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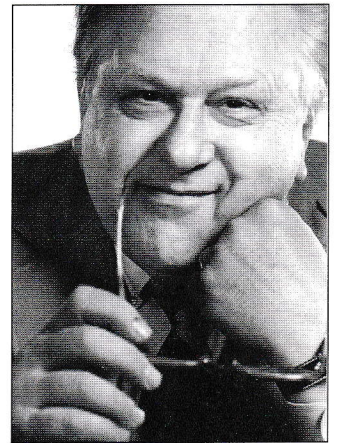
Former APA President Supports NARTH's Mission Statement, Assails APA's Intolerance of Differing Views

By A. Dean Byrd, Ph.D., MBA, MPH

Former President of the American Psychological Association Robert Perloff was the keynote speaker at the annual NARTH Conference, which was held in Washington, D.C. on November 12-14, 2004.

Dr. Perloff is the Distinguished Service Professor Emeritus of Business Administration and of Psychology at the Joseph M. Katz Graduate School of Business, University of Pittsburgh.

The former APA president's lecture — entitled "Free to Choose" — received a standing ovation from the conference participants. The gathering at the Washington's Wyndham Hotel comprised the largest attendance of any NARTH Conference.



Dr. Robert Perloff

The Importance of Client Self-Determination

Dr. Perloff began his lecture by emphasizing the importance of client self-determination, a cornerstone value of all of the mental health professions. He stated,

"I am here as the champion of one's right to choose...It is my fervent belief that freedom of choice should govern one's sexual orientation...If homosexuals choose to transform their sexuality into heterosexuality, that resolve and decision is theirs and theirs alone, and should not be tampered with by any special interest group — including the gay community..."

In support of the mission statement of NARTH, he concluded,

"The individual's right for self-determination of sexuality — or sexual autonomy — is, I am happy to see, inherent in NARTH's position statement: 'NARTH respects each client's dignity, autonomy, and free agency...every individual has the right to claim a gay identity, or to develop their heterosexual potential. The right to seek therapy to change one's sexual adaptation is considered self-evident and inalienable.' I subscribe fully to the aforementioned NARTH position statement."

Both Sides Supported

Noting that he was a Fellow of APA's Lesbian and Gay division, Dr. Perloff reiterated his support for gay and lesbian issues. However, he vigorously declared his opposition to the efforts of the gay community within APA to prevent psychotherapists from accepting clients

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who wished to develop their heterosexual potential. Dr. Perloff articulated the following reasons for his position:

1. "The individual has the right to choose whether he or she wishes to become straight. It is his or her choice, not that of an ideologically driven interest group.
2. "To discourage a psychotherapist from undertaking a client wishing to convert, for reasons I will explain, [is] anti-research, anti-scholarship, and antithetical toward the quest for truth.
3. "To deny a client the opportunity to engage in a psychotherapeutic experience is potentially harmful to the client, who may well have emotional problems and mental health roadblocks independent of that client's sexual orientation."

The Intellectual Irresponsibility of Dismissing Reorientation Therapy

Dr. Perloff noted the growing body of research that contradicts the popular notion that change of sexual orientation is not possible. He concluded, "The research on sexual conversion is, therefore, very much a work in progress, an open question, and efforts to declare that conversion is 'doomed to failure' and is 'futile' are irresponsible, reactionary and intellectually flawed."

When asked about the American Psychological Association's opinion of his presence at NARTH, Dr. Perloff indicated that he had recently received a warning phone call from a former member of APA's Board of Directors. This fellow psychologist told Dr. Perloff "that a

group of APA members were deeply concerned" that he had the "audacity and political incorrectness" to address NARTH (defined as a bunch of "bad guys").

Special-Interest Mafias

Dr. Perloff's response to the caller was, "If APA or any of its special-interest mafias seek to bring ethics charges against me, they will face litigation the likes of which they have never encountered before."

He commended NARTH for its position, which he views as representative of the clear majority of Americans because of the popular support for traditional marriage that was expressed in the recent national elections.

Dr. Perloff encouraged NARTH to increase its membership and to continue articulating its views. He stated that freedom of choice is "a powerful and unassailable right inherent in human behavior, especially in a democratic society such as ours, where freedom of expression is guaranteed by the United States Constitution." ■

A past president of the American Psychological Association, Dr. Perloff was also president of the American Psychological Foundation, the Eastern Psychological Association, the Evaluation Research Society, and several other regional and national associations. He is the author of over 400 publications, reviews, commentaries, and presentations at universities and professional conferences. In 2000, the American Psychological Foundation awarded him its Gold Medal for Lifetime Achievement in Psychology in the Public Interest.

More Comments by Dr. Robert Perloff, former APA President, at the 2004 NARTH Conference

"I am pleased to see an organization such as NARTH, that supports freedom to change."

"It is ironic that NARTH is such a small organization, considering the large percentage of the national population that apparently shares the same views."

"NARTH is a voice in the wilderness."

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"Victory on the Bow of a Ship"

Clinical Issues Within the Lesbian Struggle

By Janelle Hallman

Introduction

The lesbian condition is complex in its origin and very diverse in its expression. The elements of the lesbian struggle vary in degree and intensity, as do the temperaments and personality types of the women. Therefore, in my treatment of the lesbian client, I first and foremost want to meet and interact with the unique individual sitting in front of me. Lesbian women are intelligent and intuitive and can tell if I am truly "seeing" them or trying to squeeze them into a box or theory. I hold my models and theories loosely so I can meet the true person. I want to encounter the "whole" woman, not just her lesbianism. I want to give her the message that she is more than her lesbian struggle. I want her to know that *she* is important, and I am not sitting with her simply because I think her sexual orientation needs fixing or that I can "fix" her.

As a therapist, I want to respect her human dignity. Many of my clients are not sure they want to totally resolve the lesbian conflict. The emotional aspect of their struggle seems to reach down into the very core of their being. It is often a long process for a woman to just define the struggle, let alone to begin to disidentify with it.

Over six years ago, about two years into my practice, I decided to make a commitment to myself and to my clients that I would work with them regardless of where they are at in their decision to resolve the lesbian conflict. I agreed that I would not place demands or expectations on them with respect to their sexual struggle that would, in any way, condition or impede our ongoing work together. In other words, I have decided to be committed to them, wherever their journey leads, and to remain committed for the long haul. The "long haul" seems to be an average of 4-5 years of weekly to bimonthly appointments.

While there is much variation amongst lesbian women, there are still many notable themes that consistently emerge in their stories and struggles. I would like to highlight a few of those here.

Roots of Lesbianism

In broad sweeping terms, the roots of lesbianism can be discovered in four basic elements:

- A strained, detached or disrupted bond or attachment with mother *without* an available mother substitute, result-



Janelle Hallman

ing in a need for secure attachment.

- A lack of respect and/or protection from men, often in the form of sexual abuse or rigid gender roles, resulting in a **fear or hatred of men.**
- Few, if any, close girlhood friendships, resulting in a **need for belonging and fun.**
- A sense of emptiness and lostness in lieu of a full and rich sense of self and identity as a feminine being, resulting in a **need for a self and gender identity.**

While the presence of these elements is not an absolute predictor or determinant of the lesbian struggle, they are nevertheless the most common and frequently reported facets of the lesbian story. These elements are generally sequential in order of development or experience, can be causal or predisposing for the subsequent element and are therefore interrelated. An adult woman actually cycles in and out of these elements and related needs as she acts out the lesbian bond in an attempt to repair the inherent dilemmas. Unfortunately, this "acting out" can actually intensify these predisposing conditions of lesbianism.

I would also like to suggest that there are some common innate characteristics shared by lesbian women. These would include an above average intelligence, strong sensitivity to hypocrisy and injustice, athleticism, natural draw to more stereotypically masculine interests, capacity to feel deeply and passionately. It is the combination of the above environmental factors and inherent characteristics that may eventually lead to a lesbian struggle.

Developmental Issues

To highlight the specific developmental issues that are present in most lesbian struggles, I wanted to share the research findings from an unpublished doctoral dissertation by Dr. Sheryl Brickner Camallieri. Dr. Camallieri used an instrument called the Measures of Psychosocial Development (MPD) to assess the developmental differences between 54 allegedly heterosexual and 54 allegedly homosexual women. The MPD measures the developmental resolution based on Erik Erikson's model of psychosocial development.

While Dr. Camallieri admits that the scope of her research does not establish the cause of the differences (which could be developmental or attributed to the social and political

climate regarding lesbianism), "Of the 19 scales analyzed, six of the scales indicated a significant difference in the scores between the two groups of women" (p. 3). The heterosexual women scored significantly higher on the favorable resolution scales of Trust, Intimacy and Generativity. The lesbian women scored significantly higher on the negative resolution of Identity Confusion and Stagnation and Total Negative Resolution.

I have since given this assessment to over 25 of my lesbian clients and continue to see extremely high identity confusion and stagnation scores as well as low trust and high mistrust scores. Additionally, there is another pattern that has emerged in my client's testing: relative to their other scores, the lesbian woman scores significantly high in the positive resolution of Initiative and/or Industry.

If we were to just consider the results of the MPD based on suggested methods of interpretation, we would conclude that these are women who feel very insecure and unsafe in their world; are unsure of others and doubt that anything good will last. They have used performance, competence and assertiveness in a compensatory fashion, probably to gain a sense of control, value and purpose. They hold no inherent value or clear identity and therefore have little capacity or motivation to sacrificially give to others. Emotionally, they remain in a depressed state of self-absorption. This is a fairly accurate description of the lesbian experience.

As you might guess, these developmental deficits and compensations coincide almost perfectly with the developmental themes in a lesbian's history.

Specific treatment options need to take into consideration these developmental needs. Ultimately, treatment should start with the beginning issue of trust, move through the subsequent developmental issues with a major emphasis on identity formation and conclude when the woman is free to give, love and contribute to the betterment of the world.

Contrasts Between the Masculine and Feminine

I would now like to offer some framework around the differences between the male and female developmental journey in order to highlight the nuances of the lesbian struggle. I hope to also provide a framework for understanding the essence of the true masculine and feminine. It is essential to have some framework such as this if we are to help gender-confused clients.

Attachment and Identification

Boys and girls follow different developmental paths in terms of attachment and identification. Both boys and girls are to be initially attached to mom at birth. To develop healthily, a boy must move, strive and initiate to success-

fully separate from mom and ultimately attach and identify with dad. Homosexuality becomes a serious possibility when this step or process is frustrated or altogether missing for the boy. A girl on the other hand is supposed to remain and *rest*, so to speak, in an experience of ongoing or continuous connection. Figuratively speaking, she warmly rests secure at home with mom, to eventually receive dad who is to gently move towards her to offer his love, affirmation and protection.

Lesbianism initially becomes a possibility when this needed ongoing attachment with mom is absent, insufficient or undesirable. (Lesbianism becomes an even greater possibility if dad's movement is non-existent, abusive, or becomes masculinizing of his daughter.)

If for the girl, her initial attachment to mom is perceived to be weakened or broken, a type of homelessness is created for the girl that even the homosexual boy does not experience. In this way, the lesbian condition is more primal and perhaps more entrenched emotionally and psychologically than male homosexuality. The girl is essentially stripped of her most fundamental tether in the universe.

There may be no greater trauma in a girl's life developmentally than one that interferes with her primal relationship with mom. Mom is not only the first bond and attachment for a little baby girl, but is the relational object with whom this little girl will form her first sense of self and eventually rely on to complete her identification process as a female.

Besides internalizing the insecurity that a break in this foundational relationship creates, the girl will activate or move in an effort to find the attachment for which she was designed and so desperately needs. She begins to follow the developmental path of a male, that is, moving, striving and initiating. Unfortunately, trust in others and her self is not adequately formed to support secure and meaningful connection or relatedness (this is the mistrust that the MPD measures). She is filled with a sense of aloneness and need that further fuels her movement and initiation to resolve her dilemma (herein lies the high initiative and industry scores on the MPD).

Simply put, this emotional movement disrupts her normal growth and development and identification as a feminine being (identity confusion), not to mention the false paths such movement will uncover.

Erikson Research on Preadolescent Play Constructions

In the 1940's Erik Erikson conducted research at Berkeley on preadolescent play constructions. While he wasn't specifically addressing gender differences in his study, Erikson was struck by the fact that when given a set of blocks, little boys and girls built different constructions of space.

The boys' construction would include such things as cars among the buildings and people atop the buildings. Boys seem to be naturally preoccupied with the outer world, nature, objects and things.

The girls' constructions tended to show the people sitting close together and facing the inside of the room. Girls seem to be naturally preoccupied with the inner world of human relatedness, communication and connection.

Theological Perspective

Theologically, the creation story of Adam and Eve parallels Erik Erikson's findings and adds some important notions about the true masculine and feminine. First, Adam and Eve were created equal in terms of dignity, value, call and purpose. (To work with a lesbian successfully, you must truly believe and hold to this conviction.) They were to both **Fill and Multiply** – the realm of human relationship and **Rule and Subdue** – the realm of nature, animals and the earth (found in Genesis 1:27, New International Version). Second, they were created differently. Adam was created from the ground, was placed in the garden with the plants and animals and became very busy working, moving, initiating, ruling and subduing. Eve, on the other hand, was the only created being made from another living being. Her primal essence is one of human relatedness. She was immediately placed in front of Adam and became busy relating—being known and loved. Both Adam and Eve were needed to complete God's purposes for humanity, but it seems that their very origins and initial experiences point to difference and uniqueness.

True Femininity and the Inner World of Connectedness

Perhaps the masculine – and I believe gender is not merely a construct of socialization or learning processes, but a fundamental and inherent aspect of our humanity – has a greater exterior strength of movement, initiation and courage to face and deal with the outer world, but with an inner core of tenderness and compassion for human relatedness. It is this exterior strength, movement and confidence that homosexual men seemingly lack or struggle discovering.

Perhaps the true feminine means having an exterior that is inviting, restful and receiving with an inner core of solidness and strength of being and courage to face the complexities of another soul and the requirements of ongoing intimacy. Lisa Beamer (the wife of Todd Beamer who helped guide United Flight 93 away from human targets) is a great example of a woman with an inviting, restful exterior and a solid inner core. She was sad, but not crushed as she faced the tragedy of losing her husband. She was not fragile, wispy, whiney, needy, overly dependent but solid, strong, articulate, lovely.

The true feminine is *not* weak, but boasts of the strength,

courage and power to be – to be present and connected with her own heart, emotions and thoughts and with another, even in the most difficult or tragic time. The true feminine can weather loneliness. Lisa can stand in the face of her husband's death because she has her *self* and many other vital relationships.

Lesbian women typically lack (or struggle discovering and accepting) **both** of these aspects as women. They are toughened and defended on the outside and they sense emptiness and desperation on the inside. Their toughness defies their inner need, and their inner need – which so often is expressed in terms of dependencies – speaks to the depth of their gender brokenness. They are not living out of the strength of the true feminine.

Maternal Profiles

Of interest is the typical profile (not all mothers exhibit these characteristics or behaviors) of the mother of a lesbian daughter. According to my clients, their mothers typically had no solid self or strength of character or integrity, regardless of how they presented on the outside. The mom of a lesbian struggler is a mom who:

- hid in bed under the covers when dad became abusive or rageful
- was mentally ill and relied on her daughter to continually talk her out of committing suicide
- didn't even know the basics of housekeeping let alone caring for a baby or child
- was a social butterfly and alcoholic leaving her little daughter alone and unsupervised
- was unable to separate from an abusive husband
- was a dutiful wife but a shell of a woman
- bragged incessantly about herself and kids, negating any negative feelings or experiences in her daughter
- hated being a woman, never shed a tear and despised her daughter
- was openly jealous of her daughter.

These vignettes do not describe a woman who is solid in being and strength of heart. They describe a woman who is insecure, dependent, afraid of being alone, weak, lost and broken and underdeveloped in her own femininity. It is easy to understand why a daughter who has a sharp intellect, strong sense of justice and integrity, high energy level with deep passions might conclude that if becoming a woman means becoming like mom, she wants nothing to do with it.

continued

Unfortunately, in the girl's detachment and flight from femininity as portrayed by her mother, she too begins to live out a deep inner desolation and crisis of her true gender identity. She has had no "home" in which to develop or become. "I don't know who I am," "I hate being a woman," and "I don't know how I feel." Many of my clients feel and believe they are not women. This is not a symptom of a transgender struggle but is an indication of their alienation from their inherent design as a feminine being.

Emotional Dependency

To briefly summarize, healthy development for a girl first requires that she rests and remains in the warm and secure home of mother so that she can form and develop an inner home for herself - out of which she will live, express her strength and power, create, relate, connect, nurture, bring forth life, etc. Without this inner sense of home or a secure and solid sense of self and feminine identity, she will not have the capacity to enter into healthy intimacy. Yet she will live with a deep belief that she cannot be alone. Therefore, she is unconsciously driven or on the move to find a "home" or true "self" outside of her self.

This is the drive behind an emotionally dependent relationship. When another woman comes along that triggers a sense of familiarity or presents herself to be a strong and competent woman (unlike mom perhaps), the lesbian literally wants to lose herself in this woman, hoping to find rest, receive the care and nurture she craves and to finally appropriate, albeit vicariously, an identity.

Emotional dependency is not an inordinate love but is the consequence of a woman's deep fear of and inability to sustain intimacy. The partner is not loved or known for who they truly are. It is the sense or illusion of warm connection or secure attachment that is desired. Sadly, the "emotional dependency," if sustained, will prevent a woman from any substantial healing or change. A woman does not need to lose herself (in another woman or man) but in fact, needs to find her true self, and this goal should be the primary focus of therapy with the lesbian client.

Personality Disorders and Traits

It is this missing core and the accompanying restlessness that I believe leads to conflicts and struggles within the lesbian woman that qualify as full blown personality disorders and traits. The most common configurations I encounter in my practice generally include a histrionic profile associated no doubt with her deep fear of abandonment and isolation.

The other configuration involves a depressed and/or dependent disorder with associated self-defeating, avoidant and borderline disorders or traits:

- **depressed** – empty, dejected, pessimistic, worthless and full of self and other centered contempt,

- **dependent** – needy to the point of desperation, yet fearful of rejection,
- **self-defeating** – negative, self pitying and hostile, and
- **avoidant** – defended and isolated.

This list accurately describes the predominant clinical characteristics of the average lesbian woman.

Effective Therapy for the Lesbian Client

Work with the lesbian will require a long-term commitment which will be draining but also rewarding if the client is highly motivated to change. The individual characterological profile must be considered and appropriately handled in therapy. Generally speaking, lesbian women are deeply conflicted. But remember, every woman you see will be unique in this regard.

