

Who and how decides what constitutes sexological norm? What reasons are given for including and excluding definitions of sexual problems from mental disorders textbooks? How "normal sex" was defined in the history of medicine since the publication of the first modern classification? What were and are the social consequences of such definitions? And are the specialists guided by current standards in psychiatry, or do they impose their own vision of sexual health on their patients?

The answers to these questions are not only of historical value, but they are also highly practical. The modern history of defining sexual problems shows how many different factors - including decidedly non-medical and non-scientific ones - had part in creating a point of reference for sexologists, that is medical classifications. From the moral norms and gender roles prevailing at the time, to the influence of pharmaceutical companies, which intervened in defining disorders so the definition covered the widest part of the population, to the action of activist groups advocating for new, non-pathologizing criteria for consensual behavior of adults, nonmedical factors played a huge role in deciding who is diagnosed as a healthy person, and who needs treatment in the light of psychiatry.

This has considerable implications for diagnosed individuals and for the rest of the population, that refers to medical standards when defining themselves and others. On the one hand, such diagnosis can be a source of relief resulting from the observation that medicine recognizes our worries, and may propose solutions for them. On the other hand, it can be a source of stigmatization of those who are satisfied with their sexual needs and reactions, but at the same time are subjects to public or partner's pressure for change in accordance to current ideals of sexual health.

The project is a bioethical inquiry on the effects of medicalization of sexuality in the individual and social dimensions. Firstly, we will present the transformation in the category of sexual problems (dysfunction and unusual sexual interests) since 1952 (the date of the first DSM edition) to the current intensive discussion and changes, together with the reasons for which a given definition of a disorder was maintained or removed. We will show the importance of scientific and non-scientific factors shaping the sexual classifications and the consequences for individuals and society of adopting their definitions. We will present their importance for challenging the status quo concerning gender roles and acceptance of sexual minorities. Interviews with Polish specialists in the field of sexology will be the part of empirical studies which will visualize the extent to which psychiatric classifications shape professional view on sexual health, and to which extent it is formed by personal worldview and the specific cultural conditions. The result will also reveal if the ethical implications of medicalized sexuality, raised by bioethicists, are reflected in reality.