Sexual orientation refers to the emotional, romantic, sexual and affectional attraction of an individual to a particular gender. The term orientation is generally used by professionals and researchers in human sexuality, as opposed to earlier formulations such as "sexual preference." In general, human beings have one of three sexual orientations: attraction to individuals of the other gender is described as heterosexual; attraction to individuals of one's own gender is described as homosexual; attraction to either gender is described as bisexual.

Along with biological sex (gender), gender identity (the psychological sense of being female or male) and social sex roles (cultural norms for masculine or feminine behavior), sexual orientation is one of the primary and enduring components of sexual identity. It should be noted that transgenderism—the sense that one's biological sex and gender identity are not congruent—is a separate matter from sexual orientation. It should be further noted that research in recent years has revealed sexuality as much more complex than most lay persons imagine. Even biological sex is not a simple, either-or, male-or-female phenomenon, but exists along a continuum.

Sexual behavior is not always congruent with sexual orientation. That is, persons who are primarily heterosexual may engage in sexual experimentation with someone of the same gender (for example, during adolescence), or may engage in repeated activity when no other outlet is available (e.g., in prison). Similarly, homosexually-oriented persons may engage in heterosexual acts, marry, become parents. In neither case does the behavior define the person's enduring emotional, affectional and sexual attraction.

Sexual orientation is a modern concept. The term "homosexual," for instance, was unknown in ancient times, and was first used in private correspondence in 1868 by Karoly Kertbeny. It first appeared publicly in two anonymous German pamphlets published in 1869 which opposed extending a Prussian anti-sodomy law to all of the German Confederation. The term "heterosexual" is of even more recent origin.

The American Psychiatric Association [1] has, since 1973, regarded sexual orientation as a matter of human variation, not mental illness. The American Psychological Association [2] adopted a similar position in 1975. In both instances, the decisions to declassify homosexuality were based upon research which indicated no differences between heterosexuals and homosexuals in social or emotional problems or in level of functioning. The following is taken from the American Psychological Association statement on homosexuality which was released in July, 1994:

The research on homosexuality is very clear. Homosexuality is neither mental illness nor moral depravity. It is simply the way a minority of our population expresses human love and sexuality. Study after study documents the mental health of gay men and lesbians. Studies of judgment, stability, reliability, and
social and vocational adaptiveness all show that gay men and lesbians function
every bit as well as heterosexuals. Nor is homosexuality a matter of individual
choice. Research suggests that the homosexual orientation is in place very early
in the life cycle, possibly even before birth. It is found in about ten percent of
the population, a figure which is surprisingly constant across cultures,
irrespective of the different moral values and standards of a particular culture.
Contrary to what some imply, the incidence of homosexuality in a population
does not appear to change with new moral codes or social mores. Research
findings suggest that efforts to repair homosexuals are nothing more than social
prejudice garbed in psychological accoutrements.

Some conservative religious groups and some psychoanalysts have continued to attempt to
modify or change individual’s sexual orientation. Some homosexually-oriented persons have
essentially renounced all sexual behavior as a result of such efforts; some are able to function
sexually with someone of the other gender. In no case has research proven that these
interventions have reoriented someone’s sexual orientation from homosexual to heterosexual.[3]

In the last quarter of the 20th century, religious and social conservatives have often voiced
concern that lesbian and gay persons are more likely to sexually abuse children. A study
sexual abuse and found only 2 instances where the perpetrator was identified as gay or lesbian. In
that sample, the child’s risk of being molested by the heterosexual partner of a relative was more
than 100 times as great. This is consistent with statistical reports that more than 98% of sexual
abuse in childhood is perpetrated by male adults upon female children.

The origins of human sexual orientation remain incompletely understood. If there is a consensus
among researchers at present, it is that sexual orientation has its origins in genetics and inborn
hormonal conditions, and possibly life experiences of early childhood. Sexual orientation is not a
choice in the way that the term is customarily used. One does not choose to be heterosexual,
bisexual or gay or lesbian. While sexual orientation often emerges during adolescence, along
with the first sexual feelings, many individuals are aware of their sexual orientation long before
their first sexual experiences—often as early as 3-5 years of age.

Research by Simon LeVay and others have indicated neurochemical and neurophysiological
differences between individuals of different sexual orientations. (It should be noted that most
research has been limited to male subjects.) LeVay, a neuroanatomist at the Salk Institute,
examined the hypothalamus of deceased men and found a difference in size between
heterosexuals and homosexuals, suggesting a biological mechanism involved in sexual
orientation[5]. Studies conducted at Northwestern University and Boston University found that if
one sibling is homosexual, the chance of another sibling being homosexual is as follows:

- 52% for an identical twin
- 22% for a fraternal (non-identical) twin
- 10% for adopted or non-twin genetic siblings.

The results suggest a strong genetic component for sexual orientation[6].
Statistics regarding the numerical distribution of sexual orientations within the population are somewhat inconsistent due to the inherent difficulty in asking individuals to identify information which could subject them to homophobia and prejudice. Various studies have estimated that 3-10% or more of the population in the United States is homosexually-oriented. A common estimate is that 6% of adult males are exclusively homosexually-oriented. Somewhat fewer women than men share a same-gender sexual orientation; estimates are often 3-5% of the female population.[7] Less research and information is available about bisexuality.

What then, finally, can be said about sexual orientation? As research into human sexuality increases our base of knowledge, patterns are emerging:

• Bisexual, homosexual and heterosexual orientations have been found throughout human history and human cultures;
• Sexual orientation appears primarily biogenetic in origin and is discovered rather than chosen;
• Sexual orientation is not a predictor of social or emotional functioning--it is not a mental illness;
• Efforts to alter sexual orientation through behavior therapy, psychoactive drugs, prayer, etc., have not affected primary sexual orientation.

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