The general goal of therapy is to establish trust (this may be the first experience of trust for many clients) so that the client can accomplish the *deep inner formation work*, or as quoted by Elaine Siegel, "attainment of firmer inner structures" (*Female Homosexuality: Choice Without Volition*, Hillsdale, NJ: The Analytic Press, 1988).

The woman must come into her own. She must be able to embrace the breadth of her identity and humanity, her strengths and weaknesses, her glory and her shortcomings, her dreams, hopes and visions as well as her disappointments and losses. This process will involve among other things, extensive work in identifying, challenging and restructuring the woman's belief system regarding the world, God, others and herself.

Lesbianism is supported by a complex system of distorted, negative and self-defeating beliefs. This system must be rebuilt. The client's defensive maneuvering and unhealthy attachments with women need to be addressed while the woman is being challenged to take risks with new and healthier relationships. Eventually she will need to deal with her opposite sex contempt and ambivalence and appropriate her own individual style of feminine relating.

In conclusion, because healing for the lesbian requires the establishment of her "home" so to speak, I believe that the most effective component of therapy with a female homosexual is the *quality of the attachment* and therapeutic relationship formed between female counselor and client.

While there are many techniques that can be used to access deep unconscious conflicts and to teach cognitive truths and principles of healthy living and relationship, it is the *consistency, faithfulness, caring and loving attitude* of the counselor that begins to finally establish a solid center of trust and inner core or sense of being in the women we work with. It is as I love, accept and affirm my client that she can begin to unfold and continue to develop as a female being. In essence, I provide the home in which she can rest and simply *become*. ■

Spitzer Study Critiqued In the Journal of Gay and Lesbian Psychotherapy

(Volume 7, Number 3, 2003)

by A. Dean Byrd, Ph.D., MBA, MPH

"...an over-the-hill stage horse galloping toward the limelight, or a court jester hoodwinked by a scheming religious right"

—Characterization of Robert Spitzer
by gay activist Wayne Besen

An issue of the *Journal of Gay and Lesbian Psychotherapy* was entirely devoted to Robert L. Spitzer and his study, recently published in the prestigious *Archives of Sexual Behavior*. One after another, the *Journal* authors—all gay activists—devoted their efforts to a critical analysis of the Spitzer study.

The opening editorial by psychiatrist Jack Drescher set the tone for this issue of the journal. Drescher couched the malleability of homosexuality as a question central to the "cultural wars," but not to science. And it's the cultural wars, not science, that seemed to occupy center-stage in all the ensuing articles.

Another commentator, Theo Sandfort, suggested that Spitzer should not have published the study at all because of the delicacy of the topic, because the issue of homosexuality is "charged" in cultural debates, and because of the limitations of the study (Sandfort lists his concerns in that order).

Psychiatrist Charles Silverstein, author of *The Joy of Gay Sex*, devoted his commentary to a scorching criticism of religious-faith traditions, accompanied by accusations of bias in Spitzer's subject selection. Silverstein has a preference for the Shidlo-Schroeder study, which sought to document the harm experienced by some reorientation-therapy clients. The Shidlo-Schroeder study was conducted by researchers who at least initially, selected their participants through an advertisement in gay publications that said, "Help Us Document the Damage of Homophobic Therapies."

An analysis of the media response to the Spitzer study was provided in the *Journal of Gay and Lesbian Psychotherapy* by Lund and Renna. They offer a "conspiracy" theory of the Spitzer study, noting how "media routines dictate that coverage of scientific issues which intersect with political or cultural ones tend to minimize the science, and focus instead on the political or cultural 'conflict.'" They fail to note, however, that a long series of gay-friendly media stories during the past ten years—stories about "gay genes," "gay brains," and children raised in gay-headed households—has been heralded almost uncritically, on a scientific level, by the popular media as evidence to prove the merit of gay social causes.

Much of the rest of the Lund-Renna commentary is basically a critique of the validity of the ex-gay movement, and an attempt to de-legitimize the efforts of ex-gays to change.

The article in the *Journal* by Wayne Besen could only be characterized as polemical; such polemics were justified by the journal's editor, Jack Drescher, because they were said to be a "representative sample of the political reception" of the Spitzer study within the gay community. The commentary is vintage Wayne Besen. He concludes his diatribe with the following:

"In the end, however, the real loser is Dr. Spitzer. Whether he was an over-the-hill stage horse galloping toward the limelight or a court jester hood-winked by a scheming religious right is unimportant.

"What matters is that Spitzer's embarrassing travesty of scholarship will surely go down as his defining work, a professional pockmark that will indelibly taint his once splendid career."

In another article, Stalstrom and Nissinen provided a commentary on the role of the Spitzer study in the legal recognition of same-sex partnerships in Finland. The Spitzer study had been offered as evidence (by supporters of traditional marriage) in the Finnish same-sex partnerships debate. Consistent with his historical and current political views supportive of gay-activist social causes, Spitzer made a clarification to the Finnish Parliament on the distinct—and non-intersecting—spheres of science and ethics; i.e., that scientific studies can never settle matters of social ethics; but then in closing, he offered his personal support for both anti-discrimination laws and civil unions for homosexuals.

The final article in the *Journal of Gay and Lesbian Psychotherapy* is a dialogue between two colleagues: gay-activist psychiatrist Jack Drescher, and Robert Spitzer. It is difficult to determine how much of the interview was scripted. But Spitzer, in spite of being subjected to hate mail from the gay community and rage from colleagues, concluded, "I'm glad I did the study."

It's tempting to provide my own commentary on this issue of the *Journal of Gay and Lesbian Psychotherapy*. But beyond

continued

simply laying out the facts, I am not sure there is a need; surely, most professionals will be able to glean for themselves the differences between legitimate scientific criticisms and political rhetoric. However, because I am acquainted with Robert Spitzer, perhaps the following information will come closer to the truth of the matter.

My acquaintance with Robert Spitzer began in May, 2000, when I responded to a dinner invitation from him. Though discouraged from doing so by some of my colleagues, I accepted the invitation. Having spent three decades in clinical practice, I had learned to trust my judgment about people more than depending on the appraisals of others.

I was greeted by a mild-mannered man who was quite engaging. He was reasonable and open to hearing my opinion as he posed questions about the malleability of homosexuality. I was impressed with his genuineness and sincerity. At the risk of insulting him, I noted a kind of searching depth, almost approaching spirituality. By the evening's end, I had learned much about the 1973 decision to remove homosexuality from the diagnostic manual, and much more about Robert L. Spitzer, the man.

More importantly, my gut-level response told me that Robert Spitzer's motivations were honorable, and that he had integrity. He genuinely wanted to know if some homosexual men and women could change from homosexual to heterosexual, and he wanted science to guide him. Certainly, with more than 275 publications to his credit, this esteemed scientist at Columbia University was more than able to conduct such a study.

With the limitations that are inherent to all such studies, Spitzer employed the best rigor available for such research protocols. I am certain that Spitzer would have received accolades from the scientific community had he studied a less controversial topic, employing the exact same methodology as in this study. His sample size was larger than those in previous studies. He was very detailed in his assessment and carefully considered the affective components of the homosexual experience. Any bias in interview coding was virtually eliminated by near-perfect interrater scores. He limited his pool of applicants to those reporting at least 5 years of sustained change from a homosexual to a heterosexual orientation. His structured interview clearly described how the participants were evaluated. His entire set of data is available for scrutiny by other researchers.

Spitzer's conclusions are simply this: based on his study, there is evidence to suggest that some gay men and lesbians are not only able to change self-identity, but are able to modify core features of sexual orientation, including fantasies.

One of the few rational, *scientific* commentaries on the Spitzer study was offered by Scott L. Hershberger. Dr. Hershberger, a distinguished scholar and statistician, elected to respond in a Commentary to the Spitzer research (Hershberger's article was published in the same issue of the *Archives of Sexual Behavior* as the Spitzer study was) by conducting a Guttman scalability analysis. This is a scalogram to determine whether or not reported changes occur in a cumulative, orderly fashion.

Hershberger's conclusion:

"The orderly, law-like pattern of changes in homosexual sexual behavior, homosexual self-identification, and homosexual attraction and fantasy observed in Spitzer's study is strong evidence that reparative therapy can assist individuals in changing their homosexual orientation to a heterosexual orientation.

"Now it is up to those skeptical of reparative therapy to provide comparably strong evidence to support their position. In my opinion, they have yet to do so."

What I find most intriguing, and somewhat ironic is that Spitzer did in 2001 what he did in 1973: he challenged the prevailing orthodoxy. He challenged

the assumption that "every desire for change in sexual orientation is always the result of societal pressure and never the product of a rational, self-directed goal."

In the particular sample he studied, Dr. Spitzer concluded that many participants "... made substantial changes in sexual arousal and fantasy—not merely behavior." Even subjects who made less substantial change believed it to be extremely beneficial.

"Like most psychiatrists," says Dr. Spitzer, "I thought that homosexual behavior could be resisted, but sexual orientation could not be changed. I now believe that's untrue—some people can and do change."

Perhaps one of the valued characteristics of the good scientist is the amenability to form different opinions based on the data. This is precisely what Robert Spitzer has done. He came to the study skeptical, but open to new data. And with new data, he has formed a different opinion.

What is also clear from the Spitzer study is that more data is needed, because his study was very hypothesis-generating (as such studies should be).

In spite of the complaints from activists, the Spitzer study has managed to lift the thirty-year moratorium on the scientific investigation of homosexuality. Within the last year, I have had nine graduate students contact me about thesis

"It appears that the activist-authors were outraged that the study was published at all."

or dissertation topics on homosexuality. Other colleagues report similar inquiries.

Activists suggest that there is no need to study change from homosexuality, and that even research on this subject will cause harm to self-identified homosexuals. In spite of a political climate where activism often trumps science, and where activist claims go uncritically examined, there is no rational basis for the speculation that studying homosexuality will harm gay-identified individuals.

In responding to this concern, Michael Bailey noted, in his recent book *The Man Who Would Be Queen*, "...it is difficult to argue that good scientific studies, or rational, open discussions" will harm homosexuals.

When sociopolitical agendas prevent scientists from studying even controversial topics like homosexuality, no one wins. In fact science can only progress by asking questions and seeking answers. When research is discouraged and scientists are intimidated, we begin down a slippery slope that approximates the censorship of scientific investigation, a very dangerous slope indeed.

The tone of this issue of the *Journal of Gay and Lesbian Psychotherapy* was not one that valued the scientific spirit of investigation and openness, but rather one of suppression and personal attack.

It's unfortunate that attempts are made to hold Spitzer's study to a higher standard than other similarly-conducted research. Spitzer's study was peer-reviewed and the limitations noted. It appears that the activist-authors of the *Journal of Gay and Lesbian Psychotherapy* were outraged that the study was published at all, a sad commentary for a professional journal. Spitzer's motives were questioned, his credibility attacked and his research subjected to a kind of scrutiny unparalleled in any scientific arena.

As a scientist, I find the journal's approach in this issue to be both disingenuous and intolerant. Disagreement among scientists is healthy. Name-calling and intimidation tactics are not. It is unfortunate that the journal's editorial board, some of whom are respected scientists, would lend credibility to this issue by their affiliation with the journal. ■

A Boy, His Two Mothers, And Psychosexual Development

Heterosexuality and two-parent families should not be implied to be the norm, says psychologist

A California clinical psychologist is urging mental health professionals to begin developing new therapies to aid children who are brought up in gay households.

Toni Vaughn Heineman, DMH, put forth her theories in *Psychoanalytic Psychology* (2004, Vol. 21, No. 1, 99-115). She stressed that children of gay parents should not be compared to those of heterosexual parents in a way that implies that heterosexuality is the norm.

According to Heineman, "Children of gay and lesbian parents must be offered theories of healthy development that include them." She observes that Freudian theories of sexual development were based upon the heterosexual family as the norm, and that "homophobia" has been institutionalized within psychoanalysis.

In addition, she believes that the internalized, anti-homosexual attitudes of the gay parents themselves have "contributed to our lack of theoretical attention to the psychosexual development of children living and growing up in these families."

The author says research comparing different family structures is counterproductive.

"Research on the children of gay and lesbian parents that

focuses on comparisons with the children of heterosexual parents, including comparisons with children of single heterosexual mothers, runs the danger of perpetuating the heterocentric assumptions of our current developmental theories."

For Some Children, Having Three Parents is "Normal"

In discussing children growing up in gay households, she targets the developmental challenges of boys who are reared in lesbian homes. She suggests that a boy in a lesbian household must move from viewing his parents as a dyadic relationship to a triadic relationship. In this new relationship, the boy not only has two mothers, but must cope with the reality of an absent father.

Will children in homosexual households become homosexuals themselves? She writes: "Although most children of homosexual parents identify themselves as heterosexual, it is not surprising that they report more homosexual experimentation than the children of heterosexual parents. Lesbian parents may offer their children a range of identificatory possibilities, at least in the area of sexual object choice—perhaps wishing for their children to be different from them, while being open to their being like them, in this regard." ■

When Activism Masquerades as Science: Potential Consequences of Recent APA Resolutions

By A. Dean Byrd, Ph. D., MBA, MPH

"There is a gay activist group that's very strong and very vocal and recognized by the American Psychiatric Association...there's nobody to give the other viewpoint...There may be a few people...but they don't talk" (Spitzer, 2004).

In a press release issued this past summer at its annual conference, the American Psychological Association officially endorsed gay marriage and adoption, and condemned laws in the areas of marriage and adoption that fail to treat homosexuality the same as heterosexuality.

The resolution stated, in part,

"... be it resolved that the APA believes that it is unfair and discriminatory to deny same-sex couples legal access to civil marriage and to all its attendant benefits, rights, and privileges."

With this action—under the politically correct mantra of tolerance, diversity and civil rights—the leaders of one of America's most formidable mental health associations have taken one additional step toward disguising prejudices as clinical understandings. This step has in raised new questions about the APA's credibility as a scientific organization.

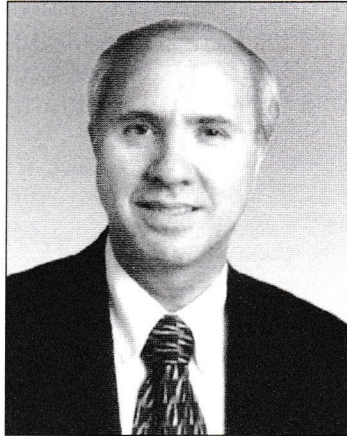
Activists' Interpretation of the Research

Although the resolutions on gay marriage and on parenting by gay partners were announced at the APA annual meeting this summer, a discussion of these important resolutions was completely absent from the September issue of the APA's *Monitor on Psychology*, and was followed by only the briefest of notes in the October *Monitor*. In the October issue, APA's Rhea Farberman noted that there is no research that suggests that "same-sex couples should be denied marriage rights" and she concludes that a "review of the literature calls for joint and second-parent adoption rights for gay parents" (2004, p.24)

APA insists that the resolutions are based on the recommendations of "researchers who study same-sex families and relationships" (Farberman, 2004, p. 24).

Yet, consider those individuals who were appointed to the committee: Armand Cerbone, who was inducted into the Chicago Gay and Lesbian Hall of Fame in 2003 and was recognized for the distinguished service to the gay movement by the Society of Lesbian, Gay, and Bisexual Issues;

Beverly Green, editor of *Psychological Perspectives on Lesbian and Gay Issues*, Kristen Hancock, who developed "Guidelines for Psychotherapy with Lesbian, Gay and Bisexual Clients"; Lawrence A. Kurdek, Editorial Board of *Contemporary Perspectives on Lesbian, Gay and Bisexual Psychology*; and Candace A. McCullough — whose partner, Sharon Duchesneau, was artificially inseminated from a deaf sperm donor to make it highly likely that their children would also be born deaf, because of their belief that deafness is not a medical problem, but a cultural identity (McElroy, 2002).



A. Dean Byrd, Ph. D., MBA, MPH

The committee members were hardly an unbiased group!

What's more alarming is that nowhere did the authors of the resolutions cite the incompleteness of the data they studied, or mention the body of research that points clearly to the shortcomings of the studies.

For example, Lerner and Nagai (2000b), in their comprehensive review of the data on same-sex parenting, concluded:

"The claim has been made that homosexual parents raise children as effectively as married biological parents. A detailed analysis of the methodologies of the 49 studies, which are put forward to support this claim, shows that they suffer from severe methodological flaws. In addition to their methodological flaws, none of the studies deals adequately with the problem of affirming the null hypothesis, of adequate sample size, and of spurious non-correlation" (p. 1).

Baumrind (1995) agrees, saying:

"Research findings to date are not definitive, however, because most of the studies are based on small samples of convenience, retrospective data, or self-report instruments subject to social desirability biases. Also few, if any, of the studies have explored theoretically relevant hypotheses concerning adolescent outcomes, or used intensive observational and interview methods most likely to reveal possible problems such as identity diffusion or parent-child enmeshment" (p. 134).

The APA Committee supported their resolution on homosexual parenting by citing the research of Golombok,

Spencer and Rutter as well as Golombok and Tasker. Nowhere did they acknowledge the methodological flaws or the unreported differences. For example, Williams (2000), in his re-analysis of the data of Golombok, Spencer, and Rutter (1983) and the Golombok and Tasker (1996) research found a significant number of children to either have considered engaging in a homosexual relationship, or already engaged in a homosexual relationship.

There were also significant, but left unreported, differences in self-esteem between children of homosexual and heterosexual parents, as well as significant but unreported differences in social and emotional difficulties experienced by children of homosexual parents.

Even the meta-analysis by Stacy and Biblarz (2001) was given only cursory attention. This meta-analysis repudiated over 20 years of research which had been said to show that there were no differences between children raised by homosexual and heterosexual parents. In fact, differences do exist according to Stacy and Biblarz, who found that lesbian mothers had a feminizing effect on their sons and a masculinizing effect on their daughters. They report:

“...the adolescent and young adult girls raised by lesbian mothers appear to have been more sexually adventurous and less chaste...in other words, once again, children (especially girls) raised by lesbians appear to depart from traditional gender-based norms, while children raised by heterosexual mothers appear to conform to them” (p. 171).

Of particular concern was the APA Committee’s reliance on the research of Charlotte Patterson, whose studies were questioned and subsequently excluded from a Florida Court. The Court concluded:

“Dr. Patterson’s impartiality also came into question when prior to trial, she refused to turn over to her own attorneys copies of documentation utilized by her in studies. This court ordered her to do so (both sides having stipulated to the Order), yet she unilaterally refused despite the continued efforts on the part of her attorneys to have her do so. Both sides stipulated that Dr. Patterson’s conduct was a clear violation of this Court’s order.

“Dr. Patterson testified as to her own lesbian status and the Respondent maintained that her research was possibly tainted by her alleged use of friends as subjects for her research.” (1997, June Amer, *Petitioner v. Floyd P. Johnson*, p. 11).

