

NARTH BULLETIN

The well-known national organization "Parents and Friends of Lesbians and Gays" (P-FLAG) serves as a support group for parents seeking guidance for their homosexual children. P-FLAG is recommended as a resource group by the U.S. Department of Education and U.S. Department of Justice in its upcoming manual, "Preventing Youth Hate Crime." Many schools, community agencies, and even nationally syndicated newspaper columnists refer families to it. P-FLAG has affiliates in all 50 states, with about 70,000 families among its membership.

A look at some of P-FLAG's literature and recommended books, however, reveals an approach to child guidance which is consistently both *sexually and socially radical*. First-person stories aimed at teens tell in pornographic detail of the delight of a young girl's sexual seduction by her lesbian teacher; of gay relationships between teenage boys and much older men; and of the precise how-to's of masturbation. Teenagers are specifically encouraged to *use only their feelings* as a guide to sexual behavior; to be their own judge of what is right and wrong; and to "have fun" experimenting. If a sexual behavior feels good, the logic says, it will tell them "who they are." Teenagers are encouraged to see religious traditionalists as mean-spirited and hypocritical, while at the same time, to see gay consciousness as "sacred." *Were similar books recommended by parenting groups for "straight" teenagers, they would be considered violations of community standards of decency.*

Recommended Reading for Teenagers?

A Closer Look at P-FLAG

Some of the recommended books are relatively "tame" on the surface, justifying teenaged homosexual experimentation with the usual "This is me. This is who I am." Others go much further—glorifying sex with animals, witchcraft, feminist goddess worship, worship of sexual pleasure as a form of religion, promiscuity with hundreds of partners, bisexual orgies, and voyeurism. *If the reader is uncertain of what evil is—or dismisses it as socially constructed—or questions whether evil even exists—perhaps he will understand what it is when he has finished some of the books which P-FLAG recommends for teenagers.*

Ironically, one of their booklets, "Beyond the Bible: Parents, Families and Friends Talk about Religion and Homosexuality," has a section entitled, "Caution: Hate Groups." Listed organizations include Promise Keepers, Focus on the Family, Concerned Women of America, and Family Research Council.

That pamphlet recommends that religious seekers read *Gay Soul: Finding the Heart of Gay Spirit and Nature*, a book which labels gay sex

"sacred." In it, first-person stories are told of gay men delightedly flouting their vow of celibacy in seminaries; of a man reporting that he had a peak orgasmic experience during sex with God; and of sado-masochic torture being enjoyed by a psychotherapist as a mystical experience. Another writer in this anthology labeled as "sacred" the experience of incest between fathers and brothers. (*Gay Soul* was reviewed in the April 1997 *Bulletin*.)

But the most damaging P-FLAG pamphlet is "Be Yourself: Questions and Answers for Gay, Lesbian and Bisexual Youth," which includes a recommended reading list specifically aimed at teenage readers.

From the pamphlet's recommended book *Young, Gay and Proud!* by Don Romesburg, ed., AlyCat Books, 1995—one of the "tamer" publications:

In the chapter, "Getting Started":

"There are all sorts of stupid rules, like that...guys shouldn't wear dresses. Girls aren't supposed to shave their heads. People might say that certain kinds of sex are dirty...we all know about all these 'rules'...Many of them are more than just foolish—they can be destructive...No one has the right to make anyone else feel bad about their sexuality or their sexual choices...

"There is no right or wrong way

Editor's Column

by Joseph Nicolosi, Ph.D.

What is "Cure"?

When is the homosexual man "cured"? 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 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. 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.

What Needs "Curing"?

Defensive detachment is the primary block that needs to be conquered through therapy. It is the self-protective, unconscious attitude that has alienated him 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). So this is the conflict; his desire to connect with men, and his anticipation of rejection. This is why the homosexual 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 homosexuals typically evidence a gender-identity disturbance, there has been a block in the normal maturation process. We therefore typically see a general immaturity, characterized by a struggle with self-discipline, low frustration tolerance, preoccupation with 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, followed by crushing disillusionment. This is due to the unconscious expectation that some other, special person will provide a sense of completion for him.

The man struggling with homosexuality may possess a sociable persona, but he is often, in actuality, an isolationist who has great difficulty establishing and maintaining intimate relationships. Of course many straight men suffer the same emotional deficits, but these deficits are not characteristic of heterosexuality.

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

continued on page 21

THE NARTH BULLETIN

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"Victory on the Bow of a Ship"

Interview

Diane Eller-Boyko, R.N., L.C.S.W.

Ms. Eller-Boyko is a Jungian-oriented psychotherapist in private practice in Redlands, California. Married with two children, she is a conference speaker and has appeared on several radio and television programs. She is interviewed here by Joseph Nicolosi.

JN: There are very few psychotherapists working with transitioning lesbians, so I'd like to take the opportunity to let people know what you do. Please tell us about your work.

