The following are direct quotations from the source:

INTRODUCTION:... Hatred, rejection or fear of the father are also regarded as causes of female homosexuality Bergler (1958) and Caprio (1955) say if a girl thinks her father has a weak personality or has other undesirable characteristics she may turn away from him and other men, and according to Deutsch (1944) and Bacon (1956) she may do this if she thinks her father is brutal or sadistic. (p.815)

THE SAMPLE OF THE INVESTIGATION: The subjects of this investigation consisted of 37 lesbians and 80 married women. (p.816)

CHOICE OF PARENTAL MODEL: ...Only 8 percent of lesbians against 28 percent of the married women answered that they had wanted to become like their mothers... At the same time, 51 percent of the lesbians said that they had not wanted to become like their mothers, and 54 percent said that they had not wanted to become like their fathers, while this was only the case with 28 and 26 percent, respectively of the married women... These results suggest that relatively few lesbians wanted to model themselves after either of their parents.

THE PARENTS' WISH FOR A SON: ... 38% of the lesbians against 13 percent of the married women answered that her parents had wanted a boy.

SUMMARY: ... The lesbians were more often hostile towards and afraid of their fathers than the married women, and they felt more often that their fathers were weak and incompetent. (p.821)

<table>
<thead>
<tr>
<th>Differences between</th>
<th>Lesbians</th>
<th>Married Women</th>
</tr>
</thead>
<tbody>
<tr>
<td>Father was quick tempered</td>
<td>49</td>
<td>26</td>
</tr>
<tr>
<td>Father was rather bad-tempered</td>
<td>46</td>
<td>20</td>
</tr>
<tr>
<td>Father sometimes got too angry</td>
<td>51</td>
<td>34</td>
</tr>
<tr>
<td>Father used to get angry with me</td>
<td>46</td>
<td>26</td>
</tr>
<tr>
<td>Father used to make me feel afraid</td>
<td>43</td>
<td>16</td>
</tr>
<tr>
<td>Father made the most important decisions</td>
<td>32</td>
<td>54</td>
</tr>
<tr>
<td>Father did not have a strong enough personality</td>
<td>43</td>
<td>15</td>
</tr>
<tr>
<td>Father could not cope well enough with difficulties</td>
<td></td>
<td>35</td>
</tr>
<tr>
<td>Father did not take enough responsibility in</td>
<td></td>
<td>13</td>
</tr>
</tbody>
</table>
CHILDHOOD EXPERIENCES OF FEMALE HOMOSEXUAL PATIENTS


The following are direct quotations from the source:

INTRODUCTION: ... We initially polled the more than 150 psychoanalysts in the society to ascertain the number of female homosexuals who were in analysis at that time.

The basic design of this study involved comparison of a group of 24 female homosexual [H] patients with a group of 24 female nonhomosexual [psychoanalytic] patients [C].

Many of the patients in the comparison group... were themselves sexually maladjusted, had difficult childhood experiences, and exhibited symptoms of anxiety and conflict similar to those of the homosexual patients.

FAMILY BACKGROUND: ... The mother seemed the more dominant parent in major decisions (15 of 24 H vs 9 of the 24 C)... The mothers of H's were more inclined to regard the father as inferior (9 of 24 H's vs 5 of 24 C's).

RELATIONSHIP WITH MOTHER: ... The mothers were not seductive generally, but it is noteworthy that four of the H mothers were seductive, while no seductive mother were found in the C group. Six H mothers discouraged the acquisition of feminine traits as their daughters were developing, while only one such mother was found in the C group.

... the H patients felt that their mothers babied them (10 of 21 H vs three of 17 C...)

RELATIONSHIP WITH FATHER:... both H and C mothers were looked upon as puritanical. In the case of the fathers, this holds for the H group but not for the C group (14 of 21 H vs 5 of 24 C...)

... the H group were more afraid of their fathers (14 of 21 H vs 7 of 17 C); but this fear was not predicated on the basis of physical injury...