Potential Consequences for State Psychological Associations

Dr. Alan Hopewell, President of the Texas Psychological Association (TPA), noted:

“ ... as far as I know, the Texas Psychological Association was not consulted regarding this [same-sex marriage] resolution. The research data on issues such as this are far from conclusive, and there certainly is not consensus in the professional community upon which we currently can make such sweeping recommendations for social change with confidence.

“The often-heard assertion that all sexual orientation is invariably genetically driven is far from proven. I am also concerned with the politicization of mental health issues such as these....We, as a scientific and professional organization, should be very hesitant, therefore, to use any diagnosis or research findings for the purpose of manipulation of political goals....

“A consensus such as this is not reached by the imposition of the desires of the few upon others by means of judicial fiat or committee proclamation” (Ohlschlager, 2004, p.3; Hopewell, 2004).”

Dr. Hopewell added, “The committee’s assertion that the psychological literature demonstrates that this behavior is both non-problematic and acceptable is far from consensus in the scientific community, and grave concerns have been raised by many fully qualified scientists whose voices have not been allowed to be represented” (Hopewell, 2004).

Dr. Hopewell further noted the potentially damaging impact of these resolutions on current legislative action affecting psychologists in Texas. “In addition,” he said, “we are entering our sunset year for our license, and I see this as a potentially very damaging issue as our license is at stake” (Ohlschlager, 2004, p. 4).

“One such risk to Texas psychologists,” he noted, “is that the local legislature might vote for a tightly state-regulated board of psychology, because the APA resolution pushing for gay marriage might give Texas legislature the idea that psychologists are a fringe group who endorse homosexual marriage” (Hopewell, 2004). Dr. Hopewell indicated that he has already been contacted by a Texas legislator regarding the APA resolutions (Hopewell, 2004).

“We have also introduced bills twice for prescriptive authority,” Dr. Hopewell said, “and I see this issue damaging progress with that bill, as happened in Louisiana a few years back. I am in a quandary as how to respond to this as the leader of the organization” (Ohlschlager, 2004, p. 4).

Science, Not Activism, Must Guide Resolutions and Policy

Scientists are not immune from the political and cultural debates, but they must assure that any official declarations, resolutions or policies are anchored to the most extensive scientific research available. Kitcher (1985, p. 3) noted that

"when scientific claims bear on matters of social policy, the standards of evidence and of self-criticism must be extremely high." APA must mandate that all statements or resolutions endorsed are subject to review and intense scrutiny, and that a balanced discussion is facilitated among all professionals and members.

Williams has noted that —

"Social scientific research can provide useful information and evidence in support of important public policies, but it must be of the highest quality in its design, instrumentation, and conceptual rigor.

"At the same time, such empirical research can never provide ultimate justification for decisions and policies that are essentially moral and reflect our deepest values.

"In the final analysis, the justification must derive from our vision of the highest and most noble things of which we as cultures and individuals are capable. If this vision is worthy, we ought not be timid about confronting the issues and seeking support for the vision in the research area" (p. 355).

No scientific organization can provide any resolution or policy statement based on scientific research that is tainted, flawed and inconclusive without breaching the trust of the general public. For APA to retain its credibility as a scientific organization, science must be separated from activism.

Dr. Robert Perloff, former President of the American Psychological Association, criticized APA for pandering to special interests groups: "The APA is too politically correct...and too obeisant to special interests" (Murray, 2001, p. 20).

Indeed, the evidence is clear that in the case of the APA resolutions on homosexual marriage and parenting, APA has indeed catered to as small but vocal special-interest group and has allowed activism to masquerade as science.

If the resolutions are allowed to stand, scientific groups such as NARTH must make a concerted effort to surface the issues to state legislatures in order to preserve psychology as a science. Otherwise, Dr. Hopewell's fears may indeed become reality. ■

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How Should Clinicians Deal With GID In Children?

Psychologist Kenneth J. Zucker describes the current research on children and adolescents who develop a Gender Identity Disorder

By Frank York

Children and adolescents who develop a Gender Identity Disorder (GID) are very often reared in homes where cross-gender behavior is tolerated or encouraged as a "phase," according to Dr. Kenneth Zucker, writing in a recent issue of *Child and Adolescent Psychiatric Clinics of North America*, 13 (2004) 551-568.

Dr. Zucker, with the Child and Adolescent Gender Identity Clinic, in Toronto, Canada, is also the editor of the prominent journal *Archives of Sexual Behavior*. He observes that GID children are also frequently in homes where the maternal psychopathology is evident and that these children develop separation anxiety because of a mother who is emotionally unavailable.

An overly close maternal relationship has also been found. In reviewing research on GID and parental relationships, Zucker cites one clinical study by Stoller who noted that boys who had GID had an overly close relationship with their mothers and a distant, peripheral father-son relationship. Another researcher, he says, assessed the amount of time fathers spent with their feminized boys during the first five years of life. R. Green, in *The Sissy Boy Syndrome*, found that fathers of feminine boys spent less time with their sons from the second to fifth year than did fathers of control subjects. Mothers of feminized boys also spent less time with their sons than did mothers in a control group.

Zucker also analyzed current data on a biologic component to GID among children and adolescents. He noted: "Researchers have been unable to identify a clear biologic anomaly or variant that is associated specifically with GID. There is evidence, however, that certain behavioral traits that are linked to biologic processes may characterize children who have GID."

He surveys what is currently known about prenatal sex hormones and the impact that these may have on the developing brain of the fetus. He points to studies of congenital adrenal hyperplasia (CAH), an intersex condition that affects genetic females. During fetal development, the external genitalia are masculinized. Zucker says that it is presumed that such masculinization may also take place in the brain. Studies of girls with CAH suggest they have higher rates of lesbianism and bisexuality than average.

Zucker found that boys who had GID had a significantly greater rate of left-handedness than other boys. In addition, GID boys also have an "excess of brothers to sisters...and have a later birth order" than non-GID boys. He theorizes that this may possibly be due to "maternal

immune reactions during pregnancy. The male fetus is experienced by the mother as more 'foreign' (antigenic) than the female fetus."

Social Reinforcement Is A Factor

Dr. Zucker says that a survey of the current literature on GID indicates that "parents do play a role in influencing patterns of sex-dimorphic behavior but not in the simplistic way that social learning theorists expected."

He says that children with GID are often brought up in homes where "tolerance and non-responsiveness was common. Encouragement of these behaviors seems to be more common than negative or discouraging reactions."

He lists three possible reasons for this tolerance as: "1) parental values and goals regarding psychosexual development; 2) feedback from professionals that the behavior is within normal limits and 'only a phase'; 3) parental conflicts about issues of masculinity and femininity; and 4) parental psychopathology and discord, which leave the parents preoccupied and unresponsive to their child's behavior."

Ethical Issues Examined

Dr. Zucker admits that there are complex social and ethical issues surrounding the politics of sex and gender in post-modern Western culture. He notes that the "most acute ethical issue may concern the relation between GID and a later homosexual sexual orientation. Follow-up studies of boys who have GID that largely is untreated, indicated that homosexuality is the most common long-term psychosexual outcome."

Zucker says that clinicians have an ethical obligation to inform parents of the relationship between GID and homosexuality. Clinical experience suggests that psychosexual treatments are effective in reducing gender dysphoria and that individual counseling and parental counseling are both effective methods of treating GID.

He points out that it is legitimate for parents to establish limits for their children on cross-gender behaviors. If not, the behavior is, in effect, being reinforced.

Children and adolescents who are resistant to psychosexual treatment may be candidates for early hormonal treatment, he says, but only after all other options have been exhausted. ■

Spitzer Declines NARTH's Sigmund Freud Award — Cites Socio-Political Differences with NARTH

By A. Dean Byrd, Ph.D., M.B.A., M.P.H.

As most NARTH members know, Dr. Robert L. Spitzer recently published a study in the *Archives of Sexual Behavior*. From his research, Dr. Spitzer concluded that some gay men and lesbians are not only able to change self-identity, but are able to modify core features of sexual orientation, including fantasies.

Dr. Spitzer was subjected to many complaints and accusations. Perhaps the worst attack that I have seen was in a recent edition of the *Journal of Gay and Lesbian Psychotherapy*. He was described in this journal as "...an over-the-hill stage horse galloping toward the limelight, or a court jester hoodwinked by a scheming religious right." Can you imagine any professional journal permitting such a character assassination?

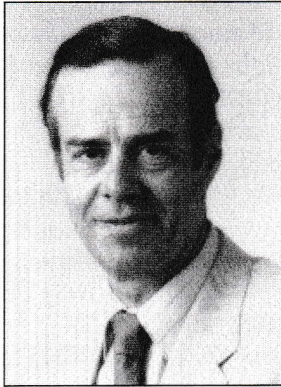
While my personal association with Dr. Spitzer has been relatively brief, may I share a few impressions? I had the privilege of meeting with him when he began his study. He was a mild-mannered man who seemed reasonable and open to other views. I was impressed with his genuineness and sincerity. Although none of us are completely immune from the politics of our time, I sensed that he was willing to let science, not activism, guide his research.

In spite of the politics of intimidation and the name-calling that followed his research, Dr. Spitzer found a prestigious, peer-reviewed journal to publish his work.

Then most recently, when the *Journal of Gay and Lesbian Psychotherapy* attempted to "trash" both Dr. Spitzer personally as well as his study, the opposite was actually achieved. Even some of my gay colleagues were offended by the *Journal's* mean-spiritedness. I, along with them, take comfort in the belief that most professionals will be able to glean for themselves the differences between legitimate scientific criticisms and political rhetoric. In this instance, the attacks on the messenger rather than the message indicate a serious dearth of plausible counter-arguments.

Dr. Spitzer noted that "science progresses by asking interesting questions, not by avoiding questions whose answers might not be helpful in achieving a political agenda." It is because of Dr. Spitzer's contribution to science, not his political views, that NARTH determined that he should be offered our annual Sigmund Freud Award.

However, interestingly enough, Dr. Spitzer has cited *politi-*



Robert L. Spitzer, M.D.

cal reasons why he is unable to accept the award — he has told us that his differences with NARTH on socio-political positions such as gay marriage, gay adoption, and gays in the military prevent him from accepting NARTH's award.

Is it not ironic, however, that NARTH — because it is a scientific organization — has in fact taken no official positions on gay marriage, gay adoptions, and gays in the military?

This is an example of how socio-political differences are actually at the heart of the debate, and Bob Spitzer's position is a stark reminder of this fact. This debate is really a debate on diversity: how differing worldviews can co-exist within the social sciences.

Had Dr. Spitzer elected to accept the NARTH award, he would have made a statement for diversity, nothing else: he would have been acknowledging that reasonable people can hold differing views on important social issues.

I speak at a forum every week where differing worldviews are valued: I teach in a medical school which values real diversity. My students are encouraged to develop their worldviews in a way that integrates the social science research and/or their beliefs—but their views must be informed by some respected body of knowledge.

So I must admit that I am disappointed at Bob's response to the NARTH award. I suppose that it takes courage to either accept or decline an award from NARTH. However, my respect for him has not diminished—I suppose he is simply tired of being politically incorrect, and tired of the harassment and the intimidation. Or perhaps — has he himself become unable to separate his politics from science?

Nonetheless, Robert Spitzer has made a significant contribution to the literature, and has brought legitimacy to those who struggle with unwanted homosexual attractions. He has sent a clear message to a minority within a minority: ex-gays, and that clear message is "You do exist."

How did Bob Spitzer respond to my critique? "Very fair," he concluded to me in an e-mail. I invite members of NARTH to let Robert L. Spitzer know of your appreciation for his contribution to science. His email address is: RLS8@Columbia.edu. ■

101 Questions About Homosexuality

Mike Haley, manager of the Homosexuality and Gender Issues Department at Focus on the Family, discusses same-sex attractions in his new book.

Reviewed by Frank York

101 Frequently Asked Questions About Homosexuality by ex-gay Mike Haley, provides detailed answers to a series of questions about the origins of homosexual attractions, commonly misunderstood myths about gay behavior; gay theology; the emotional and physical dangers of homosexual behaviors, and much more.

The book is broken up into sections that speak to specific audiences: families, friends, church leaders, men, women; and, it provides an overview of what the popular culture is saying about homosexuality as well as what gay activist organizations are attempting to accomplish.

NARTH Featured Prominently In Book

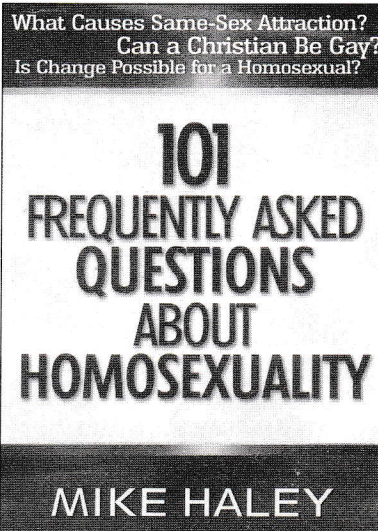
Haley quotes extensively from Dr. Joseph and Linda Nicolosi's book, *A Parent's Guide to Preventing Homosexuality* throughout his book and quotes Dr. A. Dean Byrd, a NARTH Scientific Advisory Board member, as well as Board member Dr. Jeffrey Satinover.

In his first chapter, "Answering the Basics," Haley quotes the Nicolosis on the issue of gender nonconformity in young boys and girls as the single most common factor associated with the future development of a same-sex attraction.

Later, in Chapter 5, "Answers for Men," he quotes Dr. Nicolosi's analysis of what happens when a young boy fails to identify with the masculinity of his father and begins to identify with the feminine in his mother. Eventually, this disidentification with the masculine becomes eroticized and homosexual behavior is often the result.

Mike Haley spent 12 years living the gay lifestyle and experienced what for many homosexual males is a typical story. He had a strained relationship with his father and began looking for adult male affirmation from other men. The relationship he found eventually turned into a sexual encounter at 11 years of age.

When Haley went to his school counselor for help with his same-sex struggles, his counselor told him he should realize he was "born gay" and should embrace his homosexuality. He began thinking he was a homosexual and pursued the lifestyle for more than a decade.



Haley eventually left the gay lifestyle after meeting an ex-gay named Jeff Conrad, author of *You Don't Have To Be Gay*.

Haley became involved with Exodus International and entered a half-way house in order to receive intense counseling and ministry to overcome his same-sex attractions.

The author urges individuals with same-sex attractions to seek help—either through Christian counseling, religious-based counseling, or secular counseling from individuals who believe that homosexuality is a condition, not a fixed identity.

He offers this advice to men and women with same-sex struggles: "You may feel ashamed. You may be afraid other people will find out. These feelings are hard to handle, but the weight of suffering alone is far more detrimental. ... Whether you need a friend's shoulder to cry on, understanding from another parent who's been where you are, or just someone to bounce ideas off of, *ask for help.*"

A Positive Motivation Is Key To Success

Mike Haley knows from personal experience that a keen desire to change is a key to success in overcoming unwanted same-sex attractions. He again quotes Dr. Nicolosi on this issue. Nicolosi observes: "Other indicators of favorable prognosis are lack of indulgence in self-pity, a positive sense of self, and the ego-strength to tolerate stress and frustration Other factors in treatment success are the ability to resist impulsive behaviors and to postpone gratification, the ability to set goals, and the capacity to reflect upon, verbalize, and learn from past experiences."

Homosexual Behavior Is Unhealthy

In Chapter 9, "Answering Culture," Haley lists the various emotional and physical dangers of homosexual conduct. These include higher rates of cigarette, drug, and alcohol abuse; higher rates domestic violence and mental illness; and far greater rates of sexual promiscuity and infidelity among gay couples. He quotes Dr. A. Dean Byrd who notes: "What is particularly disturbing is the lack of attention paid by the media to the research evidence reported in the *Archives of General Psychiatry* which concluded that gay, lesbian, and bisexual people were at higher risk for mental illness, specifically, suicidality, major depression and anxiety disorder."

Wealth Of Resources Offered

Haley's book not only provides the reader with sound advice on the origins of homosexual behavior and the prospects for change, he also debunks several gay myths including the claim that 10% of the population is gay. He also provides a useful list of organizations—Christian,

Jewish, and secular—including NARTH as the only Mental Health organization recommended.

Reference:

Mike Haley, *101 Frequently Asked Questions About Homosexuality*, (Eugene, Oregon; Harvest House Publishers; 2004.)

Editor of the Journal of Marriage and Family Therapy Takes a Stand for Science

By A. Dean Byrd, Ph.D., MBA, MPH

Dr. Karen S. Wampler, Editor of the *Journal of Marriage and Family Therapy*, (JMFT) has decried activism and elevated science to its proper place as she defended her decision to publish an article last year by NARTH member Dr. Christopher H. Rosik.

The JMFT article by Dr. Rosik was "Motivational, ethical and epistemological foundations in the treatment of unwanted homoerotic attractions" (2003, pp. 12-28).

Just recently, in the most recent edition of the JMFT (P. 395), Dr. Wampler described the difficulties she encountered after her decision to publish Rosik's article, and she reflected on the potential consequences for herself personally as well as for the *Journal*.

Criticism focused, she said, "not on the article itself, but on me as an editor accepting it for publication." Some readers chided her with "anger and disgust that I would accept something that was perceived as extremely harmful to gay, lesbian, bisexual and transgendered individuals and their families." Wampler noted that the discussion is continuing now within AAMFT itself, "triggered in part by publication of the Rosik article."

Citing the imperfections of even good research, Wampler correctly noted that any published study can be used to support political agendas. However, scientists must ensure that the findings of research are as free from personal and political influences as possible. The same high standards must apply whether or not a political agenda is supported.

Science, good science, should not be contingent on a study's consequences. Rather, the search for truth should override the strident cries of those who would define "diversity" as nothing more than a narrow politicism, and who would simply discount other research that does not support their political agendas.

In this instance, Dr. Wampler (and the JMFT Board) took a stand for science, and like a growing number of respected scientists who are rejecting the politics of intimidation, she does not regret the decision to publish the Rosik article.

She notes, "...this was not an easy decision, but it was the right one." I agree.

2003 NARTH Conference Papers Now Available

Last year's annual conference papers have just been printed
and are now available for \$10 per copy.

Articles are included by Christopher Rosik, Joseph Nicolosi,
Mary Beth Patton, Chris Kempling, Steven Donaldson, David Matheson,
and others.

Please contact the NARTH office for a copy.

On the APA's Same-Sex Marriage Resolution

By Warren Throckmorton, Ph.D.

*All on the APA's working committee knew the outcome they supported before they started "working."
The committee should have been called the "Same-Sex Marriage & Parenting Advocacy Committee."*

Recently the leadership of the American Psychological Association approved resolutions supporting same sex marriage and parenting. In the days since the announcement, many in and out of the association have asked why the APA leadership felt the need to get involved in this contentious issue. Good question.

