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Psychological views vary as to why people are homosexuals. But the one most generally accepted ist that male homosexuality stems from a fixation during early childhood (9 years is the average age for the first contact), and is aggravated if the boy has a weak father (or none) in his upbringing. «A father,» Bowman and Engle say, «should take an important part in training his son and in restraining his instinctual drives. The mother should offer warm care and affection. The boy thus has a man to identify with, and a beloved mother-figure to possess as an ideal.»

Other doctors argue that American methods of child rearing and the question of coeducational training may directly encourage the formation of a homosexual pattern. Some parents and teachers, fearing that boys and girls will get into trouble if they see too much of each other, provide only limited chances for the youngsters to make contact with the opposite sex. Many inherently shy boys and girls find it easier to establish friendships with their own sex, and their homosexuality may be a direct outcome of their own social inadequacies. If homosexual patterns are to be avoided, Drs Bowman and Engle warn, boys and girls must be encouraged to mix with each other and to form early attachments, but sexual interests should not be stimulated before adolescence.

*Harmonic Discontent:* Generally speaking, all psychiatrists agree that the tendency to homosexuality is not inherited; some of them doubt that it is caused by glandular imbalance. At the Langley Porter Clinic, Dr. Bowman and his staff are now conducting a large-scale research program on the endocrine status of the homosexual. To find out whether there is any correlation between glandular or other biochemical imbalances and emotional and mental factors, the California psychiatrists are examining certain steroid sex hormones and anti-enzymes in the urine and blood of homosexuals committed to two state hospitals near Los Angeles. Results, as yet unreported, may point more conclusively to physical, and possibly treatable causes of sex deviations. For the possibility of treatment has not been given up. Thus, if the psychiatrists' view of the physical basis of homosexuality can be proved, some of the wicked men of Sodom might have been saved, after all.

Newsweek, Paris, June 14th, 1954.

# The Boy from the Navy

His name is David. He is in the Merchant Navy, twenty years old and the only son of his parents. That's all I know about him. His mother told me this when she was sitting for a few minutes at my own bedside. The boy occupies the bed next to my own. He is still unable to talk much; so, having no visitors of my own, his mother talked to me. I said to her, «that's a nice boy you've got there.» «Yes», she answered, «he's a lovely lad.» Maternal pride shone in her eyes.

We're both, David and myself, in an English hospital. But I may be sent home tomorrow; my grumbling appendix has quietened down, mainly thanks to a diet of near-starvation.

I was in the bathroom when David came in with sister. She told him to undress; no need to put on pyjamas, there was the shirt he was to wear for the operation. When sister left David smiled at me. «Well, what's the matter with you?» I asked him. «Appendix,» he said. A little later he was in the bed next to me. I don't think he kept up 'a stiff upper lip' consciously; his healthy youth just refused the mere idea of fear. An hour later his bed disappeared behind movable screens, he was being prepared for the operation. Later on his voice had nearly gone when he said to me, «My tongue feels terribly dry.» But the young smile was still on his lips.

It seemed ages before they brought him back from the theatre. (Next day I wheedled nurse into telling me that the operation had been an exceptionally complicated one.) For the first hours of the night the boy was quiet, then he returned to consciousness and started being sick. The night nurse kept vigil with him. It was pretty late, the ward was quiet, so she didn't screen off his bed. My insomnia keeping me awake as usual, I lived more or less through the boy's agony. In the end he was given another injection and fell asleep. His dark-haired head upon one arm he lay facing me — somehow his pain had become my own.

The next morning David wasn't at all well. He kept being sick for hours on end. However, during the afternoon he rallied sufficiently to smile at his mother when she arrived. That visit was one more chance for me to observe how 'casual' the English are. Hadn't it been for my own talk with David's mother I'd have taken her to be a friend of the family. However, she was very ready to tell me, the foreigner, how dearly she loved that boy of hers.

The following night David was once more pretty poor. His first bout of sickness wasn't too bad; the night nurse was at his side. But half an hour later the boy started moaning. Unfortunately nurse had left the ward on some errand. Hoping I was right in helping the boy and by doing so not violating any of the multiple English laws of behaviour (often so difficult for an alien to realize) I got quickly out of bed. I took the violently retching boy into my arms. With one hand I held his head, my other arm steadied his shaking body, while I gripped his strong muscular arm, deeply brown from all the wind on the wide seas. A sailing vessel and the words 'Homeward bound' were tattooed on his arm. Slowly the convulsions of the young body I held in my arms subsided, carefully I laid him down on to his pillows. The night nurse returned, grateful for my assistance. Sleep of exhaustion overtook the boy, his dark head as usual upon his arm.

He is still weak to-day, but definitely better. He gave me a tired but happy smile when he opened his eyes. He wears now a nice pair of yellow pyjamas, the jacket is half unbuttoned. There is his broad young chest, as darkly tanned as his arms. Last night I held that splendid body in my arms — — well, it's something to remember.

I shall probably leave hospital tomorrow and be off to the Continent for three months.

But David has promised to visit me after my return on his next shore-leave.

R. Young.