# Ideology in the Name of Science: Substituting Cultural Beliefs for Scientific Facts — A Critique of Quintana and Barrientos

# Sayed Ali Marashi\*

Department of Psychology, Shahid Chamran University of Ahvaz, Ahvaz, Iran.

## \*Corresponding Author:

Address: Department of Psychology, Shahid Chamran University of Ahvaz, Ahvaz, Iran, Postal Code: 6135813453. Tel: 98-61 33360609, Fax: 98-61 33333911, Email: sayedalimarashi@scu.ac.ir

#### **Article Information:**

Received Date: 2025/10/17, Revised Date: 2025/11/20, Accepted Date: 2025/11/22

## Dear Editor.

A letter from Quintana & Barrientos recently submitted to the journal (1) criticizing the editorial by Daftari and Khaleghi (2) deserves a scholarly response. My intention is not to defend Daftari and Khaleghi's editorial, as they are responsible for defending their own writing. In fact, Khaleghi and Zarafshan have given a well-reasoned answer that can be referred to (3). However, the claims made by the letter's author are not merely due to flaws in the editorial, but rather stem from biased endorsements of certain unscientific assertions. In this letter, I aim solely to challenge those unscientific claims. The author, citing some peers, asserts that "sex" is a biological category while "gender" is a cultural-social construct. Firstly, the separation of gender from sex lacks a long-standing precedent in scientific literature and has been imposed on academic texts following social movements claiming to pursue justice. This distinction is clearly philosophical and subjective, not scientific and objective. Secondly, if gender is not a biological and physical reality, why is there insistence on gender reassignment surgery and biological alterations in transgender people? In other words, if biology and body shape play no role in gender, why is there such emphasis on changing the body? Is it not the case that even transgender individuals—whether they like it or not-interpret the shape of their genitalia as indicative of a specific gender they wish to escape? Does their insistence on surgery not reveal that, deep down, they recognize the unwanted gender they truly belong to? If gender is a social matter, why is there such effort to portray transgender identity as a biological phenomenon?

The second erroneous claim by the letter's author is that the observation of homosexual behavior in some animals is evidence of the normality of homosexuality. If we accept such a criterion, we must also consider diseases shared between humans and animals—such as rabies or learned helplessness—as normal. Clearly, this is incorrect. Homosexuality, like phenomena such as learned helplessness, may be a shared disorder between humans and animals.

Appealing to the positions of certain scientific associations or health organizations to normalize homosexuality is not a scientific argument. Such reasoning stifles progress and transformation, as many claims once thought to be scientifically sound have ultimately proven false. Moreover, the positions of scientific authorities are not always purely scientific; they can sometimes be influenced by non-scientific pressures. In 1973, the American Psychiatric Association, not based on scientific or research grounds but merely through a vote among its members—with 42% voting against—agreed to remove homosexuality from the list of mental disorders. This occurred after social movements supporting homosexuals began exerting pressure on the APA (4-7). Philosophy of science has shown that the interpretation of observations and research findings is generally not free from beliefs and values (ideology) (8-11). According to some authors, the ideology of humanism has influenced the normalization of homosexual behavior (12). It is simplistic and blindly imitative to assume that declarations from scientific institutions are pure and infallible science or that such decisions are based on impartial scientific investigations.

### Marashi

It cannot be denied that social pressures on sexual minorities may play a role in the prevalence of disorders among them, but studies show that these pressures are not the main factor. Even in societies where extensive support is provided to these minorities, the prevalence of mental disorders remains higher than in the general population (13). Conversely, the claim that differences in the prevalence of mental disorders are due to social discrimination against homosexuals has not been substantiated through research (14). Furthermore, the primary reason for considering homosexuality abnormal is not the co-occurrence of mental disorders, but the fact that the behavior itself constitutes a clear functional impairment in key roles such as forming a family, spousal roles, parenting, reproduction, and maintaining bodily health. Moreover, homosexual behavior clearly constitutes a non-anatomical and non-physiological use of body parts. If we accept that the most important criterion for normality is the ability to perform effective roles, then it is fair to say that homosexuality clearly lacks this criterion. For example, a significant number of studies have concluded that children raised in same-sex households-where both parents are of the same gender-face numerous biological and psychological problems (15). Since humans require both a mother and a father for natural physical and psychological development, the parenting function in homosexuals is clearly impaired.

It is true that there is a correlation between religious orientation and opposition to homosexuality, but concluding that any opposition to the normalization of homosexuality is purely ideological is a logical fallacy on the part of the letter's author. By the same flawed logic, opposition to behaviors like theft could also be criticized as ideological, and theft could be defended, since theft is also clearly opposed by religions. It seems that the letter's author, while labeling the editorial as homophobic and ideological, is himself trapped in an ideological, religion-phobic perspective and thus holds no advantage over those he attacks. At least the editorial authors refrained from using terms like "shameful", which are characteristic of psychological warfare rather than scientific reasoning, in a text claiming to be scientific.

We call upon the Iranian Journal of Psychiatry and all other scientific journals worldwide to keep the door open for the exchange of ideas in academic spaces and allow the expression of diverse viewpoints. Science does not progress through dogmatic adherence to prevailing views, suppression of dissenting opinions, and denial of free expression. Rather, it advances through the presentation of unconventional perspectives—just as Galileo did when he challenged the scientific doctrines of his time.

#### References

- Quintana GR, Barrientos J. The Real Deviance: Misrepresentation of Science and the Persistence of Homophobic Ideology-A Rebuttal to Daftari and Khaleghi. Iran J Psychiatry. 2025.
- Daftari A, Khaleghi A. Homosexuality: A Mental Problem That Shouldn't Be Called Sexual Deviance. Iran J Psychiatry. 2025;20(3):281-3.
- Khaleghi A, Zarafshan H. Science Beyond Consensus: Defending Open Inquiry in Sensitive Scientific Debates. Iran J Psychiatry. 2025.
- Association AP. Homosexuality and sexual orientation disturbance: Proposed change in DSM-II, 6th printing. APA Document Reference. 1973; 730008:44.
- Hickey P. Homosexuality: The mental illness that went away. Behaviorism and Mental Health. 2011:8
- 6. Datta V. When homosexuality came out (of the DSM). Mad in America. 2014;1.
- 7. Drescher J. Out of DSM: Depathologizing Homosexuality. Behav Sci (Basel). 2015;5(4):565-75.
- 8. Popper K. The logic of scientific discovery: Routledge; 2005.
- 9. Kuhn TS. The structure of scientific revolutions: University of Chicago press Chicago; 1997.
- Canestrari R. Relationship between ideology and science. Forum (Genova). 1999;9(2):183-90.
- 11. Arvidsson S. Aryan idols: Indo-European mythology as ideology and science: University of Chicago Press; 2006.
- 12. McConaghy N. Behavioral intervention in homosexuality. J Homosex. 1977;2(3):221-7.
- Payami Golhin R, Marashi SA. Can Support for Homosexuality Reduce the Prevalence of Mental Health Problems among LGBTQ (+) Individuals to Levels Comparable to the General Population? A Second-Order Systematic Review with Thematic Analysis. Iran J Psychiatry. 2025;20(3):405-23.
- DeAngelis T. New data on lesbian, gay and bisexual mental health: New findings overturn previous beliefs. Monitor on Psychology. 2002;33(2):46.
- Cretella MA, Trumball D. Homosexual Parenting: Is it Time for Change. Gainesville, FL: American College of Pediatricians Retrieved November. 2004; 16:2010.