The APA news release announcing the policy move stated that the leadership wanted to provide "policy recommendations for APA that would guide psychologists in the current public debate over civil marriage for same-sex couples."

Psychologists need guidance? That's laughable.

Guiding psychologists is like herding cats. Children need guidance. Cattle need guidance. Psychologists are not in their offices thinking, "You know, I am so grateful that I know what to think about gay marriage now." I am not buying that at all. While serving as president of the American Mental Health Counselors Association, I observed that many mental health professionals are not content just to give *advice* in the consulting room. Many are closeted public policy wonks. In other words, the APA leadership wants to guide *you*. Should you trust their judgment?

Many people might assume that the APA membership would vote on such important issues before the leadership would go public with a policy statement. *Not so*. No polling was done of the 150,000 members. Six committee members recommended the resolution to the 160 members of the Council of Representatives, and by a show of hands, the matter was done. So when APA president Diane Halpern said to the *USA Today* newspaper that the APA was "going out on a limb" to support same-sex marriage and parenting, a more accurate statement would be that the APA leadership had crawled out there without taking into account where the members stood.

Such research on attitudes of psychologists toward these issues has been conducted, but it was ignored. For instance in a 1999 *Professional Psychology: Research and Practice* article, psychologists were asked in a survey to choose between hypothetical gay and straight couples as a preferred adoption setting. Most psychologists favored the straight couple, particularly for the adoption of a female child.

Another assumption that the public might make is that the psychologists studying such matters would be impartial or at least that several points of view would be represented

on a committee. Not so in this case.

The individuals who were members of the Working Group appointed by the APA were all aligned with gay political objectives before they were named to the job. There was no diversity of view or research perspective on this committee. Let that sink in a minute. *All* on the committee knew the outcome they supported before they started "working." The committee should have been called the Same-Sex Marriage & Parenting Advocacy Committee.

A third thing many people would assume is that the process of developing policy on complex and controversial issues would require lengthy deliberation. Not so in this case.

The working group was only convened in February of 2004. They had less than six months on task. The short time on the matter may explain why some pretty important studies were omitted from consideration. For instance, the paper supporting same-sex marriage did not mention Stanley Kurtz's work, on the impact of same-sex domestic partnerships in Europe. The paper supporting same-sex parenting also did not mention a 1996 Children Australia study that compared children of straight married, straight cohabiting, and gay cohabiting couples on measures of school performance and social adjustment. The report by Sotirios Sarantakos found that "in the majority of cases, the most successful are children of married couples, followed by children of cohabiting (straight) couples and finally by children of (cohabiting) homosexual couples."

Even if the APA committee disagreed with the study's findings, they should have considered them. They did not. Space does not permit the examination of other studies unconsidered by the APA committee. This is not the way to develop professional consensus. A professional association that truly wanted to achieve a scientific consensus would have incorporated a much more diverse working group and taken much more time to consider research from all the social sciences.

Better yet, if the APA is really interested in guidance, I have a suggestion. To help the public and fellow professionals really understand the nature of professional consensus on any policy issue, let the membership be polled. Report the results along with whatever committee position is taken, even if there is disagreement.

Let the cats meow, even if they don't do it in unison. ■

**The APA committee
lacked diversity and never
sought a consensus from
its membership.**

Educator Examines "Coming Out" Process, Sexual Fluidity In College Students

*Curriculum Should Be Used,
She Says, to "Destabilize Heterosexuality"*

The process of coming out of the closet in a college setting is examined by Mary Ann Rasmussen, writing in the Spring, 2004 issue of *Theory Into Practice*, published by the College of Education at Ohio State University.

Rasmussen examines the views of various advocates of coming out in college, including Harbeck's *Coming Out of the Classroom Closet* (1992), Sears and Williams' book, *Overcoming Heterosexism and Homophobia: Strategies That Work*. Sears and Williams refer to closeted gay professors as "cowering, cowardly" individuals for failing in their duty to announce their orientation to students.

On Sexual Fluidity

Rasmussen reviews the work of Jonathan G. Silin in *GLQ: A Journal of Lesbian and Gay Studies*. In Silin's essay, "Teaching As A Gay Man," he states that he tells stories to his students about his sexual identity and that these "change over time and are transformed by the times."

Rasmussen believes that Silin's stories may encourage students to consider that sexual identity isn't stagnant and is not imposed upon them. In fact, sexual identity will "change over time, and students are involved in negotiating these changes."

In the same issue of *GLQ*, writer Didi Mahiha Khayatt states that coming out and making a declaration of one's sexual identity may be inadvisable because one's identity is "in flux." Khayatt urges gay teachers to be less concerned about self-identifying to their students as gay, but to introduce erotic texts into the curriculum that will help students grapple with their own sexual identities.

Rasmussen concludes by reaffirming her belief that examining gay themes in class is important because it has the "value of destabilizing heterosexuality" through curriculum content."

Researchers Survey Trauma Faced By "Two-Spirited" People

A report in the most recent issue of *Cultural Diversity and Ethnic Minority Psychology* examines the various emotional and physical traumas experienced by Alaskan Indians who view themselves as being "two-spirited" (gender-variant) individuals.

The study, "Culture, Trauma, and Wellness: A Comparison of Heterosexual and Lesbian, Gay, Bisexual, and Two-Spirit Native Americans," was published by five University of Washington psychologists.

The researchers explain that the term "two spirit" was adopted in 1990 by the Northern Algonquin to explain individuals who possess both male and female spirits within their bodies. The current use of the term covers transsexual, transgender, and other gender variant persons.

Lead researcher Kimberly F. Balsam observed:

"Colonization and compulsory Christianity led to the suppression of two-spirit roles in many Native communities. Today, most two-spirits face homophobic oppression from

both mainstream U.S. society and their own tribes and communities." The ancient roles of these gender-variant individuals often meant being shamans or witchdoctors.

The study involved a study of 197 Alaskan Indians living in the New York area. Of those, 179 gave researchers data on their sexual orientations. Out of this number, 3.4% described themselves as two-spirited individuals; 8.4% said they were homosexual; 2.2% said they were bisexual or unsure.

Each respondent was interviewed by phone for approximately three hours and given a questionnaire to fill out that dealt with cultural participation in Indian ceremonies; exposure to trauma and violence; physical and mental abuse; and substance abuse.

Two-spirited individuals reported higher rates of substance abuse, including hard drugs, and were much more likely to have used mental health services than heterosexuals. They also reported higher rates of childhood abuse at the hands of their parents and caretakers than did heterosexuals. ■

Researchers Study Sources of Male Anti-Homosexual Attitudes

Christian Beliefs, Social Conformity, Authoritarian Attitudes Implicated as Harmful

By Frank York

A psychologist at Northern Illinois University who has analyzed the source of anti-homosexual attitudes in heterosexual males, recently published his findings in *Psychology of Men & Masculinity* (July, 2004; Vol. 5; No. 2, 121-131).

Wayne Wilkinson conducted research to test R.W. Connell's 1995 paper suggesting that "hegemonic masculinity" (heterosexual male dominance in the culture) plays a role in heterosexual males' negative attitudes toward homosexuality.

Wilkinson designed a series of questionnaires for 159 undergraduate men at a Midwestern public university.

His purpose was to measure the Gender Belief System (GBS) and Right Wing Authoritarianism (RWA) as a source of anti-homosexual attitudes in these heterosexual males.

He notes that Gender Belief System is typically learned through the socialization process in which that males come to believe that certain behaviors are masculine and others are feminine. In addition, he observes that researchers have analyzed Right Wing Authoritarianism as a factor in anti-homosexual attitudes, with religious fundamentalism and Christian Orthodoxy as being closely associated with right-wing beliefs.

"Authoritarian" Individuals Demand Social Conformity

Right Wing Authoritarianism, says Wilkinson, is characterized by a demand that individuals submit to authorities and social norms, and involves hostility toward groups that refuse to conform to societal norms.

In studying the source of anti-homosexual attitudes in his undergraduate volunteers, he tested each with a Right Wing scale, which included 30 items. Students were asked to respond to such statements as "Some of the worst people in the world nowadays are those who do not respect our flag, our leaders, and the normal way things are supposed to be done."

In addition, he tested their attitudes by using a Christian

Orthodoxy Scale, a Gender Role Conflict Scale, and a Morality Beliefs Scale.

Principled Objections to Homosexual Acts are Labeled as "Anti-Gay"

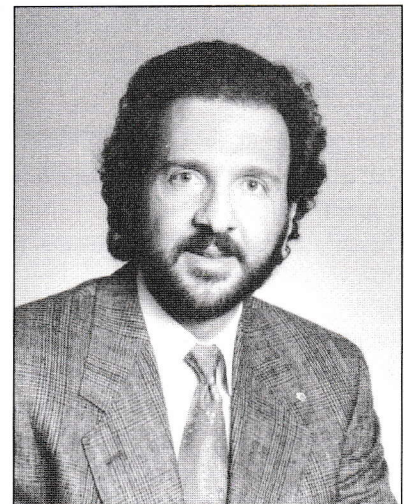
According to Wilkinson, "As would be expected, all the masculinity variables, Right Wing Attitudes, and Christian Orthodoxy were positively correlated with the antigay attitudes scale. Overall, RWA was moderately correlated with the masculinity variables, whereas orthodoxy was uncorrelated to the masculinity variables."

He observed, too, that previous research has shown that negative attitudes toward homosexuality are associated with lower educational levels.

But Ignorance and Prejudice Do Not Explain Aversion to Homosexual Acts, Says Nicolosi

NARTH President Dr. Joseph Nicolosi notes of this study: "The researcher's implication that 'anti-gay attitudes' are based on ignorance and prejudice does not explain this phenomenon. Other writers have proposed—plausibly, I think—that there is a 'natural homophobia' inherent in men. This aversion helps to protect men from engaging in sexual practices that are threatening to their masculine strength and dignity, and that de-stabilize the social order while also eroding masculine friendship and healthy mutuality."

Dr. Nicolosi continued: "And from an evolutionary perspective, an aversion to homosexual behavior helps prevent men from channeling their erotic energy into unproductive, anatomically inappropriate, non-procreative sex."



Dr. Joseph Nicolosi

Psychologist Analyzes Teenagers' Talk About Homosexuality

Clark University Professor Neill Korobov analyzes the hidden anti-homosexual and sexist attitudes of teenage boys in a study published in *Psychology of Men & Masculinity* (Vol. 5, No. 2, 178-189, 2004).

He theorizes that boys use humor, displays of indifference, and disclaimers to position themselves as "tolerant" about homosexuality, while still maintaining their social status as masculine heterosexuals.

Writing in "Inoculating Against Prejudice: A Discursive Approach To Homophobia And Sexism In Adolescent Male Talk," Korobov studied the content of conversations of boys ranging in age from 10 to 15 years of age who attended a New England school.

Korobov conducted this longitudinal and cross-sectional study by recording more than 300 hours of audio and video talk from 54 boys. The boys were involved in guided and non-guided interview sessions.

During these talks, the boys were encouraged to freely dis-

cuss homosexuality, heterosexuality, as well as their attitudes toward girls. Korobov discovered that these boys typically masked their anti-homosexuality and sexist attitudes through the use of humor, nonchalant behavior, and by feigning liberal or egalitarian feelings to hide their real attitudes.

These teens used verbal techniques to protect their positions as heterosexual males while sounding tolerant of homosexuality or friends who may have come out to them as homosexuals.

According to Korobov, "In the data examined, the boys used a range of positioning strategies, such as requests for clarification, suppression, the use of softeners and extreme case formulations, differentiation, displays of indifference, disclaimers, and conditionals, to name a few."

These devices, says Korobov, are used for "constructing non-prejudiced forms of normative masculinity," and are examples of the complex ways that males mask their actual prejudices.

Surf Control Filtering Software Unblocks NARTH Site

NARTH recently learned that the library internet filtering program SurfControl was preventing library patrons from viewing our site on the grounds that we engage in "hate speech."

By Frank York

In mid-September, a supporter of NARTH notified Dr. Joseph Nicolosi that the filtering software at his local library was blocking access to the NARTH web site, www.narth.com.

The supporter contacted SurfControl about the blocking, and was told that NARTH was considered a hate group because it had a social agenda against a person's sexual orientation. The SurfControl representative asserted that NARTH had a "supremacist attitude, coercing people to convert" to heterosexuality.

The NARTH supporter then urged the library officials to review the NARTH site, and the library immediately unblocked it.

Then we contacted SurfControl by email and asked to con-

firm if it was indeed their policy to prevent library patrons from viewing the NARTH site on the grounds that we disseminate "hate speech." We asked to be unblocked.

A representative from SurfControl responded immediately and said: "Thank you for drawing our attention to the site in question. We've reviewed the content on the site and recategorized it to Society & Culture. Please accept our apologies if the previous categorization caused any inconvenience."

Said NARTH president Joseph Nicolosi, "We thank the library patron who alerted us to this situation—a person who was willing to pursue the matter until he got the library officials to unblock our site from library computers. We are also appreciative of SurfControl's quick response and their willingness to respect our right to principled free speech."

Oprah Winfrey Show Features Children with Gender Identity Disorder

Being "born in the wrong body" can be a source of beauty and wisdom, therapist says

Talk show host Oprah Winfrey's August 24 show featured a discussion of children who wish to have sex-change operations.

Winfrey interviewed her first guest, who appeared to be a normal 11-year-old boy. In actuality, this boy was a girl but was living as a boy.

According to Winfrey, "right now, according to experts, there are thousands of children who are living what appear to be very normal lives, but deep inside they know something is terribly wrong or they feel that something is terribly wrong, and these children are saying that they were born in the wrong bodies. Their parents have to decide whether or not to let their children live as the opposite sex."

Winfrey interviewed Jana Ekdahl, a self-described transgender therapist who told parents that children can become transgendered in the womb, with brain development going one direction and the body going the other, and that such a state is a thing of beauty and a source of special wisdom.

According to Ekdahl's web site, she views "gender-variant youth" as "changing the face of gender for us all. I sometimes view them as archetypal warriors on the cutting edge

of that space between the two polarities that we hold onto so tightly. Perhaps it would serve us all to go to that place ... that special space between genders ... and see what we find there."

Ekdahl says, "I embrace the philosophy of Carl Jung and Depth Psychology. The union of East and West is essential to my work, as I have studied to learn about the modalities of each. Buddhist thought and Native American spirituality are interwoven into the fabric of my psyche. I have access to this wisdom to share with my clients, either directly or otherwise."

Dr. Joseph Nicolosi observed of Winfrey's show: "Oprah's compassion is badly misplaced. A girl can't become a boy; she was designed to be a female, and to tell a child she can be something she is not is an abdication of adult responsibility. What if she were born black, but thought she was actually white? Should her parents have her skin whitened? "

"There are news stories now," he continued, "about people who believe they really should have been born legless, and they ask a doctor to amputate their legs. This, like gender confusion, is a sad delusion with which no doctor should collaborate."

Science Versus The "Gay Gene"

By Frank York

The Human Genome Project, which completed mapping the human genetic molecular structure in 2003, has yet to find a "gay gene," according to researchers in the August, 2004 issue of *Reason and Revelation*.

Drs. Brad Harrub, Bert Thompson, and Dave Miller, note that the search for a gay gene has consistently failed over the past two decades in spite of the efforts of gay activist researchers to locate a genetic basis for homosexuality.

The authors observe: "Skin color and other genetic traits can be traced through inheritance patterns and simple Mendelian genetics. Homosexuals are identified not by a trait or a gene, but rather by their actions. Without the action, they would be indistinguishable from all other people."

They note that even if a gay gene is found, it would still not mean that individuals need to act upon homosexual desires. "Merely having the gene would not force one to carry out the behavior. For instance, if scientists were able to document that a 'rape gene' existed, we certainly would not blame an individual for possessing this gene, but neither would we allow him to act upon that rape disposition."

Activist Researchers Fail To Prove Existence Of Gay Gene

The writers review the research on three of the most often quoted studies that are used in support of the theory that a gay gene exists.

The first is Dr. Simon LeVay's well-known brain study published in 1991. Dr. LeVay reported subtle differences between the brains of homosexual and heterosexual men. He measured the size of the interstitial nuclei of the anterior hypothalamus (INAH) in postmortem tissue from women, men presumed to be heterosexual, and homosexual men.

The study, though provocative, contained numerous flaws and has never been replicated by other researchers. In his study, LeVay used the brains of homosexuals who had died of AIDS. It is known that AIDS decreases testosterone levels, so it is possible that this would cause these individuals to have a smaller INAH.

In the well-known twins study by Michael Bailey and Richard Pillard, the researchers examined the rates of homosexuality among fraternal twins, identical twins, non-identical twins, and adoptive brothers. Bailey and Pillard found that 52% of identical twins were homosexual; 22% of fraternal twins were homosexual; 11% of adoptive brothers were homosexual; and other similar findings.

Harrub, Thompson, and Miller note significant flaws with

this study: "If there was, in fact, a 'gay gene,' then all of the identical twins should have reported a homosexual orientation. And yet, in nearly half of the twins studied, one brother was not homosexual."

The authors also examined Dr. Dean Hamer's study of the X chromosome and DNA markers he maintained was evidence of a genetic basis for homosexuality.

Hamer and his team collected data on 76 gay males and 40 gay brother pairs and examined the DNA markers in a region called q28—a gene located at the tip of the long arm of the X chromosome. Hamer found that 33 of his subjects exhibited similar genetic markers in q28.

Hamer's study, however, was also flawed. One of the basic problems, according to critics, was that he failed to test a heterosexual group of males as a control group. Heterosexuals may possess the same marker in q28 that he discovered in the homosexuals he tested. In addition, other researchers have attempted to replicate his findings and have found statistically insignificant findings. One researcher noted that the results "suggest that there is a linkage, [but] it's so weak it's not important." ■

Researchers Say Sexual Risk-Taking Due to Social Oppression

NARTH clinician Christopher Rosik critiques study's conclusions

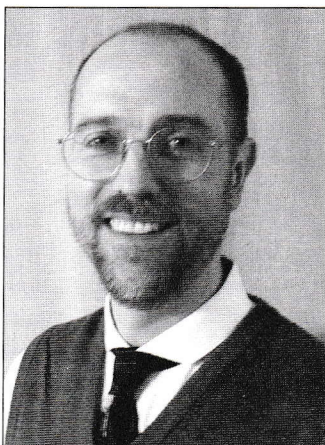
By Frank York

Three researchers claim that Latino gay males engage in risky sexual behavior because of the negative influence of social oppression, homophobia, and poverty.

The researchers have published their findings in the August, 2004, issue of *Cultural Diversity And Ethnic Minority Psychology* (Vol. 10, No. 3, 255-267).