DEB: A client will come to me because she's been involved in lesbianism. She'll tell me—in words more or less like this—"Connecting with another woman felt like an ancient longing fulfilled. A homecoming." When I hear this, I know that something of the feminine is missing within her. The feminine ideal—creative, expressive, intuitive, receptive, empathic, connected to matter and spirit—has somehow been lost.

JN: And what does this mean?

DEB: In falling in love with another woman, she is really seeking to connect with herself. Looking at lesbianism developmentally, I would suggest that she is seeking to unite with the archetypal "good mother." Of course, this isn't a dogmatic blueprint for every lesbian-identified woman; we're all unique. But this fits most of the clients I've seen...and it's my own personal story.

JN: So you, yourself, transitioned out of lesbianism...

DEB: Yes, with the help of a very wise and skilled Jungian analyst. As a psychotherapist, I believe I can take a client no further than I have gone in my own developmental process. So I have to stay deeply connected to my own unconscious in order to be able to facilitate the same connection for my clients.

JN: So how does therapy begin?

DEB: Usually, by looking at the client's close relationships. And it should be no surprise to the client that the archetypal "good mother" rarely exists. How many of us have mothers who modeled the feminine in its truest form—that were available, empathic, present, and fully receptive? With lesbians, the mother has very often been unavailable. During the course of our sessions, this will usually become apparent. The mother was most likely preoccupied and unavailable, was disconnected from her own femininity, and often had negative attitudes toward men.

JN: How do you define the feminine?

DEB: The feminine reality is...a very rich, connected, sensual, receptive, wise, nurturing, embracing experience.

Femininity honors heaven and earth, embraces body and spirit, and of course, is the essential complementary element for the masculine. To you, what I am saying may sound poetical, wistful, magical—perhaps nonclinical. But if women are to be reached, we have to see what they see, and speak the language they speak.

JN: And what is that language?

DEB: We connect with the feminine within ourselves through dream images, stories, and creative expression.

JN: That's so different from the way my male clients connect.

DEB: Women can't be reached through traditionally masculine lines of thought—logical, analytical, devoid of emotional expression. A woman is drawn to other women because she seeks heart and soul connection. Perhaps she was never able to get it, because society expects her to be out working and providing for herself instead of puttering in her garden. She comes to recognize the zest, color, vitality, creativity and soul that are really the essence of being feminine. For it is in *being together* through this language, this feeling tone, that women find nourishment.

JN: What areas do you explore with the client?

DEB: We look back not only at the individual's past, but we also look back culturally, historically, religiously...back to a time and place when the feminine was alive, creative, honored...associated with the sacred. To a time when women were honored for what the feminine offered, and men were honored for their masculine strength and "doing." We trace back culturally as well as psychologically to the feminine core of our being. Looking back helps the client see the cultural and religious shifts, and the shifts in her own psychological development, that started an erosion and devaluation of the feminine spirit.

JN: When you spoke about the feminine essence I flashed on my mother, and I also flashed on Jennie, a former secre-



Diane Eller-Boyko

continued on bottom of page 18

Book Excerpt

Out of Egypt: Leaving Lesbianism Behind

Excerpts from the book by Jeanette Howard

(Regeneration Books and Monarch Publications, Crowborough, England 1991; reprinted in 1997)

Out of Egypt is considered a classic in the literature, and it is now available after having been out-of-print for some time. The author describes her own struggle and the principles she discovered as she counseled others. The book was written for a Christian audience, but it should also be helpful to women of other faiths, or no faith. We quote from the book directly:

Pseudo-Masculinity as Self-Protection

Many women...were brought up with poor masculine role models ...In reaction to a negligent or unresponsive father, and coupled with an ambivalence or disdain toward her mother, the daughter assumes masculine functions. She rejects the feminine role model based on her view of her mother, and embraces all that is masculine. The woman focuses on what she can *do*, rather than on who she can *be*, and she places emphasis on self-reliance, perfectionism and competition. The woman becomes performance-oriented, and has a tendency to spend her energies on causes or "rights" in which she believes. So often this is an unspoken cry for final recognition from her dad.

In my own past, the problem lay in the fact that I had been functioning in the "masculine mode." I had little problem with initiation. I was able to perform and accomplish many things. But I was woefully inept at receiving from anybody...

To walk in wholeness requires a more balanced approach to life than we have been experiencing. It requires a compatibility between our masculine and feminine sides, which will produce harmony rather than discord.

Similarly, the masculine/feminine equilibrium has often been disturbed in a woman who has suffered abuse. Her thoughts encourage [her to engage in] controlling and manipulative behavior. *No one will ever hurt me again!* Thus, she keeps everyone at bay, or controls them through seduction.

The World Applauds our Defense Mechanisms

For whatever reason, many women adopt pseudo-masculinity as a form of self-protection. They reject all that is inherently feminine, and strive to obtain "equality" with, or superiority over, men.