The image of a close-binding father was easily discernible; he is far more possessive that the C father ... The H patient felt he was disapproving and belittling to boy friends (11 of 16 H vs 2 of 13 C) and girl friends (8 of 16 H vs 1 in 13 of C). He attempted to ally the H patient against her mother (11 of 21 H vs 3 of 17 C...) Undue concern about his daughter's physical health (8 of 20 H vs 1 in 17 C...) is a striking, as is the increased babying of the H patient by her father (8 of 19 H vs 2 of 17 of C...)

The H girl felt exploited by her father to satisfy his own needs (11 of 20 H vs 3 of 17 C...)

Notably, the H father reacted negatively to displays of affection between the H patient and her mother (7 of 19 H vs none of 13 C...)

Finally , there was a tendency toward the H father's actively discouraging the development of feminine traits in his daughter, for we found eight discouraging fathers in the H group, but not one instance of a discouraging C father.
DISCRIMINATORY PATTERNS IN FATHER RELATIONSHIPS: ... our composite picture of the H father is that of a superficially feared and puritanical individual, but one who fundamentally and covertly manifests an inverted oedipal striving toward his daughter. He is overly possessive, excluding the mother and friends, both male and female. He is perhaps too interested in her physical status, and attempts to discourage her development as a female. Indeed, he seems to readily complement the close-binding, intimate mother found in the male homosexual study.

There is a significant history of threats of punishment for sex play with boys among the H group (17 of 24 H vs 5 of 23 C) Similar threats for sex play with girls occurred in three H but in no C.

SUMMARY AND CONCLUSIONS: ...
1. Homosexuality in women, rather than being a conscious volitional preference, is a massive adaptational response to crippling inhibition of normal heterosexual development. A basic and fundamental heterosexual drive in the homosexual women studies evidenced by the following:
   (a) There is overt heterosexual activity in 53% of the H group prior to treatment. (b) Heterosexual activity in the manifest dream content of the H group was not significantly less than that found in the C group. (c) The desire for pregnancy is approximately equal in both H and C groups. (d) Of the H women, 75% seek social contact with men, primarily heterosexual men, both overtly and in their dreams and fantasies.
2. Homosexual women tend to have their epigenetic female identification interfered with.
3. ... we found a developmental constellation of traits or activities in which the girl shies away from the female role.
4. ... If there is a family configuration which induces a homosexual adaptation, it may well be that of a reversed oedipal close-blinding father, conjoined with a mother who not only does not effectively counter the father, but adds her contempt on one hand and discourages the girl on the other.
5. Finally, we have indications for therapeutic optimism in the psychoanalytic treatment of homosexual women. We find, roughly, at least a 50% probability of significantly improvement in women with this syndrome who present themselves for treatment and remain in it.

In the developmental history of our H patients, we have come across a group or constellation of significant items (at the 0.05 level) which we feel may constitute early prodromata of a potential homosexual adaptation. The items are as follows:

<table>
<thead>
<tr>
<th>Homosexual</th>
<th>Controls</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. There is a tendency toward seeking physical fights in childhood or early adolescence</td>
<td>10/32</td>
</tr>
<tr>
<td>2. They tend to dislike dolls and play less with them</td>
<td>13/22</td>
</tr>
<tr>
<td>3. There was a trend toward playing with guns as a child</td>
<td>11/22</td>
</tr>
<tr>
<td>4. They tended not to play 'house';</td>
<td>8/22</td>
</tr>
<tr>
<td>5.</td>
<td>10/21</td>
</tr>
</tbody>
</table>
Thus, in the developmental history we see a significant avoidance of feminine activities, of the female role itself, with a movement toward alliance with other, or older women. We feel that the observation of this configuration in a preadult female, be it as a child, preadolescent, or adolescent, should alert the parents or the family physician to the possibility of developing homosexual orientation.