The study's authors were Rafael M. Diaz, San Francisco State University; George Ayala, AIDS Project Los Angeles; and Edward Bein, University of California, Berkeley. They conducted interviews with 912 Latino gays between October, 1998 and March, 1999. Prior to this, the researchers interviewed another 300 gay and bisexual males between November, 1996 and March, 1997. Diaz and Ayala have also written "The Case Of Latino Gay Men And HIV Risk."

The research questionnaire was designed to test the hypothesis that sexual risk is heightened by social oppression. They observed: "Specifically, we hypothesize that experiences of social oppression—discrimination on the



Christopher Rosik, Ph.D.

basis of race/ethnicity and sexual orientation as well as hardships related to low socioeconomic status—can lead to higher sexual risk by producing high levels of psychological distress."

The researchers developed 11 items to measure experiences of "homophobia"; a four-point Likert scale to measure psychological distress; a 10-point scale to assess participation in difficult sexual situations; and detailed questions about the two most recent sexual encounters experienced by gays who participated in the survey.

Data gleaned from these questionnaires was analyzed to compare experiences of social oppression with measurements of sexual risk.

Sixty-four percent of those interviewed had experienced verbal harassment as children; 70% felt their sexual orientation hurt and embarrassed their families; and 64% had to pretend to be gay in order to be accepted. In addition, gay Latinos experienced high rates of psychological distress. Sixty-one percent reported sleep problems and 44% report-

ed anxiety or panic attacks; 17% reported suicidal ideation at least once in a six-month period.

The study also revealed that 31% were afraid of being discovered in a public sex environment; and 31% were under the influence of drugs while 54% were under the influence of alcohol when engaging in sex.

According to the researchers, the data shows that "men who are sexually risky report significantly more experiences of homophobia, racism, and financial distress than their low-risk counterparts." They continue, "social oppression affects sexual risk by increasing the likelihood that individuals participate in situations that make it difficult to practice safer sex."

"Society Should Change"

They conclude by urging that discriminatory policies against gays will lead to a "more just and healthy society, and perhaps the most important tool to fight diseases like AIDS that breed on social injustice, prejudice, and inequality."

NARTH Therapist Says Study's Limitations Should Have Been Included in Discussion

Christopher Rosik, Ph.D., has reviewed this study and has noted numerous methodological flaws in it. Rosik is on the clinical staff of Link Care Center in Fresno, California.

In a statement provided to NARTH, he made the following observations:

"There are a number of serious limitations to this study, and it is of interest that no presentation of study limitations is provided in the discussion session.

"First, in order to control for the potential confound of number of sexual partners, the authors limited their assessment of sexual risk behaviors to only the participants' two most recent sexual partners during the past year. It is not clear how this fully solves that problem, as one would think that higher numbers of sexual partners constitutes a risk factor in and of itself.

"In this study, the results indicated that 64% of the participants had two or more partners in the past year. It appears that by definition in this study a high number of sexual partners is not a risk factor as long as one practices 'safe sex.' This is a most questionable assumption.

"Second, methodological limitations abound. Despite the cross-sectional nature of this study, the authors' utilize

words such as 'predict' and 'produce' that imply causation. However, correlational studies do not allow for implied conclusions on the directionality of causation between the variables under examination. Thus, the study can not conclusively determine if sexual risk-taking is caused by poverty or homophobia, or whether engaging in behaviors like sexual risk-taking contributes to the conditions that lead to poverty or homophobia.

An Interactionist Perspective Is Much More Plausible

"I suspect the truth is somewhere in between, with an interactionist perspective that sees each reinforcing the other. Yet even partially attributing the cause of any kind of stigmatization to the individual is not permitted in the world of current social scientific thought. The authors' underplay, in my judgment, the fact that even the low sexual risk group of gay Latino men display strikingly high levels of sleep problems (52%), fear or panic for

no apparent reason (40%), sad or depressed mood (78%), sex under the influence of alcohol (51%) and suicidal ideation (15%).

"As is frequently found in this area of research, the sample pool was obtained through gay social venues in major urban centers. Generalization of the findings beyond the immediate reference group of participants is therefore questionable. The study also fails to provide any comparison groups that would help in the interpretations of the findings. For example, it would have been useful to compare heterosexual Latino men with similar levels of exposure to racism and poverty to see more clearly the effects of sexual orientation.

"Finally, highlighting again the subjective dimension of social science research, the authors did not include in their analysis variables that would be of particular interest to NARTH members and would have further clarified the meaning of the findings. Variables such as childhood sexual and physical abuse, family structure, and perceived emotional bond to one's father are just a few factors that might moderate or mediate the relationships between the indexes of social oppression, psychological distress, and sexual risk behaviors among the gay Latino men investigated in this study.

"In short, the present study provides some useful data, but more importantly, highlights the kind of limitations that are ubiquitous in this literature. Consequently, the study's findings should by no means be considered conclusive." ■

The truth is likely somewhere in between, says Rosik: Social oppression cannot be assumed to cause all of the psychological problems.

Reorientation Panel Said to Be Well-Received at APA

Drs. Warren Throckmorton and Mark Yarhouse led an American Psychological Association panel to discuss sexual-orientation theories and the possibility of change. The panel, held in late July, was part of the APA's annual conference, which took place this year in Honolulu, Hawaii.

Dr. Throckmorton and Dr. Yarhouse presented evidence from their research that indicated that individuals could overcome same-sex attractions—especially those clients with a religious background.

According to Dr. Throckmorton, "Mark and I presented the side that argued that a same-sex attraction does not obligate a person to declare a gay identity. We argued that sexual identity management was a very viable option for young people whose beliefs and values do not endorse homosexuality."

Throckmorton and Yarhouse view success in changing a person's sexual orientation not as something quickly achieved, but as a process over time.

During the Q&A session, both psychologists were treated cordially and with respect. "It was the kind of response that I think a professional association ought to be known for," said Throckmorton.

He noted that when he spoke four years ago at an APA conference in Washington, DC, the audience was decidedly hostile to his message. This year was different. He expressed appreciation to the APA for allowing such a panel to be conducted.

Throckmorton was also encouraged that a number of psychology graduate students were in the audience, and he expressed gratitude that they had been exposed to his views. "These graduate students were exposed to a perspective they had never heard before," said Throckmorton.

Dr. Brent Scharman, past president of the Utah Psychological Association, told Throckmorton that this was the best presentation he had heard in 20 years.

Thoughts on Rediscovering One's True Self

—First-person story by a member of the Jewish ex-gay ministry, JONAH

What does it mean to heal same-sex attractions? It is not about "change" in the sense of merely "retraining" yourself sexually, because the underlying problem is not sexual, but emotional.

Most of us fell into this problematic sexual attraction when we felt (or were made to feel) insufficiently masculine, separate and foreign to other men. The sexual attraction is a mistaken, broken attempt to get the male love and approval we didn't get, or an attempt to fill the gap we feel in our own masculinity with another man's manliness.

But here, too, the healing is not about "change." Because the truth is that we are sufficiently masculine - just as we are. The only thing that needs to "change" - or just be discarded - is our mistaken notion of inadequacy.

Two guys go into a gym: One guy says, I am trying to heal my SSA, and it says in the advice to reconnect with my masculinity and do manly things... so I am going to build up my weak, unmanly body and then I will be sufficiently masculine.

Nope, nope, nope. This guy is still in the mind trap that leads to homosexual attraction.

If you think you are too short/skinny/bald/weak/intellectual/sensitive to be truly masculine, then find a busy street corner. Within a few minutes a shorter/skinnier/whatever guy will come along - who doesn't think he's unmanly, and who isn't attracted to other men.

If you think you need to change something about yourself to be acceptably masculine - the only thing that needs to change is that *thought!* That's why ex-gay programs are not about "change" - not that insecure, catching-up or making-over kind of change.

And the second guy? He's also trying to heal from gay attractions. But he says, my distorted self-image kept me from doing sports, from enjoying working out with my male body, and now I am going to restore myself, now I will have the experience, and take pleasure in the activity and the camaraderie that I used to feel distant from.

Sure, his body will change. But this man is not "changing" - he is returning to his real self. That is what JONAH is about. That is our healing path and it is the same healing path that all people use to heal from their troubles, not just those dealing with same-sex attractions.

Rosh Hashana is the Jewish New Year. This is the time of "teshuva." Teshuva does not mean "repentance" - in the sense of doing penance, or being consumed by regret. Although these are part of the process of "teshuva" they are not the main thing, or the final goal.

Teshuva means "return" - to our essential self, to who we really are. That is what we at JONAH do all year round. Yes, in the short term JONAH uses some techniques of "habit reformation" and "retraining." Yes, it takes work to cleanse and revise our self-image - and make the new way of thinking a habit. Yes, there must be change in our behavior and that's a struggle.

We are not saying this is easy. Returning means turning - and it's always hard to change course. But none of this work comes to fill a lack - there is no real lack! It comes to restore atrophied limbs in our souls. To reveal and strengthen aspects of ourselves that were always there and

have always been part of us. It comes to strengthen our will.

In these times, people - especially Americans - are caught up in lot of nip-and-tuck, externally-driven reinvention. Much of it springs from insecurity. It is not growth, but self-obliteration - mask upon mask.

Our way - the JONAH way - is the exact opposite. It is a rediscovery of our true, manly selves, of our healthy, normal connection to other men, and to women. We are here to grow into ourselves, to return to our truest selves. Then we will be able to truly love - ourselves, others, and G-d.

Social Worker Advises Comprehensive Sexual Orientation Studies For Students

By Frank York

Social worker Elizabeth Schroeder, writing in *American Sexuality Magazine*, urges public school teachers to devote larger portions of their class time to discussing homosexuality, bisexuality, and transgenderism.

Ms. Schroeder is a signer of the Alternatives to Marriage Project "Affirmation of Family Diversity," published in 2000. The Alternatives to Marriage Project promotes cohabitation; gay, lesbian, bisexual, and transgender relationships; and polyamory (multiple partners).

Schroeder says that sexual orientation lessons are not being taught effectively in public schools because teachers lack reliable information, fear conflicts with students over religious objections, or are simply uncomfortable discussing such topics.

According to Schroeder, "The primary reason for teaching about sexual orientation is, quite simply, that it is part of who we are. It is not supplemental, but rather vital information that people should have in order to understand



their heterosexuality, bisexuality or homosexuality. ... Omitting sexual orientation from a sexuality education course is like omitting grammar from an English class."

Schroeder urges teachers to access resources provided by the Gay, Lesbian, and Straight Education Network, Outproud, as well as Transproud, an organization for teens who are questioning their gender identity. ■

Study Of Bisexual/Gay Teens in Thailand Reveals Serious Risks

Newly published findings reveal alarming mental and physical health risks facing bisexual and homosexual teenagers.

Teenagers in Thailand who identify as bisexual or gay face a series of serious psychological and physical health risks, according to researchers writing recently in *Archives of Sexual Behavior*.

A team of researchers conducted interviews in 1999 with 1,725 teens between the ages of 15-21 who attended school in Chiang Rai, Thailand. The students were given a series of questionnaires that dealt with same-sex activities and attractions; condom use; and drug and alcohol abuse.

The teens who identified as gay or bisexual were identified as "HB teens" throughout the study. Self-identified bisexuals or gays accounted for 7.7% of males and 8.2% of females in the study.

The study discovered the following about HB versus heterosexual teenagers:

- HB teen males began sexual contact at much earlier ages than heterosexual males (mean: 14.7/14.9 years old compared to 16.8 years old for heterosexual males).
- HB males had a significantly higher number of sexual partners than did heterosexual males.
- 12% of HB males had been paid for offering sex; far higher than heterosexual males.
- 26% of HB males had been coerced into sexual contact or intercourse, compared with 4.6% for heterosexual males.
- The report noted: "In our study, HB males were six times more likely to have been coerced than were heterosexual

males. HB females were 1.5 times more likely to have been coerced than were heterosexual females."

- HB females had a far higher rate of providing sex in exchange for money, gifts, or favors than heterosexual females (14.1% to 3.5% for heterosexual females).

- HB males used methamphetamines (for weight reduction) at a higher level than heterosexuals (52% to 21.8%).

- HB males reported more social isolation and depression than their heterosexual counterparts. No such differences were reported between HB females and heterosexual females.

- HB males used considerably less alcohol than heterosexuals; but HB females used more alcohol and drugs than their heterosexual counterparts.

In their conclusion, the researchers observed: "... the higher levels of sexual coercion and selling sex among HB males and females along with the higher levels of sexual activity, social isolation, and signs of depression in HB males point at the need for differential health-education messages among heterosexual and HB youth." ■

Reference:

Fritz Van Griensven, Peter H. Kilmarx, Supaporn Jeeyapant, Chomnad Manopaiboon, Supaporn Korattana, Richard A. Jenkins, Wat Uthavivoravit, Khanchit Limpakarnjanarat, Timothy D. Mastro, "The Prevalence of Bisexual and Homosexual Orientation and Related Health Risks among Adolescents in Northern Thailand," *Archives of Sexual Behavior*, Vol. 33; Issue 2; 2004; P. 137.

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We look forward to hearing from you!

Theologian Explains Catholic Teaching on Homosexuality

"The body speaks the truth about man," he says

by Frank York

Theologian James G. Knapp, S.J. has published a detailed analysis of Pope John Paul II's "Theology of the Body," which deals, in part, with the issue of homosexuality.

Father Knapp directly quotes Church teaching: "homosexual acts are intrinsically disordered and contrary to the natural law. They close the sexual act to the gift of life. They do not proceed from a genuine affective complementarity. Under no circumstances can they be approved."

In addition, Knapp quotes from "On the Pastoral Care of the Homosexual Person" from the Congregation for the Doctrine of the Faith. This Church document says that while homosexual attraction is not sinful, it "is more or less a strong tendency ordered toward an intrinsic moral evil and thus the inclination itself must be seen as an objective disorder."

The "Theology of the Body" begins with an instruction on the origins of mankind in Genesis, and God's plan for male and female, human sexuality, and reproduction. Pope John Paul quotes from Genesis 127-28, 31, which says, "Be fruitful and multiply, and fill the earth and subdue it ... And God saw everything he had made, and behold it was very good." In the second chapter of Genesis, the Lord creates Eve out of Adam and both realize they are made for each other—and for reproduction.

On the contrary, however, the story of Sodom speaks of a sin that is "very grave" and that "cries to heaven" (Genesis 18:20-19:29).

Father Knapp notes that both the Old and New Testaments condemn homosexuality as a sinful act and that Church teachings have consistently held that homosexual acts are immoral. He quotes from the writings of St. Thomas in *Summa Theologiae*, who takes up a discussion of whether homosexual acts are the worst among sins of lust. St. Thomas quotes Augustine who said that "of all these, that which is against nature is the worst."

St. Thomas concludes that "by the unnatural vice, man transgresses that which has been determined by nature with regard to the use of venereal actions; it follows that in this matter, this sin is gravest of all. After it comes incest, which ... is contrary to the natural respect which we owe person related to us."

Father Knapp notes that sexual intercourse outside of marriage is immoral but that acts involving sexual intercourse

outside the context of male-female relationships are not only immoral but unnatural. "Such an act not only violates the good of marriage, but it violates the natural purpose of the sexual organs and the sexual power."

Homosexuality, Father Knapp notes, is inherently infertile and a homosexual relationship can never fulfill God's plan for reproduction.

The Naturalness of Heterosexual Coupling

He quotes from a study done by Diane S. Dewane on the "Biochemistry of Unity and Indissolubility." In her study, Dewane investigated the role that oxytocin and vasopressin play in creating a bonding between a male and female during intercourse. She notes that "In humans, both male and female, there is a rush of this 'bonding' oxytocin during the climax of sexual intercourse. The same hormone has been found to be released in smaller quantities when stimulated by gentle caressing and cuddling."

The other hormone, vasopressin, is released in males after intercourse, "and seems to influence bonding as well," says Dewane. These chemicals work in a complementary way to bond males and females during intercourse.

The chemicals seem to play a role in prompting a desire for the male to remain with the female and to defend the relationship against outside influences.

Father Knapp quotes from the extensive research survey conducted by Michael Flanagan and published in *Linacre Quarterly* on "The Medical Abnormality of Homosexuality."

Knapp observes: "Dr. Flanagan's medical judgment, supported by the results of these many studies, is that homosexual activity involves behaviors that are dangerous and involve serious risks to health. Homosexual activity, whether pursued with many partners or only one, will have negative effects. The 'gay lifestyle' is not a healthy lifestyle."

Knapp concludes his essay by stating: "This theology illustrates as never before why the conjugal union of husband and wife is a sacred union given by God, and calls married and unmarried people to authentic, self-sacrificing unity, fidelity, and chastity. ...

"The body speaks the truth about man. The body expresses the person." ■

Catholic Law Center Wins Free Speech Victory

The Thomas More Law Center has won a victory for a Catholic student whose viewpoint was banned from a panel discussion during Diversity Week

By Frank York

A Detroit Federal District has ordered the Ann Arbor Public Schools to pay \$102,738 in attorney fees and costs to the Thomas More Law Center for winning a lawsuit on behalf of high-school student Betsy Hansen.

Hansen had been banned from expressing her religious beliefs about homosexuality in 2002 during a "Diversity Week" program at Pioneer High School. The school had sponsored a "Homosexuality and Religion" discussion panel but had refused Hansen's request to include a panel member who would express Catholic beliefs about homosexuality.

The school claimed that Hansen's message was negative and would have watered down the positive religious mes-

sage they wanted to convey—that homosexual behavior was consistent with Christian teachings.

The Thomas More Law Center filed suit against the school district and several officials in July, 2002. The Center maintained that Hansen's constitutional right to free speech had been violated.

Detroit Judge Gerald E. Rosen issued a 70-page ruling in Hansen's favor. Rosen noted: "This case presents the ironic, and unfortunate, paradox of a public high school celebrating 'diversity' by refusing to permit the presentation to students of an 'unwelcomed' viewpoint on the topic of homosexuality and religion, while actively promoting the competing view."

Social Workers Urge Mainstreaming of Gay/Lesbian Adoption

Social worker Scott D. Ryan and two associates have urged that adoption policies be revised throughout the United States to include the adoption of children by male and female homosexuals.

Ryan says that "Laws and regulations, narrow definitions of family, homophobia, and heterosexism limit the possibility that lesbians and gay men will be considered as adoptive parents." He also named Judeo-Christian tradition as a major impediment to gay and lesbian social goals.

"Coming out of the Closet: Opening Agencies to Gay and Lesbian Adoptive Parents," was published in *Social Work*, (Vol. 49; Issue 1; 2004).

Ryan urges that social workers adopt a more flexible definition of "family" which includes gay and lesbian parents who wish to adopt children. He encourages social workers to implement a series of strategies inside their organizations to change policies concerning the placement of children in gay households.