The destructiveness of this stance passes unnoticed, because the world applauds our defense mechanisms. But the cost of this applause is high. By attaining "equality" with men, we entomb our gentle, vulnerable and trusting qualities under a guise of toughness, independence and

suspicion. We trust no one but ourselves. Our hard, protective layers smother our heart-cries to be cared for, held and loved.

The other end of the spectrum of imbalance manifests itself in women who derive their sense of identity and security from other people. Assuming the role of a child, these women rely on others to define and determine their lives. In this instance, they mistake passivity for femininity. This stance is just as unbalanced as the woman who strives for recognition through her actions. Continual grasping from other people obscures the woman's understanding of self. Without a firm base to fall back on, her relationships with others are precarious.

Just as all families lie somewhere on the dysfunction spectrum, so all women lie somewhere on the spectrum between acceptance and rejection of their gender and feminine identity.

On the one hand you may have encountered those lesbians who personify all that is feminine, and have no problems seeing themselves as such. On the other hand, you may have come across women who have denied their gender identity and femininity so much that, except for the obvious physiological differences, they could be mistaken for a male. But the majority of those struggling with lesbianism fall in the murky middle ground.

Attitudes and beliefs about men vary, too, depending on our place on this curve. However, there is one predominant attitude I have encountered among nearly all lesbians: feeling superior to men.

Gender Superiority

Even though I detached emotionally from my mother at an early age, women ran my life. I did have a father and two brothers, but I remember having very little interaction with them... Attending an all-girls' school where personal discipline and academic excellence were the order of the day, my already shaky femininity was further squelched. I had crushes on various teachers who positively dripped with femininity. Now I realize that I was attracted to qualities in them that I felt lacking in myself...

Trust--The Key to Embracing Real Femininity

Extricating oneself from anywhere on the spectrum of broken femininity is not easy. Many reasons, usually deep wounds, predisposed us to operating the way we do...



Book Excerpt:

Freud Scientifically Reappraised: Testing the Theories and Therapy

by Seymour Fisher and Roger Greenberg (1996). New York: John Wiley & Sons.

Fisher and Greenberg evaluate psychoanalytic theories in the light of modern empirical research to determine if they can be scientifically supported. "The reports concerning the male homosexual's view of his father are overwhelmingly supportive of Freud's hypothesis," they say. However findings on mothers of homosexuals were less consistent. We quote directly:

Male Homosexuality

"At the psychodynamic level, Freud assumed that male homosexuals were individuals who could not cope with the Oedipal intricacies. He (Freud, 1910, 1923, 1924) proposed that their difficulties stemmed from the formation of an overly strong 'erotic attachment' to mother, which was 'favored by too much love from the mother herself' and reinforced by the 'retirement or absence of the father during the childhood period.' This meant they had to cope with intensified 'feminine influence.'"

"Presumably the boy's Oedipal conflict with father would be heightened by this state of affairs; and, in turn, this would magnify his castration anxiety. Such anxiety would then interfere with taking any woman as a love object. The individual would unconsciously equate sexual intimacy with any woman as equivalent to his father-forbidden relationship with his mother; and consequently find that his heterosexual contacts generated guilt and anxiety of such intensity as to be intolerable."

"Freud theorized further that when the male who is to become homosexual finds he cannot safely love mother, he takes refuge in a special defense mode. He 'identifies himself with her' and directs his love toward others as he assumes she would. That is, he takes on her role instead of relating to her as a love object. However, he also targets himself as a model of whom mother would prefer, and therefore seeks males who resemble himself. In his homosexual mode, the sex object he prefers is himself, but within a 'mother loves me' context. The sex object he seeks, says Freud, must possess a penis whose presence will soothe the castration anxieties. In these terms, one might say that the homosexual wants a 'girl with a penis' as his love object."

Pre-1977 Findings

"Two major hypotheses that we originally extracted from

Freud's formulations concerning homosexuality were that male homosexuals have had a particularly hostile-negative relationship with father, and an unusually close and intimate one with mother."

"We found 22 studies in the literature that were roughly supportive of either or both of these two hypotheses, and six that were not. After reviewing them, we (Fisher & Greenberg, 1985) concluded:

"What kind of a summary statement can be made concerning the material just reviewed? First, the reports concerning the male homosexual's view of his father are overwhelmingly supportive of Freud's hypothesis. With only a few exceptions, the male homosexual declares that father has been a negative influence in his life. He refers to him with such adjectives as cold, unfriendly, punishing, brutal, distant, detached. There is not a single even moderately well controlled study that we have been able to locate in which male homosexuals refer to father positively or affectionately. On the contrary, they consistently regard him as an antagonist. He easily fills the unusually intense, competitive Oedipal role Freud ascribed to him. (p. 242)"

"However, the data were somewhat less supportive of the hypothesis about mother. About half of the published studies concerned with homosexual sons' views of their mothers supported the idea that a mother is unusually 'close' or intimate. The other half either depicted her as not different from mothers of heterosexual men, or applied terms not relevant to the intimacy dimension. We tentatively concluded that the data gave a small supportive edge to Freud's hypothesis concerning mothers of homosexuals."

