

## Review Of Two Recent Studies On Correlations Between Gender Identity And Sexual Orientation

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*Drummond, K. D., Bradley, S. J., Peterson-Badali, M., & Zucker, K. J. (2008). A follow-up study of girls with gender identity disorder. Developmental Psychology. 44(1), 34-45.*

A panel of experts well known for treating gender identity disorder (GID) have recently released data of their longitudinal follow-up with 25 girls who had been diagnosed as having a gender identity disorder (GID). Standardized assessment data in childhood (mean age, 8.88 years; range, 3-12 years) and at follow-up (mean age, 23.24 years; range, 15-36 years) were used to evaluate gender identity and sexual orientation.

At the assessment in childhood, 60% of the girls met the Diagnostic and Statistical Manual of Mental Disorders criteria for GID, and 40% were sub-threshold for the diagnosis. At follow-up, 3 participants (12%) were judged to have GID or gender dysphoria. Regarding sexual orientation, 8 participants (32%) were classified as bisexual/ homosexual in fantasy, and 6 (24%) were classified as bisexual/homosexual in behavior. The remaining participants were classified as either heterosexual or asexual.

The rates of GID persistence and bisexual/homosexual sexual orientation were substantially higher than base rates in the general female population derived from epidemiological or survey studies. There was some evidence of a "dosage" effect, with girls who were more cross-sex typed in their childhood behavior more likely to be gender dysphoric at follow-up and more likely to have been classified as bisexual/homosexual in behavior (but not in fantasy).

*Rieger, G., Linsenmeier, J. A. W., Gygax, L., & Bailey, J. M. (2008). Sexual orientation and childhood gender nonconformity: Evidence from home videos. Developmental Psychology. 44(1), 46-58.*

This interesting study asserted that homosexual adults tend to be more gender nonconforming than heterosexual adults in some of their behaviors, feelings, and interests. Retrospective studies have also shown large differences in childhood gender nonconformity, but these studies have been criticized for possible memory biases. The authors studied an indicator of childhood gender nonconformity that is not subject to such biases: childhood home videos. They recruited homosexual and heterosexual men and women (targets) with videos from their childhood and subsequently asked heterosexual and homosexual raters to judge the

gender nonconformity of the targets from both the childhood videos and adult videos made for the study. Pre-homosexual children were judged more gender nonconforming, on average, than pre-heterosexual children, and this pattern obtained for both men and women. This difference emerged early, carried into adulthood, and was consistent with self-report. In addition, targets who were more gender-nonconforming tended to recall more childhood rejection.

### Recommended Reading From NARTH Web Site

**Review Of Book, "Ex-Gays? A Longitudinal Study Of Religiously Mediated Change In Sexual Orientation"** by Stanton L. Jones and Mark A. Yarhouse  
George A. Rekers, Ph.D.

**The "Trojan Couch": How the Mental Health Associations Misrepresent Science**  
Jeffrey B. Satinover, M.S., M.D.

**Interview With Michael Glatze: A Former Gay Activist Explains How He Left Homosexuality**

**The Role Of Free Agency In Sexual Identity Development**  
Douglas Abbott, Ph.D.

**The Meaning Of Same-Sex Attraction**  
Joseph Nicolosi, Ph.D.

**Helping Women With Same-Sex Attraction**  
Janelle M. Hallman, MA, LPC

**The Three Phases Of The Transformative Experience**  
Joseph Nicolosi, Ph.D.

**Facts, Not Flattery, About Same-Sex Attraction**  
The Ad Hoc Committee On Homosexuality And Scientific Research

**Homosexuality 101: What Every Therapist, Parent, And Homosexual Should Know**  
Julie Harren, Ph.D., LMFT

**Homosexuality: The Essentialist Argument Continues to Erode**  
A. Dean Byrd, Ph.D., MBA, MPH

**Myths and Misconceptions About Behavioral Genetics And Homosexuality**  
Douglas A. Abbott Ph.D.

"We support the freedom of individuals with unwanted homosexual attractions to seek safe, effective psychological care, and we defend the right of mental-health professionals to provide that care. Individuals certainly have the freedom either to claim a gay identity, or to pursue a path of change." -- NARTH President A. Dean Byrd, Ph.D., 2007 Conference speech.

We encourage our members to openly discuss their issues with family members and to provide educational material to those in his "circle" who are willing to learn about the underpinnings of homosexual attractions. Several of our members have attended, together with the families, the Love, Sex, and Intimacy Seminars given by Richard Cohen of the International Healing Foundation. In doing so, they reported experiences which enabled them either to begin or to accelerate the process of peeling back their own defensive detachment from their father figure, untangling their mother enmeshment issues, and repairing the fractured relationships with siblings and other family members.