CHILDHOOD EXPERIENCES OF NON-PATIENT HOMOSEXUAL FEMALES


The following are direct quotations from the source:
ABSTRACT: Subjects for this study were drawn from an informal social group of young relatively well-functioning lesbians... The homosexual women described a neglecting and churlish father, a martyred and preoccupied mother, and children who felt angry and spiteful... Inferences drawn from this study -- particularly those concerning the importance of negative childhood experiences with the father -- are compatible with some previous studies of lesbian women and with many investigations of female role development in general.(p.343)
SUBJECT RECRUITMENT: The subject of this investigation were self-labeled overtly homosexual women, all of whom were acquaintances of our undergraduate female intermediary, herself homosexual... The ambivalence toward participating of the homosexual women restricts the generality of our result to an unknown degree.(p.344)

Statements Endorsed More Strongly by Homosexual than Heterosexual Women (one-tailed $p's$ are given in parentheses) (p.347)

- Fathers neglect their children $(0.005)$
- Children wish their fathers would act differently $(0.005)$
- Fathers are moody before their families $(0.005)$
- Fathers (seldom) keep their promises with the children $(0.05)$
- Children want more love from their fathers than they get $(0.05)$
- Children are ashamed of their fathers $(0.05)$
- Father wish they had never married $(0.05)$
- Children have grudges against their fathers $(0.05)$
- Mothers wish they had never married $(0.005)$
Examination of the Family Adjustment Test data shows a remarkably consistent picture. Our homosexual women describe both of their parents in negative ways -- the fathers as neglecting, moody, disappointing, unloving, mean, selfish, and untrustworthy, and the mothers as preoccupied with their marital worries and fears to the point of reduced involvement with their daughters. Overt interparental strife and child-parent hostility are prominent. The home situation is essentially a Women's Liberation parody: cruel husband, martyred mother, and angry children. Understandably, the daughter who views her parents' relationship in this way is disinclined to adopt the traditional female role when it comes to male-female sexual pairing. (p. 348)

... It is not argued from the results that all homosexual women have had the kind of background described nor that all girls with this kind of background become homosexual. For example, an alternative for such a girl would be adopt an unconventional role with a male partner by being dominant, frigid, and 'castrating,' thus creating -- interestingly -- the kind of union from which homosexual sons are reported to come. (Bieber 1962; Evans 1969)(p.348)

The father was an important and central figure: both the girl and her mother reacted to what they saw as his manifest faults and inadequacies. The mother was not overly rejecting; thus the initial infant-mother bond of trust and dependency was possible for the girl to form. The real conflict occurred later, when the daughter was expected to form a mature affectional-sexual relationship with a man, and her homosexual orientation was the compromise solution.

The overall results of this study are compatible with simple learning theory. In suggesting the importance of the father's impact, the findings also correspond with studies of other aspects of feminine development. (p.349)

PARENT CHILD RELATIONSHIPS


The following are direct quotations from the source:
ABSTRACT: ... a population of 84 female homosexuals and 94 matched heterosexual controls...
INTRODUCTION: Female homosexuals reported having had more negative relations with their fathers in childhood that female heterosexuals, although a variety of parent-daughter relations was reported by both groups. The female homosexuals were neither mother or father identified, but they were more distant from both parents and other people than their controls. The female homosexuals also reported a more masculine childhood than the heterosexuals, and they were
more masculine on an objective measure of masculinity-femininity. (p. 120)

SUBJECTS: ... There were many more refusals from the female homosexuals, including sabotage of test packets that had been gathered in a group situation. (p. 121)

RESULTS: From the 46-item Parent-Child Interactions Questionnaire, 30 items distinguished between the female homosexual and heterosexual groups at the .05 level or less, of which 7 were at the .001 level or less. The seven best discriminators, from first to seventh, were: (a) played baseball (more homosexuals often or very often: more heterosexuals sometimes; (b) physical makeup as a child more homosexuals athletic, more heterosexuals, coordinated; (c) played with girls before adolescence (more homosexuals sometimes; more heterosexuals often or always); (d) avoided physical fights (more homosexuals sometimes or never); (e) accepted mother (more homosexuals moderately through no; more heterosexuals strongly); (f) felt accepted by mother (more homosexuals moderately through not at all; more heterosexuals strongly); and (g) father openly preferred child to mother (more homosexuals always and often; more heterosexuals seldom or never). (p. 123)

