

## Growth Out of Homosexuality: Recapturing our Designed Natures

by Joseph Nicolosi, Ph.D.

When is the homosexual man really changed? The man who has overcome his homosexuality is truly a *man who has recaptured his own nature*—not an imitation heterosexual. In fact, a basic assumption of reorientation or reparative therapy is that every man is, on a deeper level, heterosexual—even if he has been struggling with a homosexual *problem*.

I believe the homosexual's natural potential was repressed during early childhood. He has developed a conflict in his natural desire to connect with men, evidenced by the emotional block of defensive detachment. To him, men are mysteries; he is afraid of them and does not feel a part of the masculine world—yet he still longs for them because they embody an unexpressed part of his own nature.

Defensive detachment is the primary block that needs to be conquered through therapy. It is the self-protective, unconscious attitude that has alienated this man from his own masculine self. This attitude is based upon the anticipation of hurt from males, and it originates in his early relationship with father (often, the relationship with mother also interfered with his masculine development) and is repeated in his growing-up relationships with male peers.

So this is the conflict; his desire to connect with men, and his anticipation of rejection. This is why the homosexually oriented man is emotionally "stuck": because what he is most afraid of, is what he most needs.

Gender is a central developmental pathway through which we grow to maturity. Because homosexually oriented men typically evidence a gender-identity disturbance, there has been a block in the normal maturation process. We therefore often see a general delay in mature development, characterized by a struggle with self-discipline, low frustration tolerance, preoccupation with the self, and a fragile sense of personhood.

In relationships we tend to see the following: defensiveness, anticipation of betrayal, a weak sense of personal boundaries, preoccupation with "image" (his own, and that of his lover), and a pattern of over-infatuation in male relationships, followed by crushing disillusionment. This is due to the unconscious expectation that he will be made complete by some other, special man.

Growth out of homosexuality comes through *resolution of emotional conflict*. The client learns to push beyond defensive detachment to establish emotional (not sexual) intimacy with

other men. The healing task is to de-mystify men and masculinity, to experience himself as "one of the guys," and to receive the masculine affirmation that only a man can bestow upon another man. These are the deepest needs of the homosexually oriented person, not sex.

The other healing factor is the person's own powerful desire to change. The men I have worked with who have been successful in reparative therapy possessed a *strong will to overcome*. These are the two critical factors—resolution of emotional conflict, and the power of the will.

But where does the will come from? Psychology is unable to explain its origins. What is it about certain individuals, that they will *take on*, and then *persist*, in such a struggle? For many, religious faith is a powerful motivator. Religious clients have more clarity about their therapeutic goals, as well as support from their faith community. Other men may be powerfully motivated by the desire for a wife and family. But science still can't explain why some individuals prove so determined, while others lose the desire to persevere when they face the inevitable discouragement.

Growth out of homosexuality is very much like cure of alcoholism, low self-esteem, or unhealthy living habits. Like all psychological change processes, it involves a longterm—even to some extent, lifetime—growth process. The client has always felt himself to be mystified by men, but he seeks out therapy because he experiences his repeated romantic idealizations of other men as on some level, "not me." This conviction grows ever stronger throughout the change process. Eventually, his homosexual feelings come to be seen as a symptom, or signal, that important aspects of his emotional life have not been taken care of. He sees that anxiety, loneliness, boredom, envy, the experience of failure, and intimidation by other men, all "set him up" to be vulnerable to homosexual attractions.

When the client is on his way as an overcomer, the most pressing issue that brought him into therapy—namely, his sexual problem—soon becomes subordinate to the life issues that all men face, such as growing in a sense of competence and self-esteem; taking control of the events in his life, including his career; and finding longterm relational fulfillment.

And so he sees that homosexuality is much more than a sexual problem; it is really an *identity problem* which has blocked a broad spectrum of many other aspects of his growth into mature adulthood.

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