

A Freudian Reading of Homosexuality as a Social Crime and Its Therapy

DOI: 10.22098/JPC.2026.18197.1342

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Abstract

Aim: The paper investigates the historical positioning of male homosexuality within psychoanalysis and its influence on the development of modern talking therapies. It aims to explore how homosexuality has been interpreted—either as an illness requiring treatment or as an identity to be affirmed—through the lens of Freudian theory and its later adaptations. The study begins with an interpretation of Freud’s psychogenesis of homosexuality. It then analyzes the perspectives of three American psychoanalysts who reinterpreted Freud’s Oedipus complex to support the view of homosexuality as a curable illness. A case study of reparative therapy is reexamined to illustrate these therapeutic approaches. The research critically evaluates Richard Isay’s progressive stance on homosexuality. Finally, it introduces gay affirmative therapy as a contrasting model that promotes acceptance of homosexual identity. **Results, Discussion, Conclusion:** The American analysts viewed male homosexuality as a pathological condition and sought to convert homosexual patients to heterosexuality through psychoanalysis. Reparative therapy is presented as a method aligned with this curative approach. In contrast, Richard Isay’s work and gay affirmative therapy advocate for the validation and acceptance of homosexual identity. Freud’s conclusion that sexual orientation stems from the resolution of the Oedipus complex serves as a pivotal reference point in evaluating both therapeutic models. The paper discusses the implications of framing homosexuality as either a social crime or a psychological illness, and how these framings influence legal and therapeutic responses. It critically examines the ethical and theoretical foundations of reparative therapy versus affirmative therapy. Freud’s theories are used to contextualize the evolution of psychoanalytic thought on homosexuality and to highlight the divergence in therapeutic goals. The study concludes that the interpretation of homosexuality within psychoanalysis has significantly shaped therapeutic practices. While some analysts have pathologized homosexuality, leading to controversial treatments like reparative therapy, others—like Richard Isay—have championed approaches that affirm and support homosexual identity. The paper underscores the importance of understanding these historical and theoretical shifts to inform contemporary therapeutic ethics and practice.

Keywords: Homosexuality, Freud, Crime, Therapy, Psychoanalysis

Introduction

Homosexuality is considered one of the most serious crimes in the Iranian legal system and has its own definition and punishment under Islamic law, especially in Shiite jurisprudence. According to Article 231 of the Islamic Penal Code, homosexuality refers to sexual intercourse between two adult men, which is considered immoral and illegal in Islamic law. According to existing laws, homosexuality can include penetrative sexual intercourse and is defined under certain conditions. To prove the crime of homosexuality, there must be sufficient evidence, including the confession of the accused or the testimony of witnesses. In Iranian law, there are also specific conditions for considering the testimony of witnesses that must be met in order for the charge to be legally established. The punishments associated with the crime of homosexuality in the Islamic Penal Code vary depending on the circumstances and type of crime. According to Article 232 of this law, the initial punishment for the perpetrator of this crime is execution in certain cases and imprisonment in other cases. Also, if the perpetrator uses violence or threats during the commission of the crime, he will face a harsher punishment. Hence, it is essential for all members of society to be aware of the laws related to the crime of homosexuality and the penalties associated with it. If you or someone you know has been confronted with this issue, it is recommended that you consult with a lawyer specializing in criminal matters to properly understand your rights and to benefit from legal advice if needed. Given the legal and social consequences of the crime of homosexuality, it is essential that individuals in society are sensitive and aware of these issues and take steps to promote a culture of human rights and respect for the rights of others.

The perception of male homosexuality as a pathological condition that can be cured, or the association of it with femininity, are key elements in how numerous scholars have interpreted homosexuality throughout the nineteenth and twentieth centuries. Starting in 1885, homosexuality was also deemed a criminal act in the UK, as the ‘Criminal Law Amendment Act of 1885 rendered all forms of male homosexuality illegal [...]’ (Weeks, 2000, p. 166) Numerous discussions occurred during the twentieth century, which bolstered the status of homosexuals in society. Weeks characterized these developments as stemming from ‘the emergence of strong and vibrant lesbian and gay identities, which have challenged the heterosexual norm [...]’ (Weeks, 2000, p. 166).

The exploration of sexuality traces its roots back to the late nineteenth and early twentieth centuries. Discussions surrounding sexuality emerged across various professional fields, particularly in medicine, history, and psychoanalysis. Laplanche & Pontalis (1973, p. 418) characterize sexuality as a multifaceted subject, indicating that sexuality encompasses not only the activities and pleasures associated with the functioning of the genital apparatus but also includes a wide array of excitations and activities observable from infancy onward, which provide a form of pleasure that cannot be sufficiently explained by merely satisfying basic psychological needs.

