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SECURITY IMPLICATIONS OF POLYGRAPH-DERIVED HOMOSEXUAL FANTASIES

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Adult homosexual activity is an issue of primary co

Adult homosexual activity is an issue of primary concern to the Office of Security. Evidence of such activity is considered adequate basis for summary dismissal from Agency employment or for disqualification from consideration for such a position. It has long been held that homosexuality not only constitutes a condition of vulnerability to blackmail, and thus a significant security risk, but also indicates a degree of character defect (i.e. unsuitability) statistically incompatible with the likelihood of the successful completion of an Agency career. Therefore, information on post-adolescent homosexual activity has been rigorously sought, carefully reported, and seriously considered by the Office of Security.

Recently, however, polygraph interviewers have elicited, from an increasing number of subjects, reports of post-adolescent homosexual fantasies in the absence of actual homosexual activity. The reason for this apparent increase is obscure, especially in light of the current bio-socio-behavioral trend in American psychological thinking, which obviates focus on the dynamic unconscious, psychical structure, and fantasy, in favor of a primary emphasis on behavior, i.e. activity. It is especially significant then, that at such a time as this, our polygraph operators have developed the remarkable if unpopular sophistication to inquire about the presence of fantasies in the absence of overt behavior, and to recognize the inherent significance to those fantasies when reported.

The next step is far more difficult, however, since it centers around a determination of just what significance is to be attributed to those fantasies and their vicissitudes, and just how far the polygraph operator should pursue them. For example, is it helpful to ascertain such dimensions as their frequency, intensity, diversity, specific content, exclusivity, occurrence in dreams, or association with sexual stimulation? That is, does an occasional such fantasy have implications different from the frequent and regular occurrence of such mental content? Are fleeting fantasies as important as those more deliberate and intense? Is a repetitive fantasy to be considered differently from fantasies that contain varying content? Are subjects whose fantasies are exclusively homosexual to be thought of differently from those who report heterosexual fantasies as well? What about specific content of homosexual fantasies? Is the usual and ordinary of different significance from the unusual, the idiosyncratic, or the frankly bizarre? And what of fantasies that occur in the sleeping state called dreams? How do we think of them? Or

of masturbation?

As we consider these issues we stand at the interface between the disciplines of security and psychiatry. Because of the complexity of such fantasies, it would be far beyond the scope of this paper to provide specific rules or even firm guidelines for the disposition of applicants who report them. It is rather my intention to present a perspective from which these phenomena may be viewed and considered, and which may ultimately lead to an interdisciplinary formulation of firmer criteria for disposition. But I would emphasize here that the presence of homosexual fantasies alone, absent other considerations, bears no regular or specific prognostic significance with regard to future adult homosexual activity.

I propose to address these fantasies from the perspective of my own training, thinking, teaching, and practice, that of the psychodynamic or psychoanalytically-oriented psychiatrist. From this point of view, it may be useful to clarify that each of us is born with the potential for bisexuality; that the primitive sexuality of the very young child is amorphous, unfocused and nonspecific, lacking preference for any particular sexual object, aim, or gender (i.e. that it is appropriately described as polymorphous-perverse); and that sexuality becomes focused and refined pari passu with the development and definition of other psychical and emotional components of the self.

Further, gender identity and sexual preference are formed and all but fully established in early childhood, and are influenced by a number of diverse factors, including genetic predisposition, social expectation, the availability of appropriate role models, and the quality of early relationships with both the parent of the same sex and the parent of the opposite sex. Various experiences, occurring at times of developmental vulnerability, such as traumatic separations, illnesses, surgical procedures, the birth of a sibling, or actual seduction, especially by an adult or older sibling with whom a loving relationship has been established, may affect their stability.