Post-1977 Findings

"...In 1989, Fisher identified 58 empirical studies in the total literature concerned with parents of homosexuals. We have not located any additional relevant findings that have appeared since 1989. Fisher analyzed the 58 studies and reported that a large majority supported the notion that homosexual sons perceive their fathers as negative, distant, unfriendly figures. However, Fisher stated that only a minority of studies supported the concept that homosexual men perceive their mothers as unusually close and seductive."

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"Fisher emphasized that this entire literature is based on a strategy of asking adult homosexual subjects (and the adult heterosexual controls) to remember how their parents treated them during childhood. The questionnaires made such inquiries as, 'Was your mother overly close to you?'" 'Was she intrusive?' 'Was your father cold?' 'Was he weak?' 'Was he distant?' Fisher was skeptical that Freud would have accepted the idea that the homosexual male's original childhood experiences with his parents would have been "recorded" with any accuracy at a conscious level; and even if they had, how available would the original perceptions be to the individual answering questionnaire many years later? Fisher remarked:

"From this perspective, there would be so much chance noise in the recall of adults about parent closeness-distance issues, that it would apparently require a miracle for any possibly existing relationships between being homosexual and the styles of one's parents to show up. This would seem to be especially true within the context of the importance that psychoanalytic paradigms place on unconscious feelings. One would *a priori* assume that a fair test of Freud's formulations requires some means of measuring the homosexual male's unconscious views of each of his parents. (p. 167)"

"However, Fisher then noted: 'It is therefore astounding how many of the studies utilizing straight-forward questioning of homosexual men (either by questionnaire or interview) have shown significant trends'...(pp. 167-168) for such men to depict their fathers in negative terms. Others (e.g., Ruse, 1981) have also commented on the apparent solidity of the findings in the literature concerned with this matter."

"As already mentioned, the apparent pre-1997 trend for the mothers of male homosexuals to be described as close and seductive did not hold up in the larger set of post-1977 data."

"Fisher further qualified the findings concerning the negative images of father by pointing out that many of the studies in this area suffered from potentially serious defects, which he specified as follows:

1. Some of the studies were based on highly selective samples (e.g., homosexuals in treatment or institutionalized for some reason).
2. The definitions of "homosexual" were in some instances so vague that one cannot distinguish whether subjects were possibly bisexual or had simply experimented on a limited basis with homosexual acts.
3. Bias was introduced into responses because some subjects were in psychoanalytic therapy and therefore had already been indoctrinated with Freud's theory of homosexuality.
4. Few attempts were made to differentiate subjects with reference to mediating variables such as degree of integration into the homosexual community, age

at which consistent homosexual behavior began, or degree of masculinity-femininity."

"Fisher concluded that despite such defects, the overall trend of the findings was significant. In addition, he pointed out that these were individual studies (e.g., Pledger, 1977) of unusually high quality in which a number of the confounding variables just mentioned were well controlled, and the results still supported the 'negative father' hypotheses."

Cross-Cultural Evidence

"Cross-cultural studies specifically concerned with homosexuality have added some support for this hypotheses. Carroll (1978a) analyzed coded data available from anthropological observations of 186 societies (Standard Cross-Cultural Sample) described by Murdock and White (1969) and found significant affirmation for the psychoanalytically derived hypothesis that the frequency of homosexuality in a culture would be inversely related to the closeness of contact between fathers and sons. This matches the previously described findings that homosexual men tend to perceive their fathers as negative, distant figures."

"...The post-1977 material we have reviewed concerning male homosexuality has narrowed the apparent support for Freud's formulation in this area. Previously, we regarded the empirical data to be congruent with Freud's theory that male homosexuality derives from too much closeness to mother and a distant negative relationship with father. As noted, the increased pool of data available reinforces the concept of the negative father, but fails to support the idea of the overly close, seductive mother. The concept of the negative father is strengthened not only by additional studies based on questionnaire responses and subliminal inputs, but also cross-cultural quantitative indexes."

"So, we are left with only one of the major elements in Freud's original formula concerning the parental vectors that are involved in moving a male child toward homosexuality. This reduction in confirmed points on the graph makes it all too easy to conjure up alternative theories of homosexuality that could incorporate the 'negative father' data. For example, investigators could speculate that the negative father simply does not provide his son with the opportunity to identify with a model of how to be a male with heterosexual aims. There would be no need to appeal to the Oedipal image of a son competing with his father for mother's love."