Freud, the pioneer of psychoanalysis, recognized that sexuality is not static and places both homosexuality and heterosexuality within his theory of infantile sexuality established in 1905. In 1924, Freud’s concept of the Oedipus complex provides deeper understanding regarding the formation of homosexual or heterosexual object choices,

proposing a theory of sexual differences and highlighting the intrinsic instability of sexed subjectivity. Therefore, it is logical to explore the connection between homosexuality and psychoanalysis. The contemporary talking therapies, which will be examined in this thesis, demonstrate that they continue to be shaped by Freud's Oedipus complex theory. Additionally, recent political developments indicate that homosexuality remains a significant issue, not only in societal contexts but also in psychoanalytic discussions. In 2014, legislation was enacted in the UK allowing same-sex couples to marry legally. Furthermore, the 2018 prohibition of conversion/reparative therapy in the UK will reveal not only the unethical nature of such practices but also a departure from psychoanalysis itself.

In 1905, Freud highlighted that degeneracy could not be associated with homosexuality. He supported his stance through his clinical practice. His argument posits that homosexuality can exist in individuals whose efficiency remains intact, which contradicts the notion of degeneracy. Numerous scholars, including Richard von Krafft-Ebing and Albert Moll, believed that homosexuality, rather than being a sign of degeneration, is actually a perversion (Krafft-Ebing, 1886, pp.21-32). However, their perspective was that all sexual activities not directed towards procreation are considered perverse. Freud concurred with this notion and elaborates on his understanding of perversion through his concept of infantile sexuality, where he asserts that all children are polymorphously perverse. For Freud, it was crucial to stress that the term 'perversity' in 'polymorphous perversity' indicates that all children derive pleasure from various parts of their bodies. This results in the fulfillment of the libido. Freud's idea of polymorphous perversion signifies that pleasure can be experienced through many different body parts. Children will find enjoyment not only in masturbation but also in sucking, stroking, or the retention and release of their feces (Freud, 1905, p.49).

Isay was a prominent psychoanalyst who contested the notion of categorizing homosexuality as a mental illness during the 1990s. Drawing from his personal experiences with homosexuality and his ongoing internal struggles, he was able to assist and guide other homosexuals in refraining from the idea of altering their sexual orientation. Unlike reparative therapists who sought to convert homosexuality into heterosexuality, Isay clearly advocated for the acceptance of one's own homosexuality. He accomplished this by adhering to classical Freudian psychoanalysis while criticizing those who believed that homosexuality should be treated as a disorder. To successfully persuade psychoanalytic scholars that homosexuality is a constitutional trait rather than a pathological condition, he needed to convince the APA (American Psychological Association) to abandon their discriminatory views against homosexuals. In fact, he threatened to initiate legal action against the organization if they continued to uphold their prejudiced stance. (Isay, 1997) His relentless advocacy for the rights of homosexuals was so effective that the APA not only recommended their members cease discrimination against homosexuals, but it was also among the first to propose that homosexuals should have the right to marry. (Drescher, 1998, p. 16) By asserting that homosexuality is constitutional in nature, he distinctly diverges from Freud's perspective, which posits that all children are inherently bisexual and develop either homosexuality or heterosexuality based on their individual responses to the Oedipus complex.

In his own critical reflection on his self-analysis, Isay reveals that despite experiencing homosexual masturbatory fantasies, he was convinced that to gain acceptance for training as a psychiatrist or psychoanalyst, he needed to be heterosexual. (Isay, 1997, p. 14) As a result, he underwent analysis with the hope of altering his sexuality. The methods employed by his analyst aligned with those discussed in chapter two, suggesting that Isay's homosexuality stemmed from family dynamics, and to become heterosexual, one must be inundated with masculinity. Throughout the analysis, Isay recognized that his motivation for remaining in therapy was his transference towards his analyst and the desire to please him.

Isay's role as a gay affirmative therapist was significant as he provided guidance to other therapists on how to conduct themselves during analysis. For example, he believed it was crucial for a therapist to reveal their own homosexuality to their analysands, as this would foster a bond of trust between them. However, disclosing one's sexuality could undermine the concept of the 'blank screen.' This notion will be explored further later in the chapter. Nevertheless, Isay argued that concealing one's homosexuality from patients '...does further damage to his patients' self-esteem [...].' (Isay, 1991, pp. 199-216) Isay also stresses the importance of not steering analysands towards a particular direction or outcome in analysis, which preserves analytic neutrality and allows free association to flourish.