It is the major maturational task of adolescence, however, to establish with finality the dominance of a heterosexual orientation over a homosexual preference. Among the major stressors of the teen years is the intensification of sexual and aggressive urges in association with increasing levels of circulating hormones which begins in prepuberty. This heightening creates a physiological disequilibrium, as part of normal adolescent development, between the newly intensified hormonally-influenced urges, and the ability of the integrative and synthetic capacities of the mental apparatus to deal with them. The duration of the process of establishing a new equilibrium is subject to considerable individual variation and it may not necessarily be fully resolved by any specific age, although societal norms and expectations generally con-

sider either 18 or 21 as the age of adult responsibility. It is presumably in cognizance of these factors (in addition to regard for legal considerations) that OS inquires about adult homosexual activity and polygraph operators do not consider adolescent activity (i.e. below the age of 18) reportable to Clearance Division.

The adolescent struggle against the homosexual component of bisexual endowment may be incomplete, or may leave significant residues in its wake. "Latent homosexuality," according to one author (Eidelberg), "can be detected in all normal people, the result, (as Freud noted), of a struggle between two rival trends. In short, every human being is bisexual; a male individual represses his female sexual needs, a woman, her male desires. As a result, most individuals have unconscious or latent homosexual wishes. Because they are latent they do not interfere with the individual's normal heterosexual functions."

At this point we may feel left in some even greater confusion about the significance of homosexual fantasies, not only in the later phases of adolescence and early adulthood, but throughout adult life - until we recognize two fundamental facts: One, that the polygraph does not respond to homosexuality per se, but rather to physiological evidence of unresolved conflict in the area of homosexuality, that is, to some degree of incompleteness in the adolescent resolution of the normal bisexual struggle; and, Two, that in addition to evidence of adult homosexual activity, it is equally appropriate for the Office of Security to concern itself with the potential for such activity in the future. Clearly the evidence of conflict, signifying the incomplete resolution of internal struggle, raises the index of concern about the potential eruption of an impulse in the future. And, because of the complexities of the issues involved, it should probably flag the subject for particularly careful and thorough psychiatric interview.

The value to the interviewing psychiatrist of the data which prompt the interview is inestimable. Because of the highly charged and exquisitely embarrassing nature of these polygraph-derived revelations, they are otherwise likely to be kept from the psychiatric interviewer who might himself, if unprepared, treat them so gingerly as to miss them entirely. Neither the polygrapher nor the psychiatric interviewer should be dissuaded by the frequent attitude of subjects struggling with unresolved sexual conflicts who regard homosexual activity with moral indignation, scorn, repulsion, or outrage. These responses, in fact, generally confirm the physiologic evidence of such conflict, and often represent desperate efforts to support the consciously-favored side of the unconscious struggle. Contrariwise, subjects who have resolved these internal issues to a major extent are far more likely to respond to questions in these areas with greater comfort and tolerance. Since their heterosexual dominance is

essentially autonomous, the issue is no longer so highly charged; their residual homosexual urges are of manageable proportions and they may remain repressed with a minimal expenditure of psychical energy.

To clarify and elucidate some of the diverse issues presented by subjects who acknowledge these homosexual fantasies, I shall describe four cases which highlight different aspects of the problem. The first, Miss A, is described in greatest detail; although somewhat atypical, she illuminates many of the issues which invite our attention. Not only did she require the most difficult psychiatric judgment call I have faced, but since I was the interviewing psychiatrist, and she a particularly forthcoming and open subject, we may use the interview to provide an almost-first-hand account of our interchange and my thinking. Although my conclusion may be open to question, the presentation can provide some sense of what may be expected from a psychiatric interview.

Miss A, recently hired and about to enter on duty, was a strikingly attractive, tall, tan, blonde young woman of 23 with the appearance and demeanor of a woman athlete. Pleasant and cooperative, although rather emotionally immature, she came to interview because of persistent ruminations about the possibility of becoming homosexual in the next two or three years. She wondered if she would have to give up her life and her job and wanted to be sure, before she came on board, that this was the right place for her. She had no confidence that she would not become either homosexual or alcoholic, and stated, "I don't want to hurt myself or my future or the government. It's not just a general lack of confidence in myself. I look forward to coming to work here but I look forward to the future. I don't want to be doing anything that I shouldn't be doing." Recall that her disclaimer of a general lack of self-confidence, offered spontaneously, indicated the presence of that idea at some level in her thoughts.