The pattern that emerged for females is one of tomboyishness and feelings of maternal rejection and father overacceptance with, at the same time, rejection of the father

MEASURES OF SEXUAL IDENTITY: ... The picture that emerges for both homosexual males and females, then is one of distance, perhaps alienations from people in general. (p. 125)

DISCUSSION: ... To us, these data suggest the need for a strong male figure to reinforce feminine role adoption in the developing female child in our culture as it is now constituted. Our findings seem to support Johnson's (1963) theory of sex role development for females. As our culture is now arranged (or was for this young adult population), the mother as a female model "does not seem to be enough." An "instrumental father figure" also appears to be needed. (p. 126)

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CHILDHOOD GENDER NONCONFORMITY


The following are direct quotations from the source:

Heterosexual, bisexual, and lesbian women recalled the extent to which they had engaged in gender conforming (female-stereotypic) behaviors and gender nonconforming (male-stereotypic) behaviors in childhood. Heterosexual women were more likely to recall having had female-stereotypic experiences as children, whereas lesbian women often recalled a childhood characterized by a male-stereotypic experiences. Multiple discriminate function allowed the heterosexual women in the sample to be distinguished from the lesbian women with 80% accuracy in classification of individual cases on the basis of four recollected attributes (imagined self as a male character, wished to become a mother, preference for boys' games, and considered a tomboy as a child). However, some heterosexual women reported much the same childhood behaviors as the majority of lesbian women, and some lesbian women reported much the same
childhood behaviors as the majority of heterosexual women.

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Percentages of Heterosexual, Bisexual and Lesbian Women Who Recalled Having Experienced Different Childhood Experiences.

<table>
<thead>
<tr>
<th></th>
<th>Heterosexual n = 78</th>
<th>Bisexual n = 39</th>
<th>Lesbian n = 22</th>
</tr>
</thead>
<tbody>
<tr>
<td>Imagined self as male character</td>
<td>37%</td>
<td>62%</td>
<td>82%</td>
</tr>
<tr>
<td>Wished to become a mother</td>
<td>78%</td>
<td>59%</td>
<td>41%</td>
</tr>
<tr>
<td>Imagined self as female character</td>
<td>90%</td>
<td>74%</td>
<td>64%</td>
</tr>
<tr>
<td>Preferred boys' games and toys</td>
<td>63%</td>
<td>79%</td>
<td>86%</td>
</tr>
<tr>
<td>Preference for boys clothes</td>
<td>40%</td>
<td>68%</td>
<td>73%</td>
</tr>
<tr>
<td>Considered a tomboy</td>
<td>63%</td>
<td>77%</td>
<td>77%</td>
</tr>
<tr>
<td>Preferred feminine to plain clothes</td>
<td>71%</td>
<td>46%</td>
<td>32%</td>
</tr>
<tr>
<td>Felt like a boy or man</td>
<td>22%</td>
<td>32%</td>
<td>59%</td>
</tr>
<tr>
<td>Desire to grow up like mother</td>
<td>67%</td>
<td>59%</td>
<td>36%</td>
</tr>
</tbody>
</table>

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LESBIAN ADULT CHILDREN OF ALCOHOLICS [ACOA]


*The following are direct quotations from the source:*

In many alcoholic families, children are exposed to inappropriate sexual behavior by parents who traditionally have poor boundaries. Whether overtly or covertly, children in these families are in some way sexually abused. They see, hear and feel mixed messages about sexuality in general. More often than not, if there is overt sexual abuse, it is the daughter who is more vulnerable to rape, incest, and molestation.

The process of identity formation of a young lesbian is inexorably linked in this case with growing up in a shame-based family system where there is already a high level of stress.

The most obvious role in an alcoholic family is that of the acting out child known as the scapegoat. This is the child who overtly grabs the attention of the family by such actions as being "bad,"... If the scapegoat is a lesbian she may flaunt her lesbianism as a way of rebelling against the family norms.