Freud's 1910 essay on Leonardo da Vinci sought to contest the late 19th-century notion that homosexuality was associated with degeneracy and inferior intelligence. By examining Da Vinci's writings and personal experiences, Freud contended that his absence of intimate relationships with women and the "vulture phantasy" served as unconscious signs of homosexual desire (Freud, 1910, pp. 16, 38). Freud's overarching theory of the Oedipus complex redefined homosexuality not as a flaw but as a developmental result. He identified two main resolutions: a heterosexual object choice, where the boy aligns with the father and desires the mother, and a homosexual object choice, where the boy aligns with the mother and seeks affection from the father (Freud, 1924, pp. 174-175; Lewes, 1988, p. 88). Although Freud's perspective was groundbreaking in its rejection of the criminalization of homosexuality, it still categorized it as a deviation from typical development. Lewes (1988, p. 88) critiques Freud's binary framework by proposing twelve potential outcomes of the Oedipus complex, indicating a more sophisticated understanding of sexual development. Modern psychoanalytic thought has progressed beyond Freud's deterministic model. As highlighted in *The Cambridge Companion to Gay and Lesbian Writing*, contemporary psychoanalysis has adopted a more ambivalent and self-reflective stance regarding its approach to homosexuality. While earlier psychoanalytic institutions frequently upheld patriarchal standards, newer frameworks—such as gay affirmative therapy—encourage acceptance and psychological health rather than correction (Cambridge Companion, 2021, p. 42).

Freud's conviction in universal bisexuality and his unwillingness to categorize homosexuality as a disorder established the foundation for these changes. Nevertheless, contemporary theorists highlight the influence of cultural, biological, and social elements in the formation of sexual identity, moving away from Freud's psychosexual determinism (Wikipedia, 2025, p. 3). As Roudinesco points out, Freud's contribution is one of

liberation, yet he was unable to anticipate the complete range of sexual identities that psychoanalysis now aims to comprehend (Pommier, 2023, p. 5).

Method

The current study is a content analysis, logical analysis and library based research and the data are collected through close reading and academic analysis of the related articles and books.

Results

Throughout this research, the examination of the relationship between Freudian psychoanalysis and homosexuality has provided the researcher with a more profound insight into the workings of psychoanalysis. The researcher's exploration of the published case studies highlighted that classical psychoanalysis seeks to alleviate human suffering. A significant aspect of Freudian psychoanalysis is that it serves as an investigation into one's unconscious psychic processes. The methodology employed during analysis is based on transference. The analysts' role involves collaborating closely with the analysand to interpret the unconscious material without adopting a judgmental stance or steering the session in a specific direction.

The research conducted in this study has revealed that the choice of a homosexuality object, according to Freud, is contingent upon the individual's response to the Oedipus complex. Freud's description of the Oedipus complex underscores that everyone undergoes a distinct experience before selecting a man or a woman as an object of affection. The family constellation, which refers to the parents' roles during the son's upbringing, plays a crucial role in influencing the boy's choice of a man or a woman as a love object. Freud emphasized that an absent father and an overly close mother suggest a tendency towards homosexuality. This paper has demonstrated that Freud's theory of the Oedipus complex is not obsolete and remains deeply embedded in contemporary psychoanalysis. All analysts referenced in this research evidently utilized Freud's theory of the Oedipus complex as the cornerstone of their analysis. In the context of gay affirmative therapy, the researcher has observed a more Freudian application of the Oedipus complex, whereas in reparative therapy, Freud's theory emphasizes a social context rather than a psychoanalytic one. Also it became clear that the interpretation of the Oedipus complex by reparative therapists centered on the actual presence or absence of the father. This perspective, however, overlooked a crucial aspect of psychoanalysis: the patient's understanding of unconscious phantasy. A significant finding throughout this paper is the role of transference in reparative therapy. Reparative therapists exhibit a strong commitment to heterosexuality, leading them to anticipate a heterosexual outcome for their male-homosexuality patients. This was also apparent in the case study involving Nicolosi. The unconscious goal of an analysand often revolves around pleasing or