Among them are: Providing training to overcome what he labels "heterosexism" among staff members; and using the policy statements from the American Psychiatric Association, Child Welfare League, American Psychological Association, and other professional groups to change opinions.

In addition, he notes that a "strong association exists between Western Judeo-Christian theology and negative attitudes toward gay men and lesbians. Training for individual workers might include information about current interpretations of biblical references to help modify attitudes (Boswell, 1980)."

Training should also include creating special lesbian and gay committees that will provide more visibility for homosexuals inside an organization.

Ryan suggests that when social workers encounter critics who use biblical arguments against same-sex parenting, they should not be allowed to define the discussion. Social workers should "reframe the focus on areas of agreement, such as the best interest of the child and permanency or constitutionality and civil rights."

In addition, the adoption agency should establish a cadre of researchers and experts who can be referred to for media comments. These experts will also help reframe the issue, he says, to counter the opposition.

Reference:

Scott Ryan, Sue Pearlmutter, Victor Groza, "Coming out of the Closet: Opening Agencies to Gay and Lesbian Adoptive Parents," *Social Work*, Vol. 49; Issue 1; 2004; P. 48.

Pediatrics Group Urges Pro-Gay Counseling for Teenagers

Doctors Urged to Show Support for Alternative Sexualities

The June, 2004, issue of *Pediatrics*, the journal of the American Academy of Pediatrics, has published "Sexual Orientation and Adolescents," by Dr. Barbara L. Frankowski, a member of the AAP's Committee on Adolescence.

Dr. Frankowski urges pediatricians to provide positive counseling for teenagers who believe they are homosexual, bisexual, or transgendered. She states that "human sexual orientation most likely exists as a continuum from solely heterosexual to solely homosexual."

Sexual orientation, says Frankowski, is determined by a combination of genetic, hormonal, and environmental influences and is developed early in life.

The author notes that non-heterosexual youth have higher suicide rates, higher HIV infection rates, and more substance abuse problems. These negatives associated with

gay life, she states—without offering supporting evidence for her claim—are not "attributable to homosexual per se."

Gays experience stigmatization for their gender nonconformity, as well as "stress, violence, lack of support, dropping out school, family problems, acquaintances' suicide attempts, homelessness, and substance abuse."

Dr. Frankowski urges pediatricians to use gender-neutral language when discussing sexual orientation with non-heterosexual teens, and to display posters, brochures, and information on office bulletin boards that demonstrate the doctors' support for alternative expressions of sexuality.

Pediatricians are also urged to encourage abstinence, discourage multiple sex partners, and to provide safer-sex guidelines for all adolescents. She also suggests that pediatricians become community activists to help promote awareness about the unique problems of non-heterosexual youth.

New Gay Book Discusses "Sex As Prayer"

Alyson Publications, one of the largest gay publishers in the U.S. has recently published *Gay Perspective: Things Our Homosexuality Tells Us About The Nature Of God And the Universe*, by Toby Johnson.

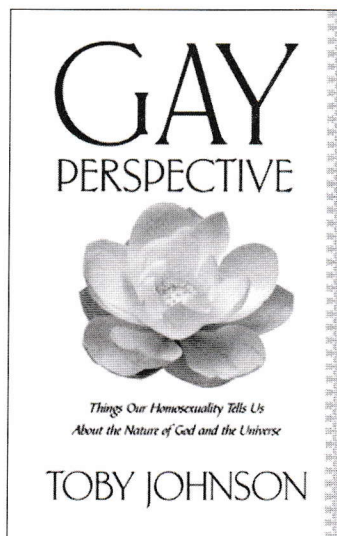
Dr. Peter J. Plessas reviewed Johnson's book in the May, 2004, issue of the Lambda Book Report. Plessas is a clinician who lives in San Francisco and has an "archetypal psychology practice" working with gay males.

Plessas says *Gay Perspective* shows the reader that:

"... our purpose in our orgasms is an expression of 'expending excess'—we do it for the evolution of the species. *Gay Perspective* also reminds us that our sexuality has spiritual roots; sex as prayer—a communion with self and with God."

Plessas also notes that Johnson's book praises pedophilia. He says it —

"reclaims pedophilia from its heterosexual fear-based projections. The public eye has been focused on the shame of



being molested in male-male relationships as evidence of latent homophobia. Johnson recalls the ancient practice of pederastia; the practice of an older man taking a younger man as lover/pupil. Johnson even speculates that the current pedophile priests could be—as they were in the past—initiators of young people into the realm of sexuality."

Plessas says the book's author has been deeply influenced by the writings of mythologist Joseph Campbell and urges "us to find God inside our own lives." Plessas notes that many of the monotheistic religions failed to create room for gays "in their own mythology."

Johnson, however, combines the teachings of the "historical Jesus and, from the Hindu tradition, the myth of Bodhisattva Avalokiteshvara, a deity who transcends both male/female and time/eternity," according to Plessas.

The reviewer concludes by noting that Johnson's book, "... offers a transcendent doorway to spirit for anyone who is searching for higher understanding of their sexuality and the spiritual power it holds." ■

Gay Men's Group To Present Sessions On Transgenderism And Sodomasochism At Religion Conference

"The embrace of homosexual practice," says a traditionalist religious scholar, "logically and experientially demands" the acceptance of a broad range of sexual aberrations, not just homosexuality

The Gay Men's "Issues In Religion" Group will be presenting workshops at the American Academy of Religion's (AAR) 2004 Annual Meeting in San Antonio, Texas (November 20-23).

The AAR is an umbrella organization of professors of religion, church historians, theologians, and ethicists.

The gay group will be presenting a series of lectures with the theme: "Power and Submission, Pain and Pleasure: The Religious Dynamics of Sodomasochism," as well as a workshop on transgenderism (including transsexualism and transvestism).

Justice Tanis with the gay Metropolitan Community Church will conduct a lecture titled, "Ecstatic Communion: The Spiritual Dimensions of Leathersexuality."

Thomas V. Peterson, Alfred University will present a session titled, "S/M Rituals in Gay Men's Leather Communities: Initiation, Power Exchange, and Subversion."

Katherine Baker of Vanderbilt University will present a workshop called "The Transvestite Christ: Hedwig and the Angry Inch Perform Queer Theology."

Dr. Robert A. J. Gagnon, associate professor of New Testament at Pittsburgh Theological Seminary, notes that

this year's theme is a complement to the session conducted by the gay men's group at last year's AAR conference: "Love is a Many Splendored Thing: Varied Views on Polyamory."

Last year, the group promoted the concept of multiple sex partners as being blessed by God. One author presented a workshop called "Trinitarian Tango: Divine Perichoretic Fecundity in Polyamorous Relations" and noted that Christians traditions fail to apply the Trinitarian concept of three partners to human sexuality.

"Why do people think that bringing male homosexual behavior into the mainstream is going to tame male homosexuality," said Robert Gagnon, "rather than destroy basic societal norms?" Dr. Gagnon is associate professor of New Testament at Pittsburgh Theological Seminary.

"One wonders what is next for the Gay Men's group at AAR: the promotion of incest, 'pedosexuality,' and bestiality? There is certainly little or nothing in the presenters' theology that would lead away from such ultimate absurdities," he added.

"Like most things, the bizarre stuff that makes its way through the religious academy of scholars eventually filters down to church leaders," said Dr. Gagnon. "It represents the coming wave. Look out. The embrace of homosexual practice logically and experientially demands it."

Law of Nature Excludes Homosexuality, Says Australian Physician

An Australian medical ethics expert told an audience at a marriage conference this past summer that homosexuality prevents men and women from joining the great "circle of life."

Dr. David van Gend told the audience, "By its very nature, homosexuality has excluded itself. It has stepped outside the circle of life—the timeless, endless natural circle of male and female, parent and offspring."

He notes that the origins of homosexual behavior are complex, but "whatever its origins, the outcome of homosexuality is best understood as a very complex state of confusion over sexual identity."

Van Gend cites the National Health and Social Life Survey published in 1994 in the U.S. In this survey, 8% of the 16-year-olds thought they were gay—but, "significantly, that by age 18 only 4% still thought they were gay, and by age 25, only two percent still thought they were gay. What that means is that most sexual confusion in school children clears away if left to itself. It doesn't need therapy or counseling. It is a passing phase ..."

CNSNews.com posted more details on this story: "Homosexuals Are Excluding Themselves From Marriage, Family." The Thomas More Centre in Brisbane has posted a speech on homosexuality from a medical perspective by Dr. van Gend on its web site: [Thomas More Centre](#).

Homosexuality: The Essentialist Argument Continues to Erode

By A. Dean Byrd, Ph.D., MBA, MPH

The essentialist argument that homosexuality is biologically determined, and is therefore not amenable to change, continues to find little support in science. Finding its way in to the *Monitor on Psychology*, the official magazine of the American Psychological Association, another study emphasizes the fluidity of homosexual attraction.

Dr. Ellen Scheter of the Fielding Graduate Institute presented her research at the recent meeting of the American Psychological Association. Her qualitative study included in-depth interviews with 11 women who had been self-identified as lesbian for more than 10 years. All of these women were in heterosexual relationships which had been ongoing for more than a year (Greer, 2004).

These findings provide support for the research of Dr. Lisa Diamond whose study was reported in the *Monitor on Psychology* in 2000. Dr. Diamond concluded that "sexual identity was far from fixed in women who aren't exclusively heterosexual" (Murray, 2000, p. 15; Diamond, 2000).

Dr. Kenneth Zucker, in his careful analysis of the innate/immutable argument of homosexuality, rostered a plethora of studies to support his conclusion that "sexual orientation is more fluid than fixed" (2003, pp. 399-400).

Friedman and Downey, the psychiatric researchers at Columbia University, offered a strongly worded conclusion opposing the essentialist argument: "At clinical conferences one often hears...that homosexual orientation is fixed and unmodifiable. Neither assertion is true...The assertion that homosexuality is genetic is so reductionistic that it must be dismissed out of hand as a general principle of psychology" (2002, p 39).

Yet the national organizations continue to offer the essentialist argument as a guide for law and public policy. No reputable scientist on either side of the political spectrum would disagree with the conclusion of Friedman and Downey. Even the gay-activist researchers themselves who studies have been used by the media to trumpet the message that homosexuality is biologically determined do not support the "born that way" myth.

Simon LeVay, the author of the hypothalamus study, noted, "It's important to stress what I didn't find. I did not prove that homosexuality was genetic, or find a genetic cause for being gay. I didn't show that gay men were born that way, the most common mistake people make in interpreting my work" (Nimmons, 1994, p. 64).

Dean Hamer, the author of the "gay gene" study, agreed: "We knew that genes were only part of the answer. We assumed the environment also played a role in sexual ori-

entation, as it does in most, if not all behaviors...(Hamer and Copeland, 1994, p. 82). Hamer further emphasizes, "Homosexuality is not purely genetic...environmental factors play a role. There is not a single master gene that makes people gay...I don't think we will ever predict who will be gay" (Mitchell, 1995).

LeVay, the gay activist researcher, made an interesting observation about the emphasis on the biology of homosexuality: He noted, "...people who think that gays and lesbians are born that way are also more likely to support gay rights" (1996, p. 282).

Psychiatrist Robert Spitzer provides more insight into how activism has replaced science. He notes, "There's a gay-activist group that's very strong and very vocal and recognized officially by the American Psychiatric Association. There is nobody to give the other viewpoint...There may be a few people...but they don't talk."

Maybe it is time for legislators to call into question the "science" of the national organizations, particularly when the national organizations employ activism disguised as science to justify resolutions and policy statements.

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Italian Researchers Believe That Genetic Factors May Increase Fertility In Mothers Of Gay Males

"Our findings," they admit, "are only one piece of a much larger puzzle on the nature of human sexuality"

by Frank York

A team of researchers at the University of Padova in Italy believe they may have found a genetic factor in women that both boosts fertility and produces homosexual sons. The study "Evidence for maternally inherited factors favouring male homosexuality and promoting female fecundity," was published in the October 2004 issue of the British *Proceedings of the Royal Society: Biological Sciences*.

Researchers led by Dr. Francesca Corna submitted questionnaires to 98 homosexual and 100 heterosexual men in Northern Italy.

An analysis of the data showed that maternal relatives of homosexuals had slightly higher reproductive success—in the admittedly limited-size sample of this study—than those of heterosexuals, and that the differences did not appear in the paternal line. They did not study lesbians.

The team noted that mothers of gay men produced an average of 2.7 babies compared to 2.3 born to mothers of straight men.

Researcher Dr. Camperio-Ciani says that whatever genetic factors are involved, this does not involve a single gene.

The *New Scientist* reported the findings this way: "The researchers discovered that women tend to have more children when they inherit the same—as yet unidentified—genetic factors linked to homosexuality in men. This fertility boost more than compensates for the lack of offspring fathered by gay men, and keeps the gay genetic factors in circulation."

Camperio-Ciani says this maternal effect, however, impacts only 7% of the population at most. Maternal and immune effects account for only 21%, leaving 79% percent

of the causation of homosexuality still a mystery. According to Camperio-Ciani, "Genes must develop in an environment, so if the environment changes, genes go in a new direction. Our findings are only one piece of a much larger puzzle on the nature of human sexuality."

The researchers stressed that there was ample room left for the influence of non-biological factors linked to culture and upbringing.

A report in *Nature* magazine provided additional commentary on this study. Michael Hopkin wrote: "Besides having more fecund mothers and aunts, homosexual men had more fellow homosexuals in their maternal family, again hinting that their sexuality is influenced by their mother's genes. What's more, homosexual men were more likely to have older brothers, which supports a separate theory that homosexuality is linked to changes in the mother's immune system during previous male pregnancies."

The journal *Nature* concluded:

"...this study shows that, although there may not be a 'gay gene,' it is possible that genetic factors can influence sexuality. 'We strongly believe that this set of genes influences sexual expression, but they don't determine it,' said Camperio-Ciani."

Reference

F. Corna, A Camperio-Ciani, C. Capiluppi, "Evidence for maternally inherited factors favouring male homosexuality and promoting female fecundity," *Proceedings of the Royal Society B: Biological Sciences*, October, 2004. Michael Hopkin, "Mother's genetics could influence sexual orientation," *news@nature*, October 12, 2004.

"Crystal Meth" New Drug Of Choice On Gay Party Circuit

A longtime member of the New York Gay Men's Chorus, Bobby Darnell, nearly became a casualty of the crystal methamphetamine drug scene. His story is told in a *New York Times* feature article published August 29.

Darnell began using crystal meth in casual sexual encounters and began searching the Internet for sexual liaisons. References on the Internet to "PNP" parties (shorthand for "party and play" – meaning sex and drugs) helps drug-addicted gay men find sex parties. Darnell was eventually hospitalized for his growing addiction but later stopped

using the drug.

The use of crystal meth to enhance sexual experiences has spread rapidly among gay partiers—especially during the past three to four years.

A March, 2004 edition of the *Atlanta Journal-Constitution* provides more details on the spread of crystal methamphetamine use among gays. The drug has increased HIV-infection among homosexual men. ■

Is Homosexuality a Choice?

by Warren Throckmorton, Ph.D.

The question: "Is homosexuality a choice?" seems simple enough but it is cunningly complicated. The two nouns in the query require further reflection. What do we mean by homosexuality? What do we mean by choice?

By homosexuality, are we referring to feelings of attraction to the same sex? Or are we referring to a person who has adopted a gay or lesbian personal identity? Or both? Some people experience same sex attractions to varying degrees but choose not to act on them or to identify themselves as homosexual. For them, the feelings of attraction may not seem like a choice but pursuing same sex relationships and/or adopting a homosexual identity would be a conscious choice that they reject.

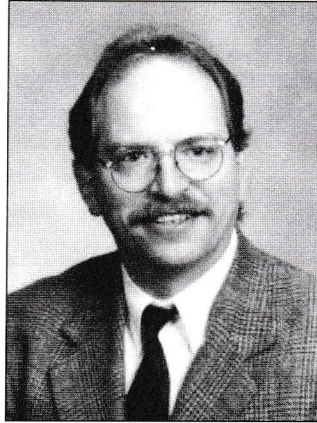
Choice is also a word that requires clarification. This part of the question is usually code for a related question: "Can a person change his feelings, or are they such an innate part of a homosexual's make up that any choice concerning them is impossible?"

For those who have experienced change in their sexual feelings from gay to straight, often known as ex-gays, the concept of choice is especially important.

In my research, many ex-gays say they did not choose to initially experience attractions to their own gender but at some point in their lives, they made a conscious choice to pursue change in not only how they perceive themselves, but in their affections and attractions.

Some people very consciously pursue same-sex relationships. In a 1997 article titled "Is sexual orientation a matter of choice?" Susan Rosenbluth found that 58% of women surveyed who were at the time in lesbian relationships chose to pursue a same-sex relationship for a variety of reasons beyond sexual attraction. In other words, many women prefer women for partners and experience that preference as a choice they make.

So for some people, homosexual feelings may not be a choice, while for some other people, cultivating these feelings to be in a preferred same-sex relationship may indeed



Warren Throckmorton, Ph.D.

be a choice. For many, pursuing a gay or lesbian identity is indeed a choice, whereas for others, it seems like a natural progression from awareness of same-sex feelings.

But is the feeling of choice a reliable indicator of the source of one's feelings? Many in my profession assume that a perception of naturalness means that feelings are inborn, hard-wired or perhaps even God-given. Many human affections including food and activity preferences seem quite natural but are almost certainly acquired, albeit imperceptibly. While the inborn theory may seem reasonable at first glance, the research into sexual

attraction implicates many more factors beyond genetics and is actually quite suspect.

For instance, in 2002, the Nuffield Council on Bioethics report concerning genes and behavior concluded: "There are numerous problems with genetic and other biological research into sexual orientation, which mean that any reported findings must be viewed with caution."

Now class, in reflecting over the answer, is homosexuality a choice?

Here's a possible response:

We know four things for certain.

- First, we know that genetic research has not found a gay gene even though same-sex attractions feel quite natural for a small percentage of the population.
- Second, research has shown that some people do regard their homosexuality as a choice.
- Third, research demonstrates that some people have made the choice to leave homosexuality.
- Finally, we all have a choice to live in accord with our deeply held personal values and religious beliefs no matter what research eventually tells us about sexual orientation.

Next question.....



APA Journal Article Discourages Reorientation Therapy

Clients should be persuaded to embrace unwanted attractions, because "same-sex desire not immoral," psychologists say, "or pathological"

by Frank York

Psychologists Jon S. Lasser and Dr. Michael C. Gottlieb believe it is unethical for psychologists to attempt reorientation therapy or even to refer patients to reorientation therapists. Paradoxically, however, they encourage therapists to acknowledge "the plasticity of sexual orientation." They would also approve reorientation therapy as a last resort if suicide is a possible outcome.