Lesbians: Pre-1977 Findings

"We had difficulty in 1977 in generating testable hypotheses from Freud's formulations about the female homosexual. One hypothesis that seemed justified was that she had had an unusually frustrating or disturbing relationship with her father. This would seem logical if Freud were correct in assuming her retreat from active heterosexuality and her defensive identification with father were rooted in frustrating interactions with him."

continued

"We did not consider it possible to derive a clear hypothesis concerning how the female homosexual would regard her mother."

"The pre-1977 data (Fisher & Greenberg, 1985) based on questionnaire responses collected in six studies did, as hypothesized, support the view that the 'female homosexual thinks of her father as an unfriendly, unpleasant person who had little to offer by way of a relationship' (p. 251)."

"Nothing of significance was found that would in any way clarify the nature of the homosexual girl's relationship with her mother."

Lesbians: Post-1977

"Since 1977, Fisher (1989) has pulled together a total of 18 studies that have used questionnaire or interview techniques to assess quantitatively whether homosexual and heterosexual women differ in their views of their parents. We have not found any additional pertinent studies published since 1989. Fisher indicated that no significant trends emerged with respect to differences in attitudes toward mother."

"However, 11 of the 18 studies pictured the homosexual woman as feeling that father was negative or distant or frustrating; 6 studies did not; and 1 study presented data too vague to be meaningful. One of the best studies (Bell, Weinberg, & Hammersmith, 1981) that also included one of the largest diverse samples supported the 'negative father' concept. The authors concluded: 'Broadly speaking, then, the path made indicates that women who felt their fathers were detached or hostile toward them were somewhat likely to become homosexual' (pp. 129-130). Although Bell et al. deemphasized the overall importance of this 'father' factor in the development of female homosexuality, significant effects were apparent in their data."

Problems with Father for Both Gays and Lesbians

"Generally, the findings tend to be in agreement with Freud's idea of a 'negative father.' It is noteworthy that the same result emerged for males. Both female and male homosexuals apparently felt highly estranged from their fathers. As already mentioned, while the 'negative father' findings fit with one aspect of Freud's theory of homosexuality, there are various other aspects that have either not been tested, or have failed to be confirmed. The idea of the overly close and seductive mother who magnified Oedipal tensions for her son and thereby moves him toward homosexuality has not held up empirically. Also, we do not have any serious empirical data concerning other levels of the theory having to do, for example, with such variables as the homosexual female's presumed intensive disillusionment with her mother, or her supposed defensive identification with her father."

"The fact that both male and female homosexuals entertain a negative father image could easily fit other paradigms besides Freud's. Thus, Fisher (1989) suggested that since a considerable literature (e.g., Biller, 1976) indicates father

typically carries a disproportionate amount of the responsibility for enforcing, and encouraging, conventional sex typing in the family, it is possible that a distant negative father would be relatively ineffectual in his efforts to influence sex typing, and thereby encourage deviant sex-role attitudes such as might be associated with becoming homosexual. This account would not correspond to Freud's Oedipal construction of the homosexual 'choice.'"

No Conclusive Data for Biological Origins

"Before closing this discussion, it should be acknowledged that there are increasing declarations in the literature that homosexuality derives to a significant degree from genetic or so-called biological factors (e.g., Allen & Gorski, 1992; Bailey & Pillard, 1991; Gartrell, 1982; Hault, 1984; LeVay, 1993). However, the data underlying such assertions have not yet received consistent cross-validation, and the entire matter remains in a state of uncertainty (Byne & Parsons, 1993; Friedman & Downey, 1993). It would be premature to conclude in any large sense that a biological etiology for homosexuality has been dependably demonstrated."

"...Having said the foregoing about Oedipal findings, we must admit that we are still uneasy about where we have come out with reference to Freud's theory of homosexuality. We have rather conservatively concluded, given the absence of evidence that homosexuality in males is associated with overcloseness to mother, that we cannot consider the evidence of unusual father distance and hostility in this context as sufficient support for Freud's position."

"However, there are some worrisome incongruent details. It is striking that father's distance has been demonstrated to be true in the case of both male and female homosexuals. We are particularly impressed that cross-cultural data (e.g., Broude, 1981) have shown that the degree of homosexuality practiced in various cultures is positively correlated with indexes of father's degree of distance or negativity during the socialization process. Also, we cannot but be impressed that Silverman et al. (1978) were able, by means of subliminal Oedipal inputs, to intensify homoerotic feelings in homosexual men. Such a result would appear to depend on a finely tuned theoretical sequence. Presumably, the Oedipal stimuli increase Oedipal fantasies that are unacceptable, and therefore mobilize compensatory (defensive) homosexual feelings. If the Silverman et al. study is methodologically sound (as it appears to be), the pinpointed result implies considerable power in the theory from which it was derived."

"However, in balancing such findings against the total sweep of other data and also the lacunae (especially with reference to homosexuality in women) where essential data are lacking, we concluded that it was sensible to adopt a skeptical stance—but uncertainty persists."