For those who are married, we often find that the struggler was leading a double life. Most wives who are informed of the homosexual condition by their husbands (which we strongly encourage) respond favorably and perform a major role in the healing process. Again, couples who have attended the Love, Sex, and Intimacy Seminars and utilize appropriately trained reparative therapists for couple's therapy in their follow-up work, reported favorable results. Today's politically correct notion that homosexuality is merely an alternative lifestyle can complicate the healing process, particularly when the family member or spouse incorrectly believes the struggler was born that way or has a so-called "gay gene."

Therefore, we must redouble our efforts to educate the entire community that homosexuality is a treatable condition.

Elizabeth Moberly expressed the importance of family in treating the homosexual condition. In a 1985 lecture given to the Royal Society of Health, she said, "The homosexual condition -- although often an occasion for sexual expression -- is in itself a state of unfulfilled developmental needs. For this reason, homosexuality may best be evaluated, not by comparison with sexuality in general, but by comparison with the parent-child relationship and facilitating of human maturation."

#### **Spiritual Development – Moral Absolute Vs. Moral Relativism**

Although JONAH is an outreach organization that works with all Jews, from the strictly observant Orthodox to the most secular of Jews, we stress certain aspects of our religious teachings. We blend lessons from the Torah (what Christians refer to as the Old Testament) with other Jewish sources in order to help individuals access their inner souls and thus recapture their G-d given inherent heterosexuality.

Part of the reason for this emphasis is to provide the person struggling with SSA with the ability to distinguish a moral right from a moral wrong in today's culture war. The Torah's eternal values integrate the principles of deferred gratification and the exercise of restraint in sexual activity into the human psyche. In doing so, we note how this view is antithetical to today's prevalent moral relativism in which the only factor to restrain human behavior is mutual consent. Simply stated, this attitude can be summed up as

follows: "If two or more consenting adults want to (fill in the blank), then no one else need be concerned."

When we understand that the homosexual cohabitation prohibited by Lev.18.22 and explained in the Talmud (Nedarim 51a) is a mistaken response to an unfulfilled emotional need, we are able to remove an oppressive guilt from the person who was mistakenly led (most often by forces initially beyond his/her control) into such activity. By understanding the root causes, and the unfulfilled needs for which the behavior (or fantasy) attempts to compensate, a program of remediation becomes achievable. We find it helpful to employ a combination of both the Jewish concept of "teshuvah" (a process of transforming one's inner being, commonly translated as "return" or "repentance") and the secular understandings of gender affirming processes.

Jewish law creates a delicate balancing act: accepting the individual as a human being who deserves love and compassion but rejecting the homosexual activity in which he/she may participate. But this "love the person but not the behavior" principle is equally true of any illicit sexual behavior, whether it be heterosexual or homosexual.

For example, we accept the community philanderer as a person but disapprove of his/her sexual brokenness. It is incumbent upon the community to understand the mentality and inner development of the persons who perpetrate the act and find a way to assist them in their healing. JONAH makes special efforts to reach the Jewish community through synagogues and the large network of Jewish organizations in order to spread this message of hope and healing.

#### **Summary**

Feelings of same sex attraction occur in the present but they are based upon or connected to negative experiences (perceived or real) of many years ago. These experiences created negative emotional patterns during childhood and have been maintained into adulthood. Thus, when one is emotionally distressed (connected to the HALT syndrome: Hungry, Angry, Lonely, Tired), the pain strikes at the core of one's masculine sufficiency.

Whenever this happens, the struggler may lose his sense of masculinity, feeling that he is not man enough, or he simply may lose connection to his maleness within. It is at this time that the urge to reach for a comfortable old shoe occurs, when one reaches for an "experience," whether imagined or real, that he believes will provide a substitute for his perceived lack of masculine sufficiency. SSA men have a number of residual negative emotional patterns. In turn, this creates a constant longing or desire for something positive, usually expressed as some type of sexual closeness with another male. All of this occurs in the present tense based upon old emotional patterns that were established and reinforced over many years.

Recognizing that SSA feelings are held in place by negative emotional patterns felt in the present is important because when those patterns change, SSA diminishes and in many cases is replaced by heterosexual feelings. That is why GAP deals holistically with

a man at several layers of his personality.

Of course, a relapse to homosexuality may occur if one returns to the old negative emotional patterns. Thus, our efforts must work to undo – “interrupt” if you will – long-set patterns of response and create new patterns of response by creating a new more pos-

itive lifestyle that prevents the patterns from returning.

GAP helps an individual to learn how his old emotional patterns functioned, how they can be changed, and most importantly, how to keep his new more positive emotional patterns alive.