She went on to discuss an incident that had arisen in her polygraph interview and seemed to stimulate her ruminations and self-doubt. She had recalled an incident five years earler when she was seventeen and a freshman in college. On returning from a weekend party at which she had been drinking, she engaged in a passionate ten-second kiss with her rommate. That had been her only homosexual experience. She had cleared the polygraph on the homosexuality question.

Soon after the polygraph interview, however, she began to wonder why "it had happened." Her use of the passive mode evinced her effort to absolve herself of any responsibility for the event: she wondered why "it had happened" and not why "I kissed her." She had never known any homosexuals until her matriculation at college where "the girl across the hall was a lesbian." Miss A was an active team sport player and knew that some of the girls on the team, and indeed one of the coaches, were homosexual. She was aware of feeling curious

and yet put off by it. As she thought about these things, her self-doubt intensified.

"What if it happens again? And how can I say that it won't? I feel very uncomfortable with the thought that there might be some buried and unwelcome part of me deep down there that is homosexual." She saw no connection between this doubt and her social situation: she had been seeing "one guy for five or six years, on and off, but it wasn't anything hot and heavy not a sexual relationship." She enjoyed the feeling of being turned on by the sight of or social contact with a man and of "having a guy turned on to me."

She reported having some friends who were lesbians and she "felt funny and awkward" knowing what they were thinking when they looked at her "that way." With gentle guidance she was able to describe some of her masturbation fantasies - "of being with a man - calm and happy and relaxed - just being there with him - feeling that we are very much alike - there's calm and total acceptance of him and he of me. Intercourse is the ultimate." The last idea was clearly an afterthought. Her father "never liked sports, yet," she volunteered, "he is a man in every sense of the word." Since she expressed that idea spontaneously, it was clear that the thought had arisen in her mind that perhaps she did not always think of him as being quite so masculine as she had asserted. She went on, "He likes to dust and clean and arrange flowers and I love him for it."

Noting that she was a very attractive woman, I asked if her father had ever encouraged her developing feminity or expressed pride or pleasure in her being a girl or a woman. Her blank face clarified that this was a concept new to her that for whatever reasons he had never told her that she was pretty nor taken any apparent delight in her attractiveness, feminity, or even her outstanding athletic achievements; that is, he gave no encouragement whatsoever to any aspect of her physical self.

Miss A, an immature, perfectionistic young woman with an obsessional character characterized by meticulousness and scrupulosity, gave evidence of conflict in the sexual sphere on the polygraph interview and especially in her intensifying ruminations in the following days. The experience had reawakened the bisexual conflict of adolescence which, at 23, was late in resolving. Her masturbation fantasy indicated that her sexual aim was not really intercourse, the answer which she felt I had expected, but the kind of love that a little girl wants and might get from her daddy - calm and soothing, relaxed and totally accepting.

One can postulate, with some confidence, that her efforts to maintain a gratifying relationship with her father ended when her physical development defined her unequivocally as female, that is, when their bodies could no longer be thought of as

"very much alike." By responding, then, like a little girl and not a feminine big girl or teen-ager or adult, she could regressively retain the only kind of love that she could get from her daddy, the cuddling closeness of the little girl.

The delay in her resolution of adolescent sexual conflict is also partially explained by her father's inability, for his own reasons, to delight in and thereby encourage her feminine sexual development. This made it much more difficult for her to expect and to be confident about her acceptability to other males, something rather unusual in so pretty a woman and far more commonly seen in women who are less attractive.

