iwan Bloch. In his major work, The Sexual Life of Our Time (1907), Bloch asserted the need to study the sexual life of the individual within the context of medicine and the social sciences. It was Bloch who coined the term for this composite endeavor - Sexualwissenschaft, or sexology. In those early decades, the science grew rapidly, with the founding of a journal and two sexological associations.¹² In addition, several major studies of sex were published, and sexologists collaborated on films concerning topics such as syphilis and homosexuality.¹³ The organization of several international scientific congresses on sex led to the founding of the World League for Sexual Reform in 1928. With the establishment of journals, institutes, and collaborative research projects, sexology was building the infrastructure of a scientific enterprise. By the beginning of the twentieth century, Richard von Krafft-Ebing, Havelock Ellis, and Sigmund Freud had already written major works on sexuality.

Early sexology was centered in Germany. In addition to the two professional organizations, Berlin was the home of the first sexological institute, the Institut für Sexualwissenschaft, founded in 1919 by Magnus Hirschfeld. It housed over twenty thousand volumes, thirty-five thousand photographs, and an abundance of archival material. By the early 1930s, approximately eighty sex reform organizations, with a total membership of about 350 thousand people, exerted a considerable force in German life. Composed of doctors, laypeople, and various professionals who staffed clinics, these groups provided medical and sexual information and counseling. This flurry of sex reform activity was short-lived, however. In May 1933, only months after Hitler's rise to power, Nazis raided Hirschfeld's institute and removed books and papers, which were later burned in the street. Within a short time, sexological journals folded, institutes were closed, and many sexologists were arrested or went into exile. Most were Austrian or German Jews, so that anti-Semitism, as well as Nazi opposition to the sex reform movement for its own sake, fueled this attack.

Erotic practices and preferences became an object of medical study by scientists such as Károly Mária Benkert (1824–82), Richard von Krafft-Ebing (1840–1902), Havelock Ellis (1859–1939), and Albert Moll (1862–1939), all of whom contributed to the construction of new methodologies, languages, taxonomies, and classifications of bodies and pleasures. Early European sexologists were a disparate group with diverse sexual theories, methods, and politics. Magnus Hirschfeld and

Wilhelm Reich passionately advocated sexual science as a tool to effect social and political change; Albert Moll called for academic rigor and the rational pursuit of scientific sexual knowledge. Moll and his colleagues eschewed activism or the use of sexual science to develop social policy. German sexology was also strained by the tension between "natural" and "cultural" science; between viewing sexuality as an innate, biological force versus seeing it as socially and culturally mediated. However, many sexologists theorized sex as primarily instinctual and congenital. They produced new classificatory systems of sexual health and deviance in which "sexual perversion" was largely an inherent characteristic. Although some sexologists thought that individuals could also acquire unnatural desires (for example, by excessive masturbation), they believed this was most likely if individuals were already constitutionally predisposed. An emphasis on biology, and later biomedical science, was regarded as crucial in achieving legitimacy and was linked to scientific solutions for such problems as venereal disease and prostitution.

Sexology is one of the vehicles by which sex was made visible and drawn more fully into public discourse throughout the twentieth century. A subproject of the broader medicalization of modern societies, sexology's knowledge practices arose concomitantly with the social sciences, psychiatry, and evolutionary theory. It might be understood as part of what Nikolas Rose calls the "psy" sciences the ensemble of psychological conceptual systems, languages, and technologies that have given rise to very particular forms of contemporary subjectivities.¹⁷ The medicalization of sex proliferated new sexual categories, vocabularies, and hierarchies, effecting an evaluative shift from "badness" to "sickness," a judgment often just as socially negative. 18 More broadly, sexology has operated like the other "sciences of the soul." It produced new forms of sexual measurement, diagnosis, and classification, along with therapeutic techniques to both define and effect personal sexual fulfillment. These interventions have brought about particular forms of thinking, talking about, and experiencing sex. Although its initiatives have been controversial, sexual science has nonetheless played a major role in the organization and regulation of twentieth-century sexual culture.

In *Disorders of Desire* I show the forms of scientific knowledge and clinical techniques that sexology produced regarding biological sex, "gender-appropriate" behavior, sexual identities, and sexual practices. In a historical moment of profound destabilization and contestation of these formations, sexology hoped to build and expand a market through addressing cultural fears about the survival of heterosexuality and the institution of marriage. It can save the nuclear family, it has claimed, by improving sex. Ultimately, sexology's highly individualistic definition of sexuality left it unable to adequately address such social dilemmas. Still, mid-twentieth-century transformations in social and economic arrangements created optimal conditions for sexology to take root, expand, and ultimately market

interventions such as sex therapy and sex reassignment surgery. The anxiety associated with mid-twentieth-century instability of traditional gender and family structures produced a ready focus for sexology, while an increasingly public vision of erotic satisfaction generated a willing group of consumers readily enticed by promises of more and better sex.