Pam came to therapy at age 38...She reported that she and her partner had not had sex in over a year...

When feelings of intimacy emerge, the lesbian ACOA fears them. She was unloved as a child and has no experience with healthy affection. Affection is confusing to an adult who didn't
receive any as a child; and when she experiences it initially as an adult, the ACOA may not know how to handle it. She may feel she doesn't deserve it, she may sexualize it, or she may become obsessive.

...alcohol may play a role by providing the anesthetization necessary for an unsure partner to make a sexual overture in a risky environment.

The ACOA...chances of becoming alcoholic are four times greater than those of her non-ACOA sisters.

SEXUALLY ABUSED GIRLS


The following are direct quotations from the source:

...identification with the aggressor ... may allow for the denial of traumatic victim roles to help defend against the feelings of vulnerability associated with abuse. Masculine gender role identification also may be related to feelings of maternal abandonment and ambivalence regarding relationships with mothers, who may have been viewed as weak, powerless, and unable to be protective."

GID IN GIRLS


The following are direct quotations from the source:

CASE EXAMPLE: Sally, a 6-year-old girl... Sally's mother noted that at about the age of 3 she had developed a strong aversion to wearing culturally typical feminine apparel, such as dresses. Sally would have intense temper tantrums when asked to wear a dress, and insisted -- relentlessly, in her parents' view -- on having her hair cut in the fashion of a boy. ..Sally preferred boys as playmates; played only with stereotypical masculine toys; always took the male role in fantasy play; and was preoccupied with aggressive, culturally stereotypic masculine activities... she demanded to be turned into a boy... Apart from Sally's marked cross-gender identification, she presented as a tense, inhibited, and anxious youngster... about the age of 3 Sally had been extremely jealous of her older brother age 10... During the individual clinical interview, Sally indicated that she wanted to be strong, and in doll-play interaction with the examiner she took great pleasure in throwing the brother doll off the cliff... she indicated with affirmative head nods that she often felt scared and that she believed becoming a boy would make her stronger... She did not look at her mother very often, and she never approached her mother for contact. (p. 12
PEER RELATIONS: ... an 11-year-old girl with gender identity disorder, who wanted to be a weightlifter so that she could be strong enough to protect her mother from potential rapists. (p. 19)

Although the girls appear to be less ostracized for their cross-gender interests than do the boys, it has been our impression that the markedly cross-gender-identified girls are disliked ... Like the boys, some of the girls have chronically poor peer relations and no close friends of either sex. (p. 20)

ANATOMIC DYSPHORIA: Anatomic dysphoria in girls often centers on a preoccupation with acquiring a penis. One girl slept with Magic Markers (felt pens) inserted in her underwear. Another girl walked around her house with a hot dog protruding from the zipper on the pants. A third stated that when she was older she would "murder" a man and cut off his penis. A fourth was referred by her parents, in part because she had been making efforts to cut off her brother's penis with scissors and was very distressed when told by them she could not do this. A fifth would draw pictures with "hundreds of penises" and pray to God at night for one. A sixth was persistent in claiming that she had male genitalia. (p. 22)

An adolescent gender-dysphoric female... lured a taxicab driver into her apartment, murdered him, removed his penis and testicles and attached them to her body with Krazy Glue. (p. 23)

SEX DIFFERENCES IN REFERRAL RATES: Consistently, it has been observed that boys are referred more often than girls for concerns regarding gender identity. Our clinic has a referral ratio of 6.3:1 (n = 249) of boys to girls.