Miss A's homosexual fantasies are not of sexual experiences but rather of the fear of the eruption of her not-yet-fullyrepressed adolescent homosexual conflict. She recognizes them, at some level, as something unwelcome deep within. Her scrupulosity hounds her to confess her fantasy/doubt and cheats her of confidence and optimism about its resolution. She gives no evidence of perversion, but demonstrates understandable delayed resolution of adolescent conflict. It is doubtful that she will engage in overt adult homosexual acts, a judgment based not only in the foregoing, but also on her remarkable scrupulosity, and the immaturity at 23 which seems to be in the process of dynamic maturational change. I would be far less optimistic if she were 33. A successful heterosexual relationship will facilitate the resolution, but will be difficult, since she is likely to think of herself as a little girl who isn't big enough to accept the adult penis without being harmed by it; a girl who could not possibly function as an adult woman.

Mr. B, a 37 year old married father of four, applied recently for a technical position. He had converted to his wife's strict and moralistic religious group at the time of his marriage. He reported to the interviewing psychiatrist that he had "tried moderate drinking for a brief period" in 1973 and has been "dry" for the past ten years. The drinking coincided with the death of his father from Alzheimer's Disease, after which Mr. B "visited with" a psychologist for a few sessions. Anxious and tense, yet candid with the interviewer, he described an unusual sexual incident which had come up during his polygraph examination: four years ago, presumably at the encouragement of his parents, he had entered a pornographic bookstore where he observed an erect adult penis thrust through a knothole in the wall. He manipulated the penis while masturbating. Mr. B reported no other homosexual activity. When asked, he asserted that he would have none in the future - that it wasn't right for him and that he regarded it as morally wrong. He had cleared the polygraph on the homosexuality question. The psychiatrist withheld disposition, but noted obsessional and schizoid features not considered definitively disqualifying.

Unavailable to the psychiatrist, however, was information

derived by the Office of Security in its pre-polygraph interview which would have ended the psychiatrist's indecision. There, the subject told of enjoying pornographic theaters, finding it especially erotic to see males and females engaging in sexual activity with members of the same sex. He was a frequent buyer of hardcore pornographic literature, deeming such magazines as Playboy and Hustler "softcore." He became sexually aroused about homosexual activity whenever he went into a pornographic bookstore. He described a recurring desire to engage in sexual activity with male prostitutes and knew that they frequented such bookstores. He went "to prove to myself that I can resist the temptation to seek out sexual involvement with another male."

He further revealed that he had begun to question his sexual identity in 1969 as a college undergraduate. He described a lack of masculinity and difficulty dating women. He was concerned about his sexual attraction to a male friend at college; it was for this that he twice sought psychiatric help during college and also for this that he consulted a psychologist in 1973.

Mr. B's case highlights the value of and need for close cooperation between the psychiatric and security personnel involved in assessment. If an evaluating psychiatrist had had access to the information available at that time only to the Office of Security, a recommendation of disqualification would have been forthcoming without equivocation, probably without a psychiatric interview, and certainly without any further additions to the calendar of the Applicant Review Panel.

Mr C and Miss D are typical of recent interviewees who report homosexual fantasies and who are readily disqualified for other reasons, a frequent occurrence. Mr. C, a 33-year-old Ph.D. married for ten years, reported in the pre-polygraph interview dreams of homosexual encounters twice weekly since 1982. The dreams were described in explicit detail and included being beaten while fellatio was being performed on him by males, anal sex, and sexual relations with children. These dreams were more frequent and intense during long periods when sexual access was denied to him by his withholding wife. His background check revealed past drug usage and sales, and a report of unreliability on a previous job. To the interviewing psychiatrist, however, he spoke of financial stress and periodic depression in response to job pressure as factors associated with dreams of sexual contact with "different individuals." He specifically denied that his sexual fantasies included children. He failed to clear the polygraph on the homosexuality question abd was disapproved by the Applicant Review Panel.