Writing in the April, 2004, issue of *Professional Psychology: Research And Practice*, (Vol. 35, No. 2., 194-200), Lasser and Gottlieb maintain that psychologists who are confronted with individuals wishing to change their sexual orientation should either 1) refuse to take such patients or 2) work to convince them that bisexuality or homosexuality are normal variants of sexuality.

They believe "that same-sex desire is neither pathological nor immoral and that efforts to change sexual orientation are generally unwarranted and may even be harmful."

Lasser and Gottlieb note that if a psychologist is willing to work with a patient who seeks to change his orientation, he should consider using the therapeutic assessment model developed by Finn and Tonsager.

The authors present a case of a 20-year-old man who reported a typical adolescence and dated girls. Eventually, he began having a sexual relationship with an older man and later began having an affair with a woman. In using therapeutic assessment with clients such as this one, the

therapist can lead them to "gain insight, reduce or eliminate distress, and accept themselves" as bisexual. The goal is to show the client that his attraction to both sexes is normal and healthy and he does not need reorientation therapy.

In a discussion of the ethical considerations involved in providing therapy for a person who wishes to diminish his homosexuality and develop his heterosexual potential, the authors state: "In our judgment, it is not appropriate for practitioners to accept patients for treatment under such circumstances, regardless of their good intentions."

The psychologist's goal is to persuade the client that his bisexual interests are normal and healthy.

However, in extreme cases, if the patient has been counseled by several therapists and still wishes reparative therapy, he may be referred to someone who believes in conversion therapy—but this is only as the last resort to avoid a

suicide and to respect patient autonomy.

The authors note that "At the present time, there is insufficient scientific knowledge to fully explain the etiology of sexual orientation."

Later, they urge psychologists to reject "older models based on male paradigms, assumptions of illness, and inflexible behaviors and attitudes," and to embrace "new models [that] recognize the *plasticity of sexual orientation* [emphasis added], the social context of sexuality, and differences between male and female sexuality."

New Editor for NARTH

In November, NARTH's longtime Publication Director Linda Nicolosi announced that she will be delegating the position of editor to Frank York, currently a staff writer for NARTH. Mrs. Nicolosi has been editor of NARTH's publications since its founding in 1992.

Mrs. Nicolosi, who is turning her attention for a period of time to other projects, will remain as Publications Director but will not be involved in the daily management of the NARTH website or writing of articles, at least through 2005.

Critic Ignores the Whole Truth About Ex-Gays

Warren Throckmorton, Ph.D.

"The founder of every ex-gay ministry in America has proved to be an extraordinary failure. The two founders of Exodus International, [the world's largest 'ex-gay' organization], divorced their wives to move in together."

– Wayne Besen, as quoted in an October 8, 2004 article by Natalie Troyer of the *Washington Times*.

The article containing the above quote was entitled, "Film Depicts Gay Reorientation" and discussed the recent documentary *I Do Exist* which explores the lives of people who have changed from gay to straight. However, columnist Wayne Besen, a gay man and ex-gay critic, staked out a different perspective.

He made two claims in this quote: first, that all ex-gay ministry founders have reverted to a homosexual life, and more specifically, that the founders of Exodus International left their wives and became homosexual partners.

The Facts

Are these claims accurate? Let me cut to the chase. Mostly, they are not true. In fact, after investigating the matter, I found that of the original board members of Exodus International, only one reverted to homosexuality. Furthermore, one of the two men referred to by Mr. Besen was never in leadership with Exodus. Here are the details.

Exodus International is a distinctly religious organization offering services and referrals to people who are in conflict with their sexual feelings and Christian beliefs. However, detractors often say that the message of Exodus is compromised due to the failure of the co-founders of the organization to remain heterosexual. In a recent *Cleveland Plain Dealer* article, also on the subject of sexual orientation change, Mr. Besen claimed that Michael Bussee and Gary Cooper were the co-founders of Exodus International. He noted again that the men became gay partners.

The second claim is true. As documented in the 1993 film *One Nation Under God*, the two men did indeed leave their families in 1979 and engaged in a commitment ceremony in 1982.

However, the first claim is false. Mr. Cooper and Mr. Bussee were not the co-founders of Exodus International.

Why do Mr. Besen and others (including the abovementioned film, *One Nation Under God*) claim they were? While I cannot judge motivation, it appears to be a deliberate effort to discredit the concept of sexual orientation change. Concerning Gary Cooper, in no way can he be considered a founder of the organization. Mr. Cooper, who

died of complications from HIV/AIDS in 1989, was a volunteer with Mr. Bussee's ministry, called Exit (Ex-gay Intervention Team) based in Anaheim, CA. By all accounts, he was never on the Exodus Board.

Mr. Bussee however, did help arrange a meeting of ex-gay leaders that eventually came to be considered the first Exodus conference. According to Exodus incorporator Ron Dennis, Mr. Bussee was one of the people who saw the need for a collegial relationship between independent ex-gay ministries.

The original board of Exodus included five formerly gay identified people, including Mr. Bussee. The incorporators of the group included Frank Worthen, Ron Dennis and Greg Reid. None of these men have returned to homosexuality and two of the three are still in ex-gay ministry. One other original board member, although still straight, requested his name not be included in this article. Let's do the math: four out of five of the original board have not returned to a gay identity.

The Majority Have Not Reverted to a Gay Identity

The truth is that some people who were ex-gay ministry leaders or participants have reverted to a gay or lesbian identity. Ex-ex-gays exist. However, the majority of people who began with Exodus have not returned to a gay identity. Speaking of Exodus, Mr. Besen and those detractors who say all ex-gay leaders are "extraordinary failures" are simply ignoring the whole truth.

Just so this is clear, let's re-cap. Gary Cooper was not one of the co-founders of Exodus. Michael Bussee was on the original board. The men were involved in an ex-gay ministry in Anaheim, were married, left their wives and children and returned to a public gay identity. Of the five formerly gay men on the original board of Exodus International, four have not reverted to homosexuality. Frank Worthen and Ron Dennis continue to lead ex-gay organizations. The other two original board members were rumored to have returned to a gay identity but according to both men, this is not true. Thus, 80% of the original Exodus board members are still ex-gay after 30 years.

What is the importance of these observations? Given the longevity of change that most people involved with Exodus and other ministries report, it is an important contribution to our understanding of sexual orientation and human nature overall to give attention to the whole truth. Although critics-for-a-living such as Mr. Besen may not be able to change their thinking, others may not be so closed minded. ■



Perceptions Among Men With Unwanted Same-Sex Attractions (SSA) of the Factors Contributing to the Development of Their Homosexual Feelings

Survey by People Can Change, June 2004

People Can Change is an independent, non-profit organization of men who have overcome unwanted homosexual attractions who now help and support other men who seek similar change. People Can Change provides an educational Web site (www.peoplecanchange.com), international online support groups, intensive training weekends (called "Journey Into Manhood") and in-person support groups.

EXECUTIVE SUMMARY

In May and June 2004, People Can Change surveyed the members of its online support groups, which have a combined total membership of about 600 men – all of whom are seeking to overcome unwanted homosexual feelings (or feelings of "same sex attraction," or SSA). The survey sought to determine what biological and environmental factors the members of People Can Change believe contributed to the development of their SSA feelings. A total of 205 surveys were completed – a response rate of 34%.

The majority of the survey consisted of a list of 25 possible factors, from "biology" to "personal choice," that some men have identified as possible causes or sources of their same-sex attraction. The survey asked respondents to identify whether they believed each of these 25 factors contributed to their developing SSA feelings, and if so, to what extent each contributed.

This summary ranks their responses in a variety of ways (see tables 1 and 2 on pages 11 and 12), but the most frequently cited responses were:

- 1. Relationship with or feelings about their father:** 97% said this was a contributing factor in their development of same-sex attractions, and 71% said it was one of the three most significant factors.
- 2. Relationship with or feelings about their male peers:** Again, 97% said this was a contributing factor, while 49% said it was one of the "top three" factors.
- 3. Relationship with or feelings about their mother:** 91% said this was a contributing factor, and 36% said it was one of the three most significant factors.

4. Sexual abuse: 48% of respondents said that, as children or youth, they had been sexually abused by an older or more powerful person. Usually it was by a male (83 out of 205 respondents, or 40%), and in those cases, 96% considered the abuse to be a contributing factor to their developing SSA feelings, and 43% said the abuse was one of the three most significant factors.

5. Other sexual experiences: 93% said they had had other sexual experiences – including masturbation, pornography, sexual fantasy and sex play with other boys – as children or youth, and of those who did, 93% said they believed these experiences contributed to their SSA feelings.

6. Personality traits: 87% said they believed their personality traits were a contributing factor, and 18% considered them one of the three most significant factors.

7. Fear, envy, resentment, or anger toward other males or masculinity: 91% said they experienced such feelings, and among those who did, 96% considered them to be a contributing factor, and 17% said those feelings were among the three most significant factors causing them to develop same-sex attractions.

The survey also asked about the men's experience, if any, with successfully shifting the degree or intensity of their sexual feelings from homosexual to heterosexual:

1. 84% reported that they had already experienced some decrease in the degree or intensity of their SSA feelings or interests over time, while 68% reported that they had already experienced some increase in the degree or intensity of their sexual attractions to women over time.
2. 57% reported that currently their sexual feelings or interests were more homosexual than heterosexual, but at the time in their lives when their SSA feelings or interests were the strongest, 87% had more homosexual than heterosexual feelings and interests.

People Can Change conducted this survey electronically using Zoomerang research technology (www.zoomerang.com)

.com). On May 16, 2004, People Can Change sent the survey invitation and a URL link to 16 People Can Change-sponsored online support/discussion groups that have a combined total membership of about 600 men. The technology blocked individuals from responding to the survey more than once. A reminder and second request was sent on May 30, 2004, and the survey was closed on June 9, 2004.

A total of 205 surveys were completed – a response rate of 34%.

Members of these People Can Change groups are males who either are now, or have been at some point in their past, sexually attracted to other males. To be admitted to any of these groups in the first place, members must affirm to the moderator that they are seeking to diminish unwanted homosexual feelings and increase their heterosexual interests, and/or want to support others who are seeking such change in their lives.

The survey instrument consisted of 42 closed-ended questions and 28 open-ended questions. Essentially, all of the open-ended questions simply invited the respondents to elaborate on their answers to the closed-ended questions if they so desired.

The majority of the survey consisted of a list of 25 possible factors, from “biology” to “personal choice,” that, as the survey explained, “Some men have identified...as possible causes or sources of their feelings of same-sex attraction (SSA).” The survey asked respondents to identify how much, if any, each of these 25 they believed were contributing factors to them personally in their developing SSA feelings.

Limitations and Caveats

First, it is important to recognize that this survey is a measurement of *perceptions* of some of the causes of same-sex attractions among members of the study group, and not a measurement of *actual* causes. It does not prove, for instance, that poor relationships with father and male peers are in fact the leading causes of homosexual development; rather, it shows that the study group *believes* them to be so, in their own case. On the other hand, one should not dismiss the “expertise” of the members of this group either. They, more than anyone else, should have meaningful insight into the factors that likely contributed to the development of their same-sex attractions.

Second, it is important to recognize that the survey sample was drawn from a group of men who are dissatisfied with having same-sex attractions and who wish to change to a more heterosexual orientation. These are men for whom homosexual feelings feel inauthentic, unsatisfying or wrong. It is not only possible but in fact quite likely that a sample drawn from men who had gladly and proudly embraced a gay identity and were openly living a gay life could have very different answers. Thus, this survey

should not be considered representative of the gay community, but rather of a community of men who have feelings of same-sex attractions but reject homosexuality as a self identity or acceptable lifestyle for themselves.

A Word About Terminology

Among men and women who experience unwanted homosexual feelings and hope to diminish them, the phrase “same-sex attraction” or “same-sex attracted” and the acronym SSA typically are much preferred to “gay,” which is considered a socio-political identity and self-label that these men and women strongly reject. Also, “SSA” often is preferred as an adjective (“I have SSA feelings”) rather than as a noun to avoid labeling one’s self as “being” SSA. Therefore, the survey questionnaire and this summary report use the terminology widely preferred among this population.

All 205 respondents were males who are now, or have been at some time in the past, sexually attracted to other men. Gender and SSA history were the only two criteria explicitly screened for, but of course the sample was men who had already shown by joining one or more of the People Can Change groups that they were dissatisfied with their SSA feelings and were seeking to diminish them (or had already experienced some degree of change).

82% of respondents were between 20 and 49 years old, with 32% in their 40s, 27% in their 30s, and 23% in their 20s. Another 13% were in their 50s, while 3% were older than 59 and 2% were younger than 20.

The majority, 54%, were single, never married, and not in a current relationship. Another 36% were married and living with their wife, while 4% were single but in a relationship with a woman, 3% were married but separated from their wife, and 1.5% were divorced. One man (0.5%) was widowed and one (0.5%) was single but in a relationship with another man.

80% were from the U.S., 4% from Canada and 2% from other countries within North or South America. Also, 8% were from Asia Pacific countries including India and Australia, and 6% were European. This reflects the general demographics of the People Can Change online groups.

58% said they were 11 to 15 years old when they first became aware that they experienced sexual attractions to other males, 22% said they were 6 to 10 years old, and 15% said they were 16 to 20.

Asked whether they agreed or disagreed with the statement, “**In my case, I believe my SSA feelings developed as a result of genetic or biological influences; basically, I was born to be gay,**” 95% disagreed – 77% strongly and 18% somewhat. Of those who agreed with the statement, 4% agreed somewhat and 1% agreed strongly.

continued

Asked whether they agreed or disagreed with the statement, **"In my case, I believe my SSA feelings developed as a result of experiences and feelings in childhood and youth,"** 99% agreed – 80% strongly, and 19% somewhat. Three out of 203 men who answered this question disagreed with this statement – two (1%) somewhat and one (0.5%) strongly.

Asked whether they agreed or disagreed with the statement, **"In my case, I believe my SSA feelings developed as a matter of personal choice,"** 82% disagreed – 64% strongly and 18% somewhat. Of those who agreed with the statement, 16% agreed somewhat and 2% agreed strongly.

Asked whether they agreed or disagreed with the statement, **"In my case, I believe it is impossible to know the causes or sources of my SSA feelings,"** 90% disagreed – 58% strongly and 32% somewhat. Of those who agreed with the statement, 9% agreed somewhat and 1% agreed strongly.

51% of respondents said they believed biology or genes were "no factor" in the development of their SSA feelings. While the other 49% said biology or genes were, in fact, contributing factors, the significance was minor to 34% of all respondents and moderate to 9%. Only 3% said this was a significant factor, while 2% considered it a very significant factor.

Asked to identify the top three most significant factors contributing to the development of their SSA feelings, only 4% named biology or genes as one of their top three influences.

When asked what ages they believed were the most significant in the development of their SSA feelings, only 1% answered "before birth," while 17% answered "newborn to age 5." Ages 6 to 10 were the most significant to 35% of the respondents, while ages 11 to 15 were most significant to 38%. The rest answered that the most significant years in the development of their SSA feelings were even later: 6% said ages 16 to 20 and 3% said after age 20.

The survey told respondents, "Some men have identified some of the following factors as possible causes or sources of their feelings of same-sex attraction (SSA). How much, if any, do you believe the following were contributing factors to you personally in your developing SSA feelings?"

Respondents could select either:

- no factor
- minor factor
- moderate factor
- significant factor, or
- very significant factor.

In most (but not all) cases, they could also select "not appli-

cable (did not experience this)."

After rating each factor individually, respondents were then asked to select the top three factors from among them all. The question was, "What do you believe were, in your own case, the THREE most significant factors contributing to your developing SSA feelings?"

Significance of the Father Relationship

An overwhelming majority of respondents identified **two major factors** contributing to the development of their SSA feelings: their relationship with or feelings about their father (even if he was absent or unknown), and their relationship with or feelings about male peers. An identical number and percent of respondents to these two questions – 199 of 205 responses, or 97% – said these were contributing factors.

- 74% of all respondents said their relationship with or feelings about father was a significant (24%) or very significant (50%) factor, while 16% said it was a moderate factor and 6% said it was a minor factor.
- 71% of all respondents said their relationship with or feelings about father was one of the **three most significant factors** contributing to their SSA – the **most frequent** response to this question (out of a list of 25 possible factors).
- When invited to elaborate on their response to this question, 177 men wrote in explanations. Of these, seven answers were too vague to log, but following is a summary of the responses from the other 170. (Note that these responses are sometimes double counted.)
 - 97 (55%) described their father as distant, detached, disinterested, weak, absent, or said he didn't spend time with them when they were young. Some of these men volunteered that they had rejected their father (rather than the other way around).
 - Fifty-four respondents (31%) described their father as cold or mean or said they feared him.
 - Thirty (17%) raised the issue of their father not being an appropriate role model, or of their having rejected him as a role model. (Sixteen of those who raised this issue were also counted in the group describing their father as mean, and three others were also counted in the group describing their father as distant.)
 - Two said they had a positive relationship with their father (1%)

Significance of Relationships with Male Peers

97% – 199 of 205 respondents – also identified their rela-

tionship with or feelings about their male peers as a contributing factor to their development of SSA feelings. This is the same number who said their relationship with or feelings about their father contributed to their SSA feelings.

- 69% of all respondents said their relationship with or feelings about male peers was a significant (34%) or very significant (36%) factor. Another 19% said it was a moderate factor and 9% a minor factor.
- 45% of all respondents said their relationship with or feelings about male peers was one of the three most significant factors contributing to their SSA – the *second* most frequent response to this question.

When invited to elaborate on their response to this question, 175 men wrote in explanations. Of these, eight answers were too vague to log, but following is a summary of the responses from the other 167. (Note that these responses are often double counted, when respondents gave more than one explanation.)

- 92 (55%) described themselves as misfits, loners, as feeling inferior, as not fitting in, or not feeling like “one of the guys.” Many said they longed to fit in and feel accepted.
- 75 (45%) said they had few if any friends or had bad experiences with friends, and sometimes came to fear or distrust male peers. Many said they longed to have good friendships.
- 40 (24%) said they were teased, bullied or otherwise felt rejected by their peers, often for lack of athletic skill, for physical awkwardness, for being too fat, too thin, too effeminate, or sometimes for being a racial minority or foreigner
- 33 (20%) specifically brought up that they were teased or felt different from their peers because they were poor at sports or disinterested in sports.
- 7 (4%) said they had positive experiences with friends and other male peers.

Significance of the Mother Relationship

91% of respondents said their relationship with or feelings about their mother (even if she was absent or unknown) was a contributing factor to their developing SSA feelings. In addition:

- 62% of all respondents said their relationship with or feelings about mother was a significant (29%) or very significant (33%) factor, while 15% said it was a moderate factor and 13% said it was a minor factor.