CASE EXAMPLE: Nancy was 4 years old... Nancy's mother described herself as "having been terrible, very depressed" during this 2-year period. She experienced her husband as uncommunicative; she felt that her problems with Nancy were resulting in part from her own deficiencies' and living in the country made her feel trapped. She decided to return to work part-time when Nancy was 6 months old because of the difficulties she was experiencing, particularly in her parenting role... In our clinical interview with her, one aspect of her fantasy play concerned a boy who protected the "scared king and queen" from a dragon by fighting him off with his sword. In that fantasy, the boy felt no fear. (p. 100 - 101)

Sammy was 8 years old. Apart from her marked cross-gender identification, Sammy manifested pervasive socioemotional disturbance... When she was 5, she was in her father's apartment when his current partner shot him in the face with a revolver... Sammy was in terror that her father might find her and take her away again, and she ruminated about finding a gun and a penis so that she could protect herself and her mother. (p. 103)

PSYCHOSOCIAL INFLUENCES ON GIRLS WITH GENDER IDENTITY DISORDER: ... In terms of social reinforcement, however, it was our observation that the parents of these girls either tolerated or encouraged cross-gender behavior...

Maternal psychiatric impairment has been prominent. Of the 26 girls in our sample 10 (38.4%) had mothers who were or had been in outpatient treatment... 20 (76.0%) of the mothers had histories of depression... they were all depressed when their daughters were in their infancy and/or toddler years. Eleven of the 26 mothers showed clear evidence of Axis II character pathology.
... it seems to us that a girl either failed to identify with her mother or deidentified from her mother because she perceived her mother as weak, incompetent, or helpless. In fact, many of the mothers devalued their own efficacy and regarded the female gender role with disdain.

Six of the mothers had a history of severe and chronic sexual abuse of an incestuous nature.

Another factor of importance is a daughter's experience of severe paternal or male sibling aggression. Such aggression had been directed at the mothers, at the girls, or at both in 12 of the 26 families. In these cases, the classic mechanism of "identification with the aggressor seemed relevant to the girls' cross-gender identification... The occurrence of male sibling aggression seemed important in two ways: First, it was chronic; second, the parents seemed to be incapable of modulating or buffering it. This caused the girl to feel vulnerable, and thus she developed the notion of being a boy for protective purposes.

SUMMARY OF MODEL FOR GIRLS: ... In the girl who develops gender identity disorder, we also see a temperamentally vulnerable child who easily develops high levels of anxiety... the mother's own difficulty with affect regulation leaves the mother prone to depression and withdrawal in a situation of marital dissatisfaction; it also leaves her uncomfortable with her child's and her own negative affects. This leaves the child feeling less secure about herself as a whole, perceiving the mother's avoidance of affect as avoidance of her. Again, usually such a girl is sensitive to parental feelings. What seems to be specific in this situation is that in the context of conflict (sometimes quite overt) between the parents, the child perceives the marital conflict as a situation in which the mother is unable to defend herself. This creates intense anxiety about the child's own self. Furthermore, the mothers of girls with gender identity disorder often feel acutely put down by their husbands, and the fathers tend to see females as less competent.

When a daughter tries out cross-gender behaviors in an initial effort to decrease anxiety (a pattern that may be consistent with her style of approaching and enjoying active play), or unconsciously believe in the confidence and strength of males, in contrast to her own sense of inadequacy, fails to discourage the cross-gender behaviors. The father may in fact encourage the cross-gender behaviors. This permits the child the fantasy of being the mother's protector through identification with the aggressor. The continued need to use a fantasized other self to promote a sense of security is dependent on the family members' inability to resolve their conflicts and to promote a sense of strength and confidence in being female to counterbalance the cross-gender solution. (p.263 - 264)

HOMOSEXUALITY IN ADOLESCENT WOMEN


The following are direct quotations from the source:
CASE EXAMPLE: Helen 17-year-old female ... was brought for assessment by her aunt, to whom she had indicated her wish to change sex... She was concerned about her parents' conflict and felt a need to look after her mother, who was frequently depressed. At about age 12, she
began to feel that she was different from other girls. .. at age 15, .. she became involved in a lesbian relation... following a suicide attempt after a breakup with a girlfriend who had discovered that Helen was not male. She was referred to the adult gender identity clinic, as she insisted that the solution was sex reassignment surgery. (p.312)

Stella, a 16-year-old female, was referred by her youth group therapist when she revealed that she felt she was a boy and was interested in sex reassignment surgery. She had begun treatment with the referring therapist following several suicide attempts...