"The consistent picture of father-distance and father-negativity associated with homosexuality in both males and females keeps pressing for explanation." ■

In Defense of Scientific Truth

by Charles Socarides, M.D. (1922-2005)

It is a matter of professional responsibility to comment on an article appearing in the *New York State Psychiatric Association Bulletin*, APA, Area 2, Volume 4, Number 4, pp. 8-10 by Jack Drescher, M.D. in your Spring/Fall issue, 1997, entitled "What Needs Changing? Some Questions Raised by Reparative Therapy Practices."

This essay is so filled with defamatory statements, inaccuracies, false assertions and conclusions, as well as misinterpretations, that it would take a full-length feature essay to correct them all. Dr. Drescher, a prominent member of the national central committee of gay lobbyists, has egregiously utilized his position as associate editor of the *Bulletin* to tar and feather those who practice psychoanalytically informed psychotherapy (reparative psychotherapy) with homosexual patients. Let me be crystal clear: "reparative therapy" is simply psychotherapy aimed at repairing the damage done in early childhood which has led to the development of a prehomosexual child, and later a homosexual adult. Obligatory homosexuality is a developmental disorder--contrary to Drescher's political bias--and those who desire to correct the problem should have the right to do so by pursuing this course of treatment.

Deriding even the normality of heterosexuality, Dr. Drescher dismisses any scientific reports on successful treatment as misguided, ineffective, and even "cruel." Nowhere does he cite the successes found in the following reports:

- (1) Edward Glover's report (1960 Portman Clinic Survey, London),
- (2) a fact-gathering committee report of the American Psychoanalytic Association (1956),
- (3) the Bieber, et al. report (1962),
- (4) the MacIntosh report in 1994 published in the *Journal of the American Psychoanalytic Association* (1955).

The latter was a responsive survey of 285 psychoanalysts who reported having analyzed (done brief or reconstructive psychoanalytic psychotherapy, i.e., reparative psychoanalytic therapy) with 1,250 homosexual patients, 23% of who changed to heterosexuality from homosexuality and 85% had significantly benefited from therapy.

While Dr. Drescher disregards such figures as immaterial--or perhaps he does not know of them--one has only to remember that only approximately a third of patients with obsessional neuroses, severe phobic, or severe anxiety conditions are completely cured of those conditions.

The National Association of Research and Therapy of Homosexuality (NARTH) report of 1997 confirmed the

MacIntosh study.

Finally, in the official pages of *Psychoanalysis: the Major Concepts*, 1995, edited by B. E. Moore and Bernard D. Fine, published by Yale University Press, Jon K. Meyer, M.D., commissioned to write a definitive paper on the status of our knowledge of homosexuality for the American Psychoanalytic Association's Glossary, has given a balanced and coherent view of the problem. Nowhere in this fair article does Dr. Meyer dismiss the work of Socarides and other psychoanalysts and the importance of psychoanalytic psychotherapy for homosexuality, either from a research, clinical, or therapeutic point of view.

Space dictates that I comment only on several other false assertions presented by Dr. Drescher. Foremost among these is his ignorance of what led to the removal of homosexuality from the DSM in 1973. He blandly asserts that this action was simply due to an "examination" of "unexamined cultural stereotypes of gender and identity" in a "new world that offers an ever increasing number of biological paradigms for normal homosexuality" (p. 8).

In truth, this scientific hoax instigated by gay activism within the American Psychiatric Association led to a revolutionary change in our sexual mores and customs. This change, more revolutionary than all other changes in recent social history, was ushered in by a single act of considerable consequence: the removal, through social-political activism, of homosexuality from the category of aberrancy by the American Psychiatric Association. It was, furthermore, a fateful consequence of our disregard for the established psychoanalytic knowledge of human sexual behavior (see, "Sexual Politics and Scientific Logic: The Issue of Homosexuality," *The Journal of Psychohistory*, Vol. 10, no. 3, Winter 1992, New York and London), as well as the revelations by Dr. Ronald Bayer (Fellow of the Hastings Institute of New York and now professor in the Columbia School of Social Work) that "the Council on Research and Development of the American Psychiatric Association [and the Board of Trustees, APA] did not officially investigate or study the issue thoroughly before it gave formal approval to the deletion of homosexuality from the DSM II." (Bayer, R. 1975, *Homosexuality and American Psychiatry*, Princeton University Press, pp. 130-131).

Now Dr. Drescher wishes to put the final nail in the coffin of hope for the homosexual and his family. All in all, to many American psychiatrists, including those of our District Branch, this action has remained a chilling reminder that if scientific principles are not fought for, they can be lost.

Dr. Drescher complains of the "rhetoric" of NARTH, a rhetoric which hardly exists. We have been essentially silenced by the peremptory rejection of our scientific papers at national and local APA meetings; advertisements for our public forums have been cancelled, and we have been branded as "bigots," "homophobes," or "prejudiced." Freedom of thought and intellectual inquiry are overwhelmed by the deluge of gay propaganda and the lies of the highly monied, omnipresent, gay activist lobby.