displeasing their analyst, which is influenced by transference. The transference that develops during analytic sessions places analysts in a powerful position. It appears that having a predetermined goal for analysis hinders the analysand's ability to freely associate. This also implies that analysts may overlook critical information due to slips of the tongue while the patient is engaging in free association. In Nicolosi's case study, he approached the analysis with a specific agenda aimed at achieving a heterosexual outcome, which guided his analysand toward that result. Furthermore, the parameters for utilizing transference were also established in advance. A prevalent issue in reparative therapy is the unquestioned approach to masculinity as a treatment method. As demonstrated in Nicolosi's case study from chapter four, the primary focus of analysis in reparative therapy is to reaffirm the analysand's masculine gender identity. To restore masculinity, one must cultivate friendships with heterosexual men and participate in sporting activities. More importantly, the significant point is that reparative therapy was deemed unethical and subsequently prohibited in the UK in 2018. In chapter two, I have emphasized that the APA classified reparative therapy as hazardous and a threat to the well-being of homosexuals. However, gay affirmative therapy cannot be regarded as the optimal treatment method for patients, yet it is still endorsed by the APA.

Discussion

The criminalization of homosexuality in Iran, as outlined in the Islamic Penal Code, illustrates a deeply rooted legal and religious system that perceives same-sex relationships as immoral and subject to legal penalties. Article 231 characterizes homosexuality as penetrative sexual acts between adult males, while Article 232 stipulates punishments that can range from imprisonment to execution, contingent on factors such as the presence of violence or coercion (Islamic Penal Code, 2013, Arts. 231–232). This legal perspective is grounded in Shiite jurisprudence, which regards homosexuality as a breach of divine law. The necessity for evidence—either through confession or witness accounts—further emphasizes the strictness and harshness of the legal framework. These regulations not only criminalize sexual conduct but also perpetuate societal stigma, highlighting the urgent need for awareness and advocacy for human rights.

Historically, homosexuality has been viewed as a pathology within both legal and medical narratives. In the UK, the Criminal Law Amendment Act of 1885 made all forms of male homosexuality illegal, framing it as both a moral and criminal transgression (Weeks, 2000, p. 166). This legal oppression was echoed in early psychoanalytic and medical theories that classified homosexuality as a perversion or a developmental shortcoming. For example, Krafft-Ebing labeled homosexuality as a perversion due to its deviation from procreative sexual standards (Krafft-Ebing, 1886, pp. 21–32). Freud, while also considering non-procreative sexual behaviors as perverse, offered a more

complex perspective through his theory of infantile sexuality. He posited that all children are “polymorphously perverse,” finding pleasure in various bodily functions such as sucking, stroking, and defecation (Freud, 1905, p. 49). This conceptualization enabled Freud to separate homosexuality from notions of degeneracy, asserting that homosexual individuals could be entirely functional and intellectually competent (Freud, 1910, pp. 16, 38).

Freud’s theory of the Oedipus complex redefined homosexuality as a developmental outcome instead of a pathological condition. He introduced two object choices: heterosexuality, where the boy identifies with his father and desires his mother, and homosexuality, where the boy identifies with his mother and seeks affection from his father (Freud, 1924, pp. 174–175). Lewes (1988, p. 88) critiques this binary framework, proposing twelve potential outcomes of the Oedipus complex, thus providing a more nuanced and inclusive perspective on sexual development. Contemporary psychoanalysis has continued to progress, especially through Richard Isay’s contributions. In the 1990s, Isay contested the classification of homosexuality as a mental disorder, drawing from his personal experiences and clinical work. He promoted gay affirmative therapy, which focuses on acceptance rather than conversion. Isay’s challenges to the American Psychological Association (APA), including threats of legal action, resulted in significant policy shifts, such as the APA’s support for same-sex marriage rights and the disavowal of reparative therapy (Isay, 1997; Drescher, 1998, p. 16). Isay’s perspective diverged from Freud’s bisexual developmental model by asserting that homosexuality is an inherent trait, not a deviation.

Richard Isay’s impact on psychoanalysis and LGBTQ+ advocacy during the late twentieth century represented a crucial transformation in the field’s comprehension of homosexuality. Educated in classical Freudian psychoanalysis, Isay contested the dominant belief that homosexuality was a mental illness, a view that was deeply rooted in psychoanalytic and psychiatric communities for much of the twentieth century (Isay, 1997). His personal experiences—characterized by inner turmoil and efforts to change his sexual orientation—offered a distinctive perspective from which he evaluated reparative therapies and their harmful consequences. Isay’s assertion that homosexuality is an inherent trait, rather than a pathological anomaly, stood in stark contrast to Freud’s assertion that all children are inherently bisexual and that sexual orientation develops through the resolution of the Oedipus complex (Wagner, 2018, p. 45).