Sexologists approach sexuality, as their subject of research, as an individual drive rather than a social domain involving institutions, networks, inequalities, and multiple fields of power. Sexological practice ranges from biomedical laboratory work investigating biological determinants of sexuality to (sometimes nude) therapy sessions for people seeking better sexual relations. Sexologists invented devices to observe, measure, and time bodily contractions and secretions toward the goal of quantifying maleness and femaleness. Through hormonal research, they seek information about physiological nuances that might distinguish male and female sexuality, homosexuality, and heterosexuality. "Multiple orgasms," "gender dysphoria," "ejaculatory incompetence," "sissy boys," "sex reassignment," and "disorders of desire" are among the new languages and concepts constituting the discourse of modern sexology. As a result of these scientific projects, many sexologists view themselves as liberators of sex, and yet their efforts are more varied than this would suggest.

Sexological research and practices defy easy categorization. Some sexologists are genuinely committed to sexual equality and women's sexual and reproductive freedom. They believe that they are challenging stereotypic expectations for men and women, for example, through scientific claims that men and women are similar in sexual anatomy and functioning. Although many individual sexologists define themselves as liberals and feminists, in many ways the field has reinforced traditional gender relations, the nuclear family, and heteronormative assumptions. Sexology's classification system for sexual dysfunctions is based on departures from male heteronormativity. Many of its practices are designed to achieve legitimacy and stake out a market for itself. Moreover, U.S. sexology never had a comparable commitment to fighting sexual discrimination such as that found among some early European sexologists, for example, Magnus Hirshfeld's Institute for Sexual Science and the later World League for Sexual Reform. Its practices reflect this; U.S. sexology championed heterosexual sex but policed the borders, which, indeed, it helped construct, between sexual/gender normalcy and deviance. For example, U.S. sexologists espoused the physiological and sexual similarities of men and women while expending vast resources to search out the differences between gay and straight people. In the clinical realm, sexologists have taught "gender-appropriate" behavior to children while instructing sexually dysfunctional women to engage in "gender-inappropriate" behavior, in the hope that women who behave more like men might enjoy sex more.

This book shows, however, that sexology is not internally unified and its practices have not been uncontested. Although sexology was primarily concerned with developing a scientific base of expertise, by the late 1960s it was becoming more active as a business that marketed commodities such as sex therapy and sex change technologies. Market potential affected the direction of sexology as well as the types of people drawn to the profession. Sexology has always been multidisciplinary, but in the 1970s a distinct humanist tradition emerged—in concert with wider influences such as the human potential movement—as an alternative to orthodox scientific sexology. This became a new source of fragmentation, as these two major ideological groups within the field competed and often contradicted each other. As we will see in Chapter 3, although both claim the authority of sexology, they have different theoretical origins, different methods, and different philosophies. Many internal conflicts in the field revolved around attempts to keep sexology scientific and thus "pure and value free." Struggles of self-definition influenced sexology's attempts at professional consolidation in the latter part of the twentieth century.

Sexual science did not simply impose language, ideologies, and interpretive strategies on a passive public. It had external, as well as internal, challenges to its cultural authority over sexuality and gender. *Disorders of Desire* shows how feminist and lesbian/gay liberation movements, both of which criticized traditional institutions of marriage, heterosexism, and stereotypic gender relations, confronted and sometimes appropriated sexual science for their own purposes. Together, humanistic sexology and the feminist and gay liberation movements challenged the field's narrow scientific focus and its claims to expertise. Ignoring such challenges, many of the biomedical scientists who perform the work of sexology claimed objectivity as their method and truth as their goal. At the same time, they attempted to accommodate the radical challenges of feminism and lesbian/gay liberation as a means of broadening their authority and market. These myriad challenges to its scientific expertise shaped sexology's methods of research and therapy.