However, the percentage of respondents who identified

their relationship with their mother as a “top three” contributing factor was close to half the percentage who identified their relationship with their father as one of the three most significant contributing factors: 36% selecting “mom” as a top-three influence versus 71% selecting “dad.”

When invited to elaborate on their response to this question, 158 men wrote in explanations. Of these, 11 answers were too vague to log, but following is a summary of the responses from the other 147. (Note that these responses are sometimes double counted.)

- 72 (46%) described their mother as over-protective, smothering or emotionally needy, many times turning to their son for emotional support, using him as a confidante and even, in the words of 13 men (8%), a “surrogate husband.”
- 31 (20%) men described their mother as domineering or controlling.
- 20 (13%) said their mother was critical of their father or of males generally, and 18 (11%) said they aligned with mom against dad. Six (4%) said they felt their mother discouraged masculinity and had treated them for a time as a girl.
- 12 (8%) described their mother as critical or abusive.
- 9 (6%) described a positive, loving relationship or said they admired or respected their mother.

Significance of Sexual Abuse

Almost half of all respondents – 98 out of 205, or 48% – said that, as children, they had been sexually abused or sexually exploited by an older or more powerful person. Usually it was by a male (83 out of 205 respondents, or 40%) but sometimes a female (38 respondents, or 14%) and sometimes both (23 respondents, or 11%).

Respondents who experienced abuse widely considered it to be a contributing factor in the development of their SSA feelings.

80 out of 83 men who were abused by males when they were young – or 96% – said they considered the abuse to be a contributing factor. Of these 83 men:

- 75% said the abuse was a significant (20%) or very significant (54%) factor contributing to their developing SSA feelings, while 13% said it was a moderate factor and 8% said it was a minor factor.
- 4% said they did not consider the abuse to be a contributing factor.
- 43% said the abuse was one of the three most signifi-

cant factors contributing to the development of their SSA feelings.

- 28 out of 38 men who were abused by females when they were young – or 74% – said they considered the abuse to have contributed to the development of their SSA feelings. Of these 38 men:
- 44% said the abuse was a significant (18%) or very significant (26%) factor contributing to their developing SSA feelings, while 18% said it was a moderate factor and 11% said it was a minor factor.
- 26% said they did not consider the abuse to be a contributing factor.
- 21% said the abuse was one of the three most significant factors contributing to the development of their SSA feelings.

Significance of Other Sexual Experience

Aside from sexually abusive situations, a significant majority of respondents had other sexual experiences – including masturbation, sexual fantasy, pornography and sex play with other boys – that they considered to have contributed to or reinforced their development of SSA feelings.

188 men (93% of 203 respondents) said they had had sexual experiences such as these when they were young, and 174 out of the 188, or 93%, said they believed these experiences contributed to their SSA feelings. Of these 188 men:

- 53% said they were a significant (29%) or very significant (24%) factor contributing to their SSA feelings, while 23% said they were a moderate factor and 16% said they were a minor factor.
- 7% said they did not consider these experiences to be a contributing factor.
- 11% said these experiences were among the three most significant factors contributing to the development of their SSA feelings.

When asked how these experiences contributed (an open-ended question), sample responses were:

- *“Had I not gotten into porn magazines I would have never discovered some of the other parts of gay life and I would have most likely stayed clear of gay activities. That sounds like they were really that powerful in my development, but you know something, they probably were.”*
- *“Once I entered puberty my desire for male friendships became sexualized.”*
- *“Pornography certainly helped ripen my homosexual interests, though it did not generate them.”*

- *“Very early sex play with other boys my age. I was exposed to sexuality at an age when children are not developmentally prepared for it.”*

Significance of Personality

- 87% of respondents said they believed their personality traits contributed to the development of their SSA feelings.
- 35% of all respondents said their personality traits were a significant (27%) or very significant (8%) factor, while 27% said they were a moderate factor and 24% said they were a minor factor.
- 13% said they believed their personality did not play a role in the development of SSA feelings.
- 18% said they considered their personality traits to be one of the three most significant factors contributing to the development of their SSA feelings.

When invited to elaborate on their response to this question, 106 men wrote in explanations that were specific enough to be logged. Of these 106:

- 61 men (58%) described themselves as sensitive, emotional or easily hurt.
- 25 (24%) described themselves as shy, introverted, quiet, timid or not outgoing.
- 11 (10%) described themselves as fearful.
- 8 (8%) described themselves as non competitive or not interested in sports.
- 8 (8%) described themselves as interested in girls' activities or having feminine traits or interests.

(Note that these responses are sometimes double counted.)

Significance of Fear and Resentment of Males

Out of 205 respondents, 187 men, or 91%, said they experienced fear, envy, resentment or anger toward other males or masculinity. Of these 187:

- 180 (96%) said they considered those feelings to be a contributing factor
- 108 (58%) said this was a significant (26%) or very significant (32%) factor, while 29% said it was a moderate factor and 10% said it was a minor factor.
- 7 (4%) said these feelings did not contribute to their same-sex attractions.
- 32 (17%) said these feelings were among the three most significant factors contributing to the development of their SSA feelings.

See tables (next two pages) for a full summary. ■

TABLE 1: Responses ranked by percent answering that an issue was a contributing factor at all (i.e., ranked by column 2)

<i>Column 1</i>	<i>Column 2</i>	<i>Column 3</i>	<i>Column 4</i>	<i>Column 5</i>
<i>Factor</i>	<i>% answering this was a contributing factor (from minor to very significant)</i>	<i>% answering this was a significant or very significant factor</i>	<i>% answering "not applicable" (did not experience this)</i>	<i>% answering this was one of 3 most significant factors</i>
Relationship with or feelings about father (even if father was absent or unknown)	97%	74%	0%	71%
Relationship with or feelings about male peers	97%	69%	0%	45%
Relationship with or feelings about mother (even if mother was absent or unknown)	91%	62%	0%	36%
Fear of, envy, resentment, anger toward other males or masculinity	88%	53%	9%	16%
Personality traits	87%	35%	0%	18%
Sexual experience (other than sexual abuse) including pornography or masturbation	86%	49%	7%	10%
Admiration of, respect, appreciation for other males or masculinity	75%	43%	15%	10%
Relationship with or feelings about female peers	75%	29%	0%	2%
Interests, skills, behaviors that were atypical for males in your culture	71%	25%	15%	9%
Physical characteristics, body type	69%	29%	0%	18%
Confusion, anxiety, ambivalence about being male	63%	33%	28%	7%
Relationship with or feelings about brothers , if any	59%	19%	26%	7%
Cultural or societal influences, including mass media	53%	20%	0%	2%
Relationship with or feelings about father figures , if any (stepfather, grandfather, uncles, etc.)	49%	31%	42%	7%
Biology or genes	49%	5%	0%	4%
Shame about being male	48%	20%	41%	3%
Mental health issues	45%	18%	40%	1%
Relationship with or feelings about mother figures , if any (stepmother, grandmother, aunts, etc.)	44%	21%	37%	4%
Relationship with or feelings about sisters , if any	44%	13%	27%	2%
Fear of, envy, resentment, anger toward females or femininity	43%	18%	40%	1%
Sexual abuse or exploitation of you by an older or more powerful male	40%	30%	60%	18%
Admiration of, respect, appreciation for females or femininity	35%	15%	37%	1%
Personal choice ; conscious, deliberate decision to develop SSA feelings or embrace gay identity or interests	35%	14%	48%	2%
Health problems during childhood, youth	24%	7%	60%	1%
Sexual abuse or exploitation of you by an older or more powerful female	14%	8%	81%	4%
Impossible to know	--	--	--	4 (4%)

TABLE 2: Responses ranked by percent who (1) experienced a factor and (2) considered it to have contributed (i.e., ranked by column 3)

<i>Column 1</i>	<i>Column 2</i>	<i>Column 3</i>	<i>Column 4</i>	<i>Column 5</i>
	# applicable (e.g. DID have brothers, etc.)	# (and % of column 2) considering this a contributing factor at all (from minor to very significant)	# (and % of column 2) considering this a significant or very significant factor	# (and % of column 2) considering this one of 3 most significant factors
Relationship with / feelings about father (even if father was absent or unknown)	205	199 (97%)	153 (75%)	145 (71%)
Relationship with / feelings about male peers	205	199 (97%)	142 (69%)	92 (49%)
Sexual abuse or exploitation of you by an older or more powerful male	83	80 (97%)	62 (75%)	36 (43%)
Fear of, envy, resentment, anger toward other males or masculinity	187	180 (96%)	108 (58%)	32 (17%)
Sexual experience (other than sexual abuse) including pornography or masturbation	188	174 (93%)	99 (53%)	21 (11%)
Relationship with / feelings about mother (even if mother was absent or unknown)	204	185 (91%)	127 (62%)	74 (36%)
Confusion, anxiety, ambivalence about being male	146	129 (88%)	66 (45%)	15 (10%)
Personality traits	204	177 (87%)	73 (35%)	36 (18%)
Admiration of, respect, appreciation for other males or masculinity	174	152 (87%)	88 (51%)	21 (12%)
Relationship with or feelings about father figures , if any (stepfather, grandfather, etc.)	118	100 (85%)	64 (54%)	15 (13%)
Shame about being male	118	97 (82%)	41 (35%)	6 (5%)
Interests, skills, behaviors that were atypical for males in your culture	171	144 (81%)	52 (30%)	19 (11%)
Relationship with / feelings about brothers	150	120 (80%)	39 (26%)	14 (9%)
Relationship with or feelings about female peers	204	154 (75%)	59 (29%)	4 (2%)
Mental health issues	124	93 (75%)	38 (31%)	2 (2%)
Sexual abuse or exploitation of you by an older or more powerful female	38	28 (74%)	17 (45%)	8 (21%)
Fear of, envy, resentment, anger toward females or femininity	121	87 (72%)	37 (31%)	2 (2%)
Relationship with or feelings about mother figures , if any (stepmother, aunts, etc.)	125	86 (69%)	41 (33%)	9 (7%)
Physical characteristics, body type	204	141 (69%)	60 (29)	36 (18%)
Personal choice ; conscious, deliberate decision to develop SSA feelings or embrace gay identity or interests	106	72 (68%)	29 (27%)	4 (4%)
Health problems during childhood, youth	83	50 (60%)	14 (17%)	2 (2%)
Relationship with / feelings about sisters	149	90 (60%)	27 (18%)	5 (3%)
Admiration of, respect, appreciation for females or femininity	129	72 (56%)	30 (23%)	2 (2%)
Cultural or societal influences, including mass media	204	108 (53%)	42 (21%)	4 (2%)
Biology or genes	205	100 (49%)	7 (5%)	9 (4%)
Impossible to know	--	--	--	4 (4%)

Note: Percent in columns 3, 4 and 5 are derived from dividing numbers in these columns by the number of responses in column 2.

The Gender Question: Who Am I?

By Joseph Nicolosi, Ph.D.

(Adapted from *A Parents Guide to Preventing Homosexuality*, by Joseph and Linda Ames Nicolosi, InterVarsity Press, 2002)

It has been said by some gay activists that the homosexually oriented person is born with an "indifference to gender," and the reason for his suffering is that we live in a gender-polarized world—and that world must change. But if the gay man really considers gender unimportant, and if he is truly just expressing a healthy *androgyny*, then why isn't he bisexual?

Why is masculinity so highly, intensely— even obsessively— valued in the gay world? Why do gay "Personals" ads commonly seek a partner who is "straight acting"? And why do we see such compulsive and dangerous sexual behavior in an unending quest for the masculine?

I believe this is because homosexuality represents not an *indifference* to gender, but a *deficit* in gender. Deficit-based behavior emerges from a heightened sensitivity to what one feels one lacks, and is characterized by compulsivity and drivenness—the person will persist in the behavior despite social disadvantage, internalized shame, and grave medical risk.

Deficit-based behaviors also have a quality of caricature, which we see vividly in gay "leather" bars. Such exaggerated behavior actually represents a heightened awareness and pursuit of the internally deficient gender—that is, maleness—but in caricatured ways.

I believe in a reparative approach to gender-identity conflict. Something is lacking in the gender-empty child's sense of himself as truly male (or female). Along with other like-minded psychotherapists, I hope to offer a choice that could change the course of young lives—before these young people are so deeply entangled in unwanted homosexual behavior that it is very difficult for them to find their way out.

It seems ironic to me (and to gay activists, too) that the APA still acknowledges gender-identity disorder of *childhood* as a problem, but then considers its *adult* manifestation (homosexuality) perfectly normal. Gay activists are working behind the scenes to correct that logical inconsistency, and they have made increasingly vocal efforts in recent years to encourage the removal of GID from the psychiatric manual.

The onset of most cross-gender behavior occurs during the preschool years, between the ages of two and four. Crossdressing is one of the first signs.

Of course, for most gender-conflicted boys, the signs of early homosexual development will be more subtle... a reluctance to play with other boys, fear of rough-and-tumble play, shyness about nakedness when in the presence of males (but not when in the presence of females), lack of comfort with and weak attachment to the father, and perhaps an over-attachment to the mother.

The story told on the web site *Peoplecanchange.com* is typical of the gender-nonconforming prehomosexual boy. Here we hear of these common, early feelings of gender inadequacy, even though none of the men whose stories are told had ever dressed or acted like a girl:

Initially, at least, we didn't feel homosexual so much as we felt genderless and, lacking sufficient maleness within ourselves, attracted to that which we felt would make us feel masculine and whole.

As long as we felt that men were the opposite from us, while we identified with women as our sisters, we remained attracted to our opposite - the mysterious, unknown masculine. To us, it often felt like men were the opposite sex, so being sexually attracted to them felt natural.

When asked to draw a person, the gender-confused boy will almost always draw a female first, and only after that, perhaps, will he draw a male. His drawing of a girl or woman will usually be rendered in bright colors, particularly pinks and red, with great detail and in a large size. In his drawings of males, the subjects are small, drab, thin, and often stick figures. These drawings represent the boy's felt perception of reality. Women are exciting, powerful and alluring: while males—this usually includes Dad—are weak, uninteresting or negative figures.

The pre-homosexual boy may display a precocious curiosity about the female genitals. At the same time, the boy may deny his own maleness and feel a disconnection (or even revulsion) toward his own male genitalia, pushing them back into his body and perhaps sitting down to urinate in imitation of his sister. These behaviors suggest that the boy considers *that* part of his body "not me."

One mother of a GID boy bought her son Barbie dolls because, as a self-avowed progressive-minded mother, she refused to bow to society's gender stereotypes. She says her son would "obsess" about the Little Mermaid and Cinderella and mimic their gestures and songs, while pointedly ignoring the Ken doll she bought him to accom-

pany Barbie. The mother describes that searing moment of truth when she realized that her 4-year-old son was not just going through a stage—when the boy stood up in a shopping cart and started bawling at the realization that he could not, in fact, ever be a mother.

Social and Psychological Problems in the Gender Confused Boy

In spite of the claim by some psychologists and most gay advocates that this blatant distortion of reality is “normal for some people,” I believe that cross-gender behavior remains a symptom of a deeper problem—a problem of distorted identity. Boys suffering gender-identity confusion will suffer many related psychological and social problems. They are more likely to be anxious, depressed and lonely. Many parents recognize that their GID children are not happy. These children are moody, easily upset and often lament that they don’t “fit in.”

Eventually the prehomosexual child usually becomes the “kitchen window boy” who looks out longingly at the other boys in the neighborhood, wishing he could play with the boys who reject and tease him. Instead, he ends up staying inside with Mom to clean the house with her and bake cookies. Parents of these children are quite right to be concerned, because this pattern, seen as early as preschool and first grade, portends many other adjustment problems later in life.

Some studies found poor coordination and difficulties in contact-type athletic activities among pre-homosexual boys. Similarly, a number of studies also show that such boys appear to have trouble distinguishing between normal rough-and-tumble play, and the deliberate intent by other boys to hurt them.

In elementary school, other children will begin to call these gender-confused boys sissies, or “faggots” or “queers” or “gays.” Most mistakenly and tragically, their teachers may even identify them as “gay children,” and, thus labeled by their own teachers, they may even come to think of themselves as “born gay.” They may not be very sure what being “gay” means. But they begin to suspect that they are very different indeed. Before long, their emotional estrangement from their own sex will begin to surface in same-sex romantic longings.

Without exception, the adult homosexual clients I have known will describe a painful absence—typically an “aching void”—of physical contact with their fathers. The remembering longing to be held and affirmed by a man. As Dr. Dean Byrd says, “Fathers, hug your sons— or some day, another man will.”

Another important task of parents, especially the father, is to encourage the boy’s expression of what he’s really thinking and feeling. Since we know that this boy is probably

fearful of growing up and of meeting the challenge of a male role, the boy should be encouraged to verbalize these anxieties and to communicate his ideas about gender, which will inevitably be distorted.

Sean, for example, was an effeminate seven-year-old, and his father made a decision that “we won’t talk about Sean’s problem, we will just affirm and love him.” That approach is a start, but it’s not good enough. Parents need to find opportunities to clarify male/female distinctions. Asking, “What do you want to be when you grow up?” and “Who do you want to grow up to be like?” will offer a window of opportunity to correct fantasy distortions, as well as to offer encouragement.

When the gender-disturbed boy shows a decided preference for girl’s toys and activities, the most effective intervention is for the parental team to convey together, in a gentle but unified voice, “This is not who you are—you’re a boy.” This style of treatment is gentle, caring, loving, and should not happen all at once—yet it is explicit and unambiguous. Most importantly, it should involve parental unity and consistency, because that’s the type of approach that is most effective in the long term.

One mother summed it up well: “Helping my son overcome effeminate behavior is like cultivating roses. It doesn’t require a lot of work, but it takes a lot of *consistent mindfulness*.”

Based upon my clinical work with gender disturbed boys and their parents, there are four stages in the healing process:

- Resistance
- Apparent conformity
- Secretive resistance
- The parent-child working alliance.

If your son is engaged in obvious cross-gender behavior, these stages should serve as a general framework for you to construct a pathway for your child’s progress. Of course, as with all constructs used to explain a complex phenomenon, these stages bleed into each other somewhat; a child may slip back one stage before he moves forward to the next. These steps can, however, serve as general guides.

Treatment aims at helping the boy feel more comfortable claiming his biologically appropriate gender identity. But make no mistake about this: a gender-nonconforming boy *can* be sensitive, kind, social, artistic, gentle – and heterosexual. He can be an artist, an actor, a dancer, a cook, a musician... and heterosexual. These innate artistic skills are “who he is”...part of the wonderful range of human abilities. No one should try to discourage those abilities and traits. Because with appropriate masculine affirmation and support, they can indeed all be developed within the context of normal heterosexual manhood. ■