Miss D was a 28-year-old single applicant for the Career Training Program whose background included many contacts and much travel in Communist bloc countries, a question about her

suitability for rehiring by a previous Government employer, and a report of her failure to complete a report when previously employed by a university. On the polygraph, she reported current homosexual fantasies and masturbatory fantasies of homosexuality and masochism but no adult homosexual activity. She spoke of sexual excitation associated with seeing female bodies in <u>Playboy</u> and with reading letters to the editor with sadomasochistic content. The polygraph was incomplete on more than one issue on three attempts.

The interviewing psychiatrist noted a history of colitis and adolescent rebellion against her father. She presented as a "nice looking professional woman" who was working for a prestigious "think tank" and simultaneously completing her Ph.D. She was dating and living with a foreign service officer whom she felt she would ultimately marry. She indicated her heterosexuality in relating her cystitis and herpes to intercourse. The psychiatrist cleared her for employment; she was referred to the Applicant Review Panel which disqualified her.

It would have been far more difficult, however, to arrive at appropriate dispositions of these cases on the basis of their homosexual fantasies alone. For Mr. C, the history of drug involvement and of unreliability in a previous job facilitated the process. For Miss D, frequent travel in Communist bloc countries, numerous contacts with nationals of those countries, and questionable performance in two previous jobs were determining. Adult homosexual activity was absent in both subjects. However, both seem to have been interviewed psychiatrically before their polygraph examinations, suggesting the advisability of scheduling the polygraph before the psychiatric interview, if the psychiatrist is to have access to the information developed by the Office of Security.

To the best of my knowledge, to date, each recent applicant who has disclosed the presence of homosexual fantasies in the pre-polygraph interview or during the polygraph examination itself has, for one reason or another, been ultimately disqualified. This may represent appropriate caution and conservatism on the part of assessors, may be due to the presence of other disqualifying elements within the application process, and/or may serve as a stimulus for us to think through the issues and establish, if possible, some consistent and multi-disciplinary guidelines for dealing with such cases. It is clear that the question is complex and that the presence of such fantasies can be determined by a number of factors, requiring consideration of these cases on an individual basis.

The polygraph is a uniquely valuable tool for the elucidation of painful, embarrassing, shameful, or otherwise unwelcome issues that might otherwise not come to light. Because the interviewee knows that his physiological responses may well give away his efforts to conceal them, he is far more likely

to report to the polygrapher such thoughts, memories, feelings, and fantasies. However, because of the exquisite sensitivity of these concerns, he may be particularly likely to withhold them from an unwitting and unprepared psychiatric evaluator, whom he may perceive as judgmental and critical, especially of elements which could be considered perverse.

A problem may arise in the polygraph operator's efforts to press too hard for details of sexual fantasies and practices, including the vicissitudes of the fantasies which I have mentioned above. It would seem, therefore, only reasonable to suggest that he refrain from probing too deeply or too long into the details of these matters, since the result may be long sweaty unproductive hours for both examiner and subject with no resolution, but rather an intensification of the subject's entrenchment and the sense that the examiner may be pursuing these issues in the service of gratifying his own prurient interests and voyeurism.

Potential alienation of the subject may be reduced if the examiner, facing such a situation, were to flag the subject for psychiatric interview, and convey to the psychiatric evaluator, through appropriate channels, the content of his interview and the basis for his concerns. The psychiatrist, then, may invite further elaboration by the subject of the questions in the service of resolving those issues which remain open. Ultimately, he is probably best equipped to assess the prognostic significance of the homosexual fantasy material.

In summary, it may be most useful to respond to the presence of homosexual fantasies in the absence of adult homosexual behavior as a warning indicator of unresolved bisexual conflict which warrants a particularly careful assessment of each case on an individual basis. It is vital that security personnel and psychiatric evaluators have access to the same pool of data. It may be especially valuable, in these cases, for the polygraph interview to precede the psychiatric evaluation. It seems useful to suggest that polygraph operators not probe too deeply or too long in these highly-charged areas lest their motives be questioned. It is likely that closer collaboration between the Office of Security and the Office of Medical Services will provide the most effective means for dealing with this complex problem.

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