Sexology's professionalization process is unique because its subject matter—sexuality—has historically been a domain of stigma, danger, and immorality in Western societies. Paradoxically, this mistrust of sex both advances and hinders the attempts of sexology to professionalize. On the one hand, sexology has both benefited from and contributed to the twentieth-century social transformation by which sexuality resides at the core of personal happiness and identity. Inadequate access to information and advice on sexual matters created a vast market and fueled the phenomenal success of books by mid-century sexologists such as Alfred Kinsey and William Masters and Virginia Johnson. On the other hand, the stigma that inheres in sex has attached itself to those who study it, a process of

vicarious contamination of the sort that Erving Goffman described as "courtesy stigma." Over the decades, many sexologists have been personally harassed by the public or by governmental bodies such as the postal service (under obscenity laws), the House Un-American Activities Committee, and the Federal Bureau of Investigation. Sexologists must often tread softly or risk the wrath of social and religious conservatives for whom sexual science is anathema. Funding for sex research is subject to political winds, and usually dries up in times of sexual backlash. As we will see, many research decisions are made with an eye toward achieving respect and legitimacy for the scientific study of sexuality.

Disorders of Desire explores the ways in which modern sexual science has produced cultural discourses on sexuality, gender, and the intersections between them. It examines the role of sexology in the historical construction of sexual disease and a biomedically defined sexuality; sexology's internal process of professional consolidation; and the field's relationship to shifting political, cultural, economic, and demographic variables. The story is a complex one with numerous voices and subplots because the field encompasses so many contending forces: different research directions and conflicting interpretations of data, market demands that hinder efforts to establish a scientific identity, a biomedical conservatism at odds with the impulse to defend sexual freedom. The ultimate professional goal, the achievement of cultural legitimacy and control over sexual knowledge and the sexual marketplace, remains elusive.

Part One: The Emergence of Scientific Sexology

The period from the 1930s to the mid-1960s was a time of steady, if incremental, growth in modern American sexology. It was an era of paradox: the drama and conflict attending the publication of the Kinsey reports coincided with the virtually unnoticed proliferation of sex researchers and therapists. Fundamental changes in roles for men and women elicited a few sighs of relief and more than a little insecurity about the loss of traditional models.

Sexuality's ongoing shift from a private, marital, and familial context toward an increasingly commodified status marked it as a public issue and a potential social problem. With scientific and technological rationality heralded as the solution to social ills, the stage was set for a more public role for sexual scientists. Although sex researchers and theorists such as Sigmund Freud, Havelock Ellis, Katherine Davis, Clelia Mosher, and Robert Latou Dickinson had produced a sizable literature, it was Alfred C. Kinsey who both captured the popular imagination and provoked cultural conservatives with his investigations into the social patterns and individual sexual behaviors of American men and women. Kinsey, a biologist and taxonomist, consistently stressed the transformative potential of the scientific study of sex. Sexual science, he believed, could supply the data that would

promote greater understanding among groups of people whose relationships have been historically fraught with tension because of different sexual patterns and systems. Both marriages and class dynamics could be improved if only people had this information. This was a key moment for the emerging profession of sexology, as the confluence of striking cultural changes along with Kinsey's pioneering research helped create a climate favorable to the acceptance of the scientific study of sexuality. The adulatory reviews later accorded to Masters and Johnson upon the publication of their first text in 1966 signified the distance sexology traveled in these years.

Throughout this period, sexologists were intent on consolidating the profession through scientific achievement, accruing data, and developing a canon. Kinsey's empiricism dovetailed with the later biomedical research of Masters and Johnson, and by the mid-1960s professional aspirations soared as sexologists sought to present themselves as staid scientists in pursuit of sexual truth. The implicit ideologies of sex research located scientific sexologists in this period among the major promoters of sexual modernism. Sex, they assured the public, was not a suspicious or inchoate impulse, but rather a natural drive. For males and females alike, sex was a biological birthright, and a "more is better" philosophy was promoted. This normalization of the sex drive was a further step away from both moralism and the Freudian mystique of sexuality, supporting the growing cultural importance of sexuality while locating it as an appropriate object of scientific scrutiny.

Yet the advocacy of sexuality as a natural phenomenon raised nagging questions about what kind of sex was natural. Kinsey seemed to suggest that any behavior, by its very existence, fell within the normal span of sexuality. On the other hand, Masters and Johnson's early work virtually ignored anything other than marital sexuality. Marital ideology to varying degrees characterized the work of most sexologists during this period, a function of both traditional belief systems and a desire for mainstream acceptance. Modern sexology's strategy during these decades—rigorous scientific consolidation combined with an emphasis on issues of cultural importance for the white, middle-class, heterosexual majority—was moderately successful, but by the late 1960s its content and its empiricism had opened the field to charges of bias and exclusivity.