

NARTH: On Track for the Future

by Vice President A. Dean Byrd, Ph.D., M.B.A., M.P.H.

In 1973, I was providing treatment to men who struggled with unwanted homosexual attractions. The substantial majority of these men were not suffering from "internalized homophobia." In fact, I don't recall even hearing the term. Most were self-referred, and were not particularly religious. Certainly, they were not religiously motivated to seek therapy.

These men were genuinely unhappy. The typical complaint was "these homosexual feelings are not who I really am." About 60% were single men in their middle to late 30's and who had been in the "lifestyle" for more than 20 years. The other 40% were married men who had families and were plagued by unwanted fantasies about sex with men. They asked for help in decreasing their homosexual attractions and in developing their heterosexual potential.

My work with homosexual men was as successful as any other patient population who I treated. These men were able to resolve significant issues in their lives, and homosexual attractions were either eliminated or significantly diminished. Because I was a very young psychologist during this time, I frequently sought supervision. Even my mentors were surprised at the positive outcomes.

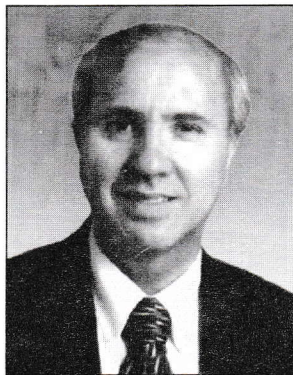
Back in 1973, upon hearing the decision to remove homosexuality from the diagnostic manual, I recalled experiencing strong ambivalent feelings. I agreed with Dr. Robert Spitzer that self-identified gays and lesbians deserved respect--whether they decided to affirm a gay identity, or to pursue therapy to develop their heterosexuality. But I feared that the '73 decision would have a chilling effect on research, and indeed it has.

Although I was acquainted with a number of psychologists and psychiatrists who continued to treat men and women who were unhappy with their homosexual attractions, the activism that ushered in the '73 decision grew increasingly forceful. As a result, many of my colleagues stopped discussing their work with such cases when they were in public settings.

Then in 1992, I learned about the formation of a group of professionals--scientists and clinicians--who wanted to organize a group to consider the research and clinical practice of treating men and women with unwanted homosexuality. I attended the first NARTH meeting in New York City, and was quite surprised. I was surprised at both the

diversity of this small group of about twenty people, and how each had been successful in treating this patient population for many years.

I was equally surprised at the activism that seemed to be emanating from the professional organizations, all of which aimed at forbidding the treatment of homosexuality even when the patient specifically requested such therapy. What had happened to patient self-determination, the cornerstone of all of the mental health professions? How could the national organizations state that homosexuality was not a disorder, and at the same time, suggest that homosexual men and women were not competent to make decisions about whether or not they wanted to pursue treatment? How could the the profession simply refuse to help clients bring their sexual desires and behaviors into harmony with their values?



A. Dean Byrd

In many ways, I have always been a typical psychologist. I always left the activism to those who had such leanings...but what I heard about what was happening in our profession from this small NARTH group, supported by extensive documentation, did not seem right. In fact, I became uncharacteristically incensed.

My reaction was not so unlike that of others who were later to follow. In common with a recent group of professionals --which includes the current APA president Robert Sternberg, former APA President Robert Perloff, and other distinguished psychologists--I, and other NARTH members began to battle the establishment. (Note that the book in which Sternberg and Perloff tell their stories is worthy of reading--it's called "Psychologists Defying the Crowd" and is published by APA).

With our membership now approaching 1500 and rapidly growing, NARTH members share the sentiment of Dr. Perloff that APA has become "too politically correct, too bureaucratic, too obeisant to special interests."

Regarding APA's attempt to ban re-orientation therapies, Dr. Perloff was recently instrumental in bringing some sense to APA. His opinion prevailed when he stated, about the proposed banning of conversion therapy, "It's considered unethical...That's all wrong. First, the data are not fully in yet. Second, if the client wants to change. listen to the client. Third, you're barring research."

Specifically, in regard to NARTH, Perloff provided the fol-

lowing statement, " I believe that APA is flat out wrong, undemocratic, and shamefully unprofessional in denying NARTH the opportunity to express its views and programs in the *Monitor* and otherwise under APA's purview."

I agree with Dr. Perloff, and I hope that APA is listening.

There is an increasing number of psychologists who are unhappy with responses such as that which Dr. Nicolosi and I received from former APA president Norine Johnson. Before she left office, we requested a brief meeting with her, and she refused--providing no reason, and instead referred our request to Clinton Anderson, Officer of Gay, Lesbian and Bisexual Concerns. I personally requested ten minutes of her time during a visit she made to Salt Lake City. She refused. Under what circumstances would an elected president of an organization refused to meet with a constituent?

Our 2003 Conference: A Highlight of the Year

As I leave the Governing Board of NARTH, I am thrilled at the progress that the organization has made during the four years of my tenure. The current attendance at the NARTH Conference in Salt Lake City had more than 100 psychiatrists and psychologists, many from major institutions throughout this country. The academic presentations were incredible. The presenters had published their work in peer-reviewed journals.

Our 2003 conference featured an impressive roster of speakers whose work had been published in peer-reviewed journals, and the conference granted our attendees 15 hours of officially sanctioned continuing education credit.

NARTH provided 15 hours of continuing education (CE) credits for the mental health professionals attending this conference and NARTH's program received endorsement from the Utah Psychological Association.

Our conference highlighted the just-published study by Dr. Robert Spitzer. This is the same Spitzer who was instrumental in removing homosexuality from the DSM in 1973. His study was published in the prestigious *Archives of Sexual Behavior*.

"Like most psychiatrists," says Dr. Spitzer, "I thought that homosexual behavior could be resisted--but that no one could really change their sexual orientation. I now believe that's untrue--same people can and do change."

And Dr. Spitzer correctly noted that the "...desire for

change cannot always be reduced to succumbing to society's pressure. Sometimes, such a choice can be a rational, self-directed goal."

NARTH as a Professional Resource

In the introductory editorial in the same issue in which the Spitzer article appeared, editor Dr. Kenneth Zucker offered the following comments: "For readers interested in learning about the intellectual and ideological positions of NARTH, a subscription to the *NARTH Bulletin* is worth the few dollars it costs."

I will remain on the Scientific Advisory Board of NARTH and will continue to work vigorously to protect the rights of individuals who are unhappy with their homosexual attractions so that they might seek treatment, and also to protect the rights of professionals to provide such treatment. Now APA needs to follow the lead of the Utah Psychological Association (UPA), one of their affiliates, and provide recognition to NARTH.

Real diversity includes different worldviews, and APA cannot be considered to favor true diversity without respecting diverse worldviews. NARTH's message is one of true diversity. Men and women have a right to claim a gay or lesbian identity or to pursue a heterosexual adaptation. NARTH is about individual choice.

The front page of the *London Times* featured the recently published Spitzer study and offered the following quote from an interview with me:

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"But Dean Byrd, a clinical professor at the University of Utah School of Medicine, said Professor Spitzer's courage had broken a barrier of silence to start a long overdue debate. 'A commitment to the basic civil rights of gays and lesbians does not require a belief in the false notion that homosexuality is [invariably] fixed in all people'."

Based on the plethora of extensive peer-reviewed studies, I do not see how any rational mental-health professional could disagree. Perhaps it is time that NARTH members adopted the courage of the current president of the American Psychological Association to become one of the "Psychologists Defying the Crowd." Now is the time, I believe, for NARTH to battle the establishment and win. ■