She became involved in the drug culture and was sexually involved with a girl, to whom she introduced herself as a male with a congenitally absent penis. She liked to be identified as male and would get upset when her maleness was challenged. ..Stella was very negative about her mother, whom she perceived as "wimpish." ... she... went on to sex reassignment.(p.313)

Sunny, an 19-year-old female... had grown up in a family with an abusive alcoholic stepfather, who (in her view) had treated her differently from either her older brother or younger sister. Her stepfather, a karate instructor, had hit her on several occasions, having told her to remain still while purportedly demonstrating moves to her. Furthermore, he had touched her on the breasts and genitals and indicated that he would take her to a motel room, take off her clothes, and show her the vulnerable spots to hit someone... Sunny had been involved in several lesbian relationships.(p.341)

Leslie, a 16-year old female ... had grown up in family marred by parental discord. She viewed her mother as weak because of her inability to deal with her husband's unfaithfulness and chronic work difficulties. .. there was no early history of cross-gender behavior... Leslie was able to recognize that her concern about homosexual feelings became more intense when she was feeling inadequate or depressed. (p.342)

CLINICAL MANAGEMENT: ... The female adolescent presenting with homosexual concerns is more typically involved in an intense romantic attachment to an older and admired female. There may or may not be homosexual behavior. Such adolescents often have felt less competent than female peers in feminine activities or have experienced conflict with parents, either of which may have cause self-esteem difficulties. They are particularly vulnerable to developing idealizing relationships with older females (p.353)

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REVIEW OF LITERATURE


The following are direct quotations from the source:

FEMALE HOMOSEXUALITY:

PRE-1977 FINDINGS: ... The pre-1977 data based on questionnaire responses collected in six studies did, as hypothesized, support the view that the "female homosexual thinks of her father as an unfriendly, unpleasant person who had little to offer by way of a relationship." (p.140)

POST-1977: Since 1977, Fisher (1989) has pulled together a total of 18 studies. .. 11 of the 18 studies pictured the homosexual women as feeling that father was negative or distant or
frustrating; 6 studies did not; and 1 study presented data too vague to be meaningful
Both female and male homosexuals apparently felt highly estranged from their fathers.(p. 141)

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REVIEW OF LITERATURE ON GID IN WOMEN


The following are direct quotations from the source:
PSYCHOSOCIAL STUDIES: ... Girls with GID ... have difficulty connecting with their mothers, who are perceived as weak and ineffective. We see this perception as arising from the high levels of psychopathology observed in these mothers, especially severe depression and borderline personality disorder. (p.877)

Fathers of girls with GID are often perceived as aggressive and threatening to their wives, and many of these girls report dreams and fantasies of protecting their mothers from aggressive figures. In our female adolescents with GID, a history of sexual abuse or fears of sexual aggression has appeared commonly. This is consistent with reports of physical and sexual abuse in female-to-male transsexuals (Devor 1994) and with a report by Cosentino et al. (1993) of more masculine behavior in a sample of sexually abused girls. (p.878)

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BIBLIOGRAPHICAL MATERIAL


The following are direct quotations from the source:
Friendly and eager, Heche spoke with a determination that seems to have sprung from her surviving a strange and difficult childhood. She grew up poor, mostly in Ohio and southern New Jersey. Her father, Donald was, in Heche's words, "a split personality, schizophrenic," who barely eked out a living as a church organist. A gay man who never revealed his homosexuality, he died of AIDS in 1983, when she was 12...

"We never told the truth in our family -- never told the truth about one thing," said Heche. "We were poor, but we said we were rich. We were falling apart, but we said we were good Christians. We had a father who lived a double life, but we pretended that we were absolutely fine. We lived on the streets but said we didn't. Everything we did was a lie. Denial, denial, denial."

Before meeting DeGeneres at Vanity Fair's post-Academy Awards party at Morton's two years ago, Heche had been in extended relationships with several men -- including Steve Martin,
for about two years. She said that as soon as she met DeGeneres, whom she had not watched much on television, she was almost blinded with love. "I just knew bliss at that moment," she said.