Finally, it should be recalled that in 1972, against the rising power of the gay political psychiatric machine and its confusing impact on the media, the New York County District Branch of the American Psychiatric Association, to its credit, under the leadership of Dr. Bernard Diamond, established a Task Force on Homosexuality as an official committee of our organization. Its purpose was to shed light on the nature, meaning, and content of homosexuality to psychiatry and an increasingly bewildered public. Thus the first all-psychiatric task force on homosexuality was born. It was and has been the only such medically-oriented body in the country.

After two years of deliberations and sixteen meetings, the task force, composed of a dozen experts affiliated with our district branch and the major medical centers of New York City, attempted to submit its report on homosexuality to the Executive Council of the New York City District Branch headed by Dr. Robert Campbell. This report unanimously documented the fact that obligatory homosexuality was a disorder of psychosexual development, and it simultaneously asked for civil rights for those suffering from the dis-

order. The report was deemed "not acceptable" to the new members (Dr. Bernard Diamond had died during the interim), and some old members of this executive committee.

The message was coming through loud and clear; the only report acceptable would have been one that was not only in favor of civil rights, but that also declared homosexuality not a psychosexual disorder. The committee was then dissolved.

Its members, determined that the report see the light of day, eventually published it as a "study group" report in the late spring of 1974 (New York City District Branch, APA Task Force Report, members: Socarides, C. W. (cochairman), Bieber, I. (cochairman), Bychowski, G., Gershman, H., Jacobs, T. J.; Myers, W., Nackenson, B. I., Prescott, K. F., Rifkin, A. H., Stein, S., Terry, J.) Published in the *International Journal of Psychiatry*, 2(4) 460-479, (1973) (a copy of this report may be obtained by writing to the author of this letter).

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Therapy of Sexual Perversions* (1988)

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Published in *Psychiatric News*, March 6, 1998

On Childhood Gender-Identity Disorder

We believe it is our responsibility to correct certain statements made by Lawrence Newman, M.D., in the December 5 *Psychiatric News* article, "Children With Gender-Identity Disorder Benefit From Early Psychiatric Intervention."

To his credit, Dr. Newman urges compassion and kindness toward children with a disturbance in gender-defined sexual identity. He accurately states that such a condition leads to a lifelong disturbance in an individual's relationship with himself and with others, as well as producing isolation, depression, and anxiety in a prehomosexual child as he grows from childhood into adolescence and later adulthood. He announces correctly, but with apparent unconcern over this development, that such children, of course, will "develop a homosexual orientation in later life." But he makes no reference to the possibility of the reversal of this condition, while, in actuality, there are multiple case reports now appearing in the literature attesting to its reversibility.

He bases this assertion on a mysterious "landmark long-term study"--without citing it--saying there is "no known therapy which could change this probability." This is completely erroneous and misleading, both to parents and to the child, as well as to the multitude of readers of *Psychiatric News* worldwide.

We cite, for example, Edward Glover's report (1960 Portman Clinic Survey), a fact-gathering committee report of the American Psychoanalytic Association (1956), the Bieber et al. report (1962), and the findings of Socarides (1978, 1997). He has completely disregarded the MacIntosh report (1994) published in the *Journal of the American Psychoanalytic Association* (1995) that in a respon-

sive survey of 285 psychoanalysts who reported having analyzed 1,250 homosexual patients, 23 percent changed to heterosexuality from homosexuality and that 85 percent had significantly benefited from therapy. The National Association for Research and Therapy of Homosexuality report of 1997 confirms MacIntosh's study.

We take exception to Dr. Newman's attitude that parents disturbed over this development are "homophobic"--an erroneous term (for it does not meet the criteria of phobia) coined by the gay movement to stigmatize all parents who disapprove of this condition, for no parent ever raises a child to be a homosexual.

Tolerance, compassion, and understanding of both child and parents, along with a recommendation for psychoanalytic therapy, should be the position of dedicated and responsible psychiatrists.

One's compassion for the plight of the prehomosexual child and his parents, the child's own responsiveness as a patient, and his value as a human being lead to a mutuality of gratitude and satisfaction between child, parent, and therapist that well justifies the commitment to the alleviation of this important and serious disorder.

It is no kindness to children with a gender-identity disorder--a precursor to adult homosexuality and other sexual deviations--to suggest that this condition should be not only accepted, but embraced, by both the patient and his family.

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Psychoanalysts Endorse Same-Sex Marriage

Following in the steps of the American Psychological Association, in December 1997 the American Psychoanalytic Association adopted a resolution to endorse gay marriage.

According to a statement posted on the internet by the organization's Committee on Public Information:

"Marvin Margolis, M.D., Ph.D., President of the

Association, expressed his enthusiastic support for this resolution and congratulated those many psychoanalysts who have used political and judicial avenues against attempts to infringe upon the civil rights of all individuals."

