

# Are Homosexuals Sick?

Gareth Moore OP

Recently in the Church a particular way of talking about homosexuals has become popular. Talk of perversion, sins against nature, and so on, has been less to the fore, giving way to a quasi-medical vocabulary, and a way of talking about gay<sup>1</sup> people has developed which is more consonant with modern thinking. Now they are not so much wicked as sick; they suffer from something called 'the homosexual condition'. It is not so much that they commit horrible and disgusting sins as that, unfortunately and through no fault of their own, they have a tendency or disposition to perform such acts. It is still a morally bad thing if they actually give way to this tendency, but it is not sinful that they have it; it is like a tumour in their moral insides. Thus homosexuality was described as a 'condition' in the 1975 Vatican *Declaration on Sexual Ethics*:

A distinction is drawn ... between homosexuals whose tendency is ... transitory or at least not incurable: and homosexuals who are definitively such because of some kind of innate instinct or a pathological constitution judged to be incurable.<sup>2</sup>

There are many kinds of condition; we speak of social conditions, economic conditions, conditions of hygiene, and so on. But here it is the medical condition that is being taken as a model for homosexuality. That is clear from the reference to possibilities of cure and to 'pathological constitution'.

This kind of language was taken up in the Ratzinger letter of 1986. It says:

In the discussion which followed the publication of the Declaration, however, an overly benign interpretation was given to the homosexual condition itself, some going so far as to call it neutral, or even good. Although the particular inclination of the homosexual person is not a sin, it is a more or less strong tendency ordered toward an intrinsic moral evil; and thus the inclination itself must be seen as an objective disorder. Therefore special concern and pastoral attention should be directed towards those who have this condition, lest they be led to believe that the living out of this orientation in homosexual activity is a morally acceptable option. It is not.<sup>3</sup>

Once again, reference to 'those who have this condition' makes it clear

that a medical model is being followed, albeit one with moral overtones.

There can be no doubt that the motives behind the introduction of this kind of language are good. First, it enables a clear distinction to be drawn between homosexual acts and homosexual tendencies. This relieves people of any burden of guilt for having homosexual tendencies (provided that they have not brought them upon themselves). If having these tendencies is properly thought of as analogous to a medical condition, like a tendency to come out in spots or develop fevers, then you are not blameworthy for having them, any more than you are for having malaria. People who have homosexuality are not therefore to be persecuted or belittled, either by themselves or by others. Neither are they to be marginalised, but accepted fully and lovingly into the community of the Church. Secondly, the change seeks to move attitudes away from condemnation towards understanding even of people who actually perform homosexual acts. While official Church teaching remains clear that such acts are morally unacceptable and objectively wrong, they can now be seen not as a sign of wilful perversion or depravity but as the expression or symptom of a condition. An active homosexual is a sufferer, one to be understood and cared for. Hence the pastoral concern of the 1975 Vatican Declaration. And the English Catholic Social Welfare Commission's document of a few years ago<sup>4</sup> and the Ratzinger letter both describe themselves as being concerned with pastoral care.

There is good in this. But it does not work. Talk of homosexuality as a condition will not lead to the integration of homosexuals into the Church. Neither is it plausible in itself.

Whatever the intention, to call somebody sick is an effective way of excluding them from integration in the normal social pattern. To be sick is unnatural, it is to be abnormal, and the abnormal has no place in the scheme of things<sup>5</sup>; it is rather a disturbance in the scheme of things which has to be remedied so that order may be restored. In earlier centuries the disturbance to sexual morality was sometimes remedied by the death of the offender; today the attempt is to cure it. The more modern reaction is certainly preferable, but in either case there is a rejection of the person in question from a proper place in society. It is fairly obvious that you are rejecting him if you kill him, but also if you call him 'sick' you are saying that he is abnormal—by definition; to say he is sick is to say that a normal, 'healthy' person could not act like that. And the healthy, the normal, is central; the abnormal, the sick is the marginal.

We should note too that, though 'sick' is not normally in medical circles a term of abuse, it often is elsewhere. To speak of somebody as sick is often to express extreme repugnance at their behaviour, again with the implication that the normal, the healthy, the moderately good, could not do that. Speaking of homosexuality as a condition gives a sanction to referring to gay people as 'sick', where this is a term of abuse; 'They're

all sick' might be said (indeed is said) in a contemptuous tone of voice. Gay people can then readily be seen as infectious, or as an illness of the social body, to be spurned or even suppressed as a matter of hygiene. The medicalisation of sex gives a spurious legitimacy to such abusive talk and action, which are so fundamentally opposed to the spirit of the Christian gospel.

Now what about this idea of a disease called homosexuality? The first thing to note is that it is incompatible with traditional theology, in particular its moral stance and stress on human freedom. Earlier I quoted the Ratzinger letter saying that 'although the particular inclination of the homosexual person is not a sin, it is a more or less strong tendency ordered toward an intrinsic moral evil', and I noted the mixing of moral and medical terminology here. It is a strange mix, and cannot be sustained. The moral approach to human behaviour requires rejecting the medical model. One way to show this is to look at the use of the word 'tendency'.

At one point the Ratzinger letter rightly resists the general thesis that gay people cannot help it if they 'behave in a homosexual fashion' (n. 11). We can all in general help our sexual behaviour, just as we can help the rest of our behaviour; that is part of human freedom and is essential to the Christian vision. If people have tendencies towards homosexual behaviour, that means that they have urges in that direction, and they can, in general, resist them if they have a strong enough reason to, just as people with tendencies towards heterosexual behaviour can.