Isay’s advocacy went beyond mere theoretical analysis; he actively pursued institutional change. His threat of legal action against the American Psychoanalytic Association (APsA) triggered a significant policy transformation, prompting the organization to condemn discrimination against homosexuals and ultimately endorse same-sex marriage rights (Isay, 1997; Drescher, 1998, p. 16). This action was not just

symbolic—it redefined the ethical obligations of psychoanalysts and therapists who work with LGBTQ+ clients. Isay's contributions, especially in works such as *Being Homosexual and Becoming Gay*, highlighted the psychological damage caused by societal and professional homophobia, and he championed therapeutic approaches that affirm rather than repress sexual identity (Isay, 1989; Isay, 1997).

His introspections regarding his own analysis highlight the coercive characteristics of psychoanalytic standards during that era. Although he had homosexual fantasies, Isay felt compelled to conform to heterosexuality to achieve professional acceptance, which led him to seek therapy aimed at altering his sexual orientation (Isay, 1997, p. 14). He later came to understand that his ongoing involvement in therapy was influenced by transference and a wish to satisfy his analyst—an understanding that emphasizes the ethical dilemmas inherent in psychoanalytic relationships and the risk of authority misuse. As a gay affirmative therapist, Isay advocated for therapists to reveal their own homosexuality to build trust and alleviate shame among homosexual analysands. This position challenges the conventional Freudian view of the therapist as a 'blank screen,' as Isay contended that hiding one's identity fosters internalized homophobia and undermines self-esteem (Isay, 1991, pp. 199–216). He also stressed the necessity of preserving analytic neutrality, warning against guiding patients toward specific outcomes—a principle that upholds the integrity of free association and encourages genuine self-exploration.

Sigmund Freud's 1910 essay, "Leonardo da Vinci and a Memory of His Childhood," marks a significant turning point in the psychoanalytic discussion surrounding homosexuality. In this piece, Freud contests the dominant late 19th-century notion that equated homosexuality with degeneracy and intellectual inferiority. By conducting a psychoanalytic analysis of Leonardo's writings and the so-called 'vulture phantasy,' Freud interprets the lack of heterosexual relationships in Leonardo's life as indicative of repressed homosexual desire (Freud, 1910, pp. 16, 38). This interpretation is consistent with Freud's broader theory of the Oedipus complex, which reconceptualizes homosexuality not as a moral failing but as a developmental outcome. Freud posits that the resolution of the Oedipus complex can result in either a heterosexual object choice—where the boy identifies with the father and desires the mother—or a homosexual object choice—where the boy identifies with the mother and seeks affection from the father (Freud, 1924, pp. 174–175; Lewes, 1988, p. 88). Although Freud's decision not to criminalize homosexuality was progressive for his era, his framework still pathologized it as a deviation from normative development. Lewes (1988) critiques this binary model, suggesting twelve potential outcomes of the Oedipus complex, thus providing a more nuanced and inclusive perspective on sexual development (p. 88). This expansion signifies a broader transformation in psychoanalytic thought, which has increasingly

distanced itself from Freud's psychosexual determinism. As highlighted in *The Cambridge Companion to Gay and Lesbian Writing*, contemporary psychoanalysis has adopted a more ambivalent and reflective approach, acknowledging the limitations of earlier patriarchal models and embracing therapeutic methods that affirm rather than correct sexual identity (Cambridge Companion, 2021, p. 42).

Conclusion

This study concludes that both gay affirmative and reparative therapy function in a comparable manner. Although the analysts discussed in this paper assert adherence to Freudian psychoanalysis, they actually diverge from his psychoanalytic principles and methodologies. Freud's understanding of conducting analysis, as demonstrated in this paper, was to provide analysands with analysis without a predetermined agenda or expected outcome. As highlighted in earlier chapters, Freud stressed that psychoanalysis is effective only when the analyst sets aside their own views and objectives, working in the best interest of the analysand by collaborating '...hand in hand...' (Freud, 1920, p. 150) with patients to address their internal conflicts. Straying from this method is '...unfavourable for psychoanalysis and adds fresh difficulties [...]' (Freud, 1920, p. 150) Freud recognized, as early as 1920, how psychoanalysis could yield the most favorable results in practice, yet this was evidently overlooked by both reparative and gay affirmative therapists. Consequently, it seems that the act of homosexuality is an illness instead of being a crime and it is better to prevent it through psychological and psychoanalytical ways and or cure it via applicable medical and psychological ways and even by some ethical and transcendental issues.

Disclosure Statements

I hereby certify that, to the best of my knowledge, no aspect of my current personal or professional circumstance places me in the position of having a conflict of interest with this presentation.

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