But tendencies associated with medical conditions are different. A man with malaria tends to vomit. That does not mean that he has an inclination, an urge to vomit that he might resist. To say that people with malaria tend to vomit is to say, not that they have an urge to vomit, but that by and large they do vomit; that is one of the signs that you have this condition. They are not free not to vomit. To speak of homosexuality as a condition is to imply that it is correct to talk of homosexual tendencies as quasi-medical ones, ones which gay people are not free to avoid, the very position that Ratzinger is rightly denying in n. 11. But the denial means that homosexuality cannot be thought of as a condition.

There is a difficulty about the notion of a homosexual condition that goes beyond its incompatibility with Christian moral thought: we have no reason to suspect that there is any such condition. When we speak of something as a sickness we normally imply that it is distressing in some measure; it is *suffered*. Malaria is an illness because it is very unpleasant to have it and it can kill you. It is not just a matter of the presence of the malaria virus. If the presence of the virus had no ill effects, we would not say that somebody with the virus was sick. Part of its being distressing is that the one who has the sickness would normally be without it if he could be, and this because of the bodily or mental unpleasantness it causes.

At this point we have to distinguish the unpleasantness caused by the illness itself and the distress caused by other people's reaction to it. Somebody who suffers from a sexually transmitted disease like syphilis may also suffer rejection by family and friends and general condemnation from those around him. But such rejection is not part of the disease itself; he could suffer the identical disease without suffering the rejection. The suffering caused by the rejection is social in origin, not a symptom of the disease but a social consequence of having it. Other people's reactions may also be internalised; a man may be led to condemn himself if he contracts such a disease. But syphilis is not called a disease because of any rejection or self-rejection that may be consequent on catching it.

A gay person's suffering, if he or she suffers, is not like the suffering which is due to any illness or other medical condition. It is possible to be quite happy and a homosexual. Homosexuality is not like malaria; it is not unpleasant just to 'have' it. It does not make you come out in boils or give you a fever, and it does not kill you<sup>6</sup>. Any suffering involved in being gay is a matter of other people's reactions and general social attitudes, which may or may not be internalised. Of course, if a gay man does reject himself because of his homosexuality, there is something internal about this; he carries his condemnation around with him, he is never going to be happy and may well wish he was not gay. This can, if you like, be regarded as a condition, a sickness. But then his condition is his tendency to reject himself, his inability to accept himself; it is not his homosexuality.

The fact is that, if I am a gay man, my homosexuality does not of itself cause me distress; but it may distress *other* people, and then it is they who call it a disease. And their distress is not sympathetic distress, distress at the fact that I am distressed. It is not the sympathetic response that might be called forth by my suffering from malaria. In fact, it is not what would normally be called distress at all, but plain hostility. The Vatican Declaration talks of the 'personal difficulty' of many homosexuals. But it is other people and their hostility who are the personal difficulty of many homosexuals. The Ratzinger letter rightly commends gay people to the pastoral care of bishops, priests and the laity<sup>7</sup>, but one reason among others why they might need this care is because of the hostility shown them in word and deed by bishops, priests and laity, as well as by people outside the Church.

In short, however laudable the intentions of recent Church statements on this subject, all this talk of the 'homosexual condition' turns out to be just another way of expressing and legitimising hostility to gay people, more subtle no doubt than burning them, and greatly preferable, but none the less anti-Christian. I do not want to pretend that all is always well with gay people. Of course there are obvious reasons why you would not expect gays, especially gay Catholics, to be as happy

as others. But that has nothing to do with any condition they might be suffering from. It is because it takes courage and a lot of belief in yourself to be happy when you are told, or it is intimated to you constantly, that you are an outsider, defective, perverted, laughable, or a sufferer from a condition. It is not surprising that people in that condition sometimes end up frightened, miserable and bitter and that some even kill themselves. But, to repeat, what they are suffering from is not homosexuality but inhumanity.

- 1     Though it is controversial, I follow the practice of using the word 'gay' to refer to homosexual people of either sex. This is not meant to give offence to lesbians.
- 2     n. 8.
- 3     Congregation for the Doctrine of the Faith;: *Letter to the Bishops of the Catholic Church on the Pastoral Care of Homosexual Persons*, n. 3.
- 4     *An Introduction to the Pastoral Care of Homosexual People*.
- 5     The Vatican *Declaration* neatly refers to gays as 'those who suffer from this anomaly' (n. 8). This is of course an admission that what the gay person suffers from is no condition; he or she suffers from being different.
- 6     Ratzinger does see homosexuality as mortally dangerous to those who have got it. He speaks of the self-denial of gay people as something 'which will save them from a way of life which constantly threatens to destroy them' (n. 12). But notice that it is not now a disease, a condition, that is supposed to threaten to destroy them, but a way of life. A way of life is not akin to a condition. Here we are back with moral talk, and have veered away from the incompatible medical model.
- 7     nn. 13, 15.

## **Civil Disobedience: A Sign for Jonah**

**Barbara Eggleston  
and  
Richard Finn OP**

*The authors were tried on 9 January at Banbury Magistrates Court for alleged offences committed during a CND demonstration at a base where nuclear-armed bombers are on constant alert. Though they were fined for trespass and breaking a by-law, they were found not guilty of criminal damage. Brother Richard's counsel, Dr John Finnis, Praelector in Jurisprudence in Oxford University, had submitted (substantially on case law) that they had 'lawful excuse' for their*