One wonders how the social-moral-political issue of marriage entered the province of psychoanalysis. Laymen who believe that the Association's opinion carries the same authority as "hard science" will, undoubtedly, believe that the only reasonable stance is an acceptance of gay marriage. ■

Action Group Forms in Seattle: Parents and Teachers for Responsible Schools

By Eleanor Durham

The author describes her remarkably determined and methodical campaign to protest the gay advocacy which is changing school programs in Seattle:

My husband and I are both lawyers, and the parents of a five-year-old boy. Last winter we had finally decided, with some anxiety, to enroll our son in the neighborhood school for kindergarten, instead of private school. It was just at that time that I read in the local newspaper that the school district would be placing "gay affirming" books into the libraries of the elementary schools district-wide.

The books were to be purchased with funds donated to a local homosexual advocacy organization, PRIDE, by a lesbian city council member and her partner. Among the books they wanted to see placed in the schools were "Heather's Two Mommies," "Daddy's Roommate," "Daddy's Wedding," and "Making Love Visible."

Seattle is a rather liberal city and there are lots of openly homosexual people in local government and public life. The city has statutes prohibiting sexual-orientation discrimination and providing domestic partner benefits, and last year the mayor was pictured on the front page of the local paper at the church "wedding" of a homosexual couple who worked at city hall. Every branch of government has its "Sexual Minority Advocacy Council," and probably 30% of the teaching, library, and administrative staff in the public schools are homosexual. So it was not immediately evident where to turn to for advice on how to react to this announcement.

As it turned out, there *was* no one to turn to for advice. Fortunately, when an organization in a neighboring community got its name in the papers by speaking out against the books, several people called them. This group put us all in touch with one another, and another "grassroots" activist group was born. We met with the school-district superintendent and the president of the school board and told them of our concerns. We attended school-board meetings and asked that the decision be reconsidered. We held press conferences and spoke out against the books: all to no avail.

An Issue of "Safety"

We were informed that "gay kids" are at increased risk of harassment and violence, and that the result of this was increased truancy, tardiness, and drop-out rates, increased participation in unsafe sex and drug use, and increased risk of suicide. Therefore, intervention by the District was necessary to stop the abuse and help Seattle's homosexual kids succeed in school and have good self-esteem.

The Goal: A Gay-Affirming Curriculum

In the process, we learned there was a Sexual-Minority Advocacy Council within the district that had engineered the book deal. We filed public records requests on this group, and discovered its members had been working since 1988 to bring to fruition *an entire gay-affirming curriculum for every grade level and every subject*. They were working with the King County Department of Public Health to manufacture the data necessary to justify the program (i.e. to categorize it as a "safety" issue).

We then looked into the district policies and guidelines for adopting and implementing curriculum and selecting books, and discovered that the district was not following its own procedures. In particular, it was not complying with its own *controversial-issues policy* in the presentation of information about homosexuality in the Family Living and Sexual Health programs for grades 7/8, 9/10 and 11/12.

Fighting for a Balanced Program

We determined that an effective strategy for confronting this issue was to compel the district to teach both sides of the debate concerning homosexuality—something they clearly do not want to do. I drafted the following letter (*see next page*) to request that the district implement the NARTH guidelines for the teaching of homosexuality. The other steps we have taken are:

- 1) Creating a "Parental Notification Request" form, asking that children not be exposed to information on homosexuality without obtaining parental approval;
- 2) Establishing a mailing and networking list;
- 3) Creating a donation-request form and news bulletin;
- 4) Lobbying for helpful legislation;
- 5) Putting together a speaker's bureau.

It is not easy for parents to put up this kind of fight. Everything is stacked against us. The homosexual-advocacy groups have been organizing for at least twenty years, and have been making good-sized strides in the past ten years. They have lots of money, and the media likes them better.

But even though we are a small core group of people, working in our spare time, with no money, we drive them crazy. To listen to them, you would think we were really a threat. And so we continue. This is an extremely important issue, and a fight worth waging.

But more of us must get involved—and soon—before we actually *lose the right to dissent* on this issue. ■

Letter to the Seattle School District

Parents and Teachers for Responsible Schools (see article on previous page) composed a letter to the General Counsel of the Seattle School District. In that letter, excerpted below, the group details its attempts to counter the district's gay-affirming policies. They state:

1. Inaccurate information is given concerning the number of people who are or may be considered homosexual. The overwhelming weight of current and reliable demographic and survey evidence indicates that about 2% of the population will engage in homosexual acts for any significant period of their life span. (Materials from SMAC, SSC, GLSEN, and FLASH.)

Brain researcher Dr. Simon LeVay, himself a gay man, stated in his book *Queer Science*, published by MIT in 1996:

Recent surveys in the United States have...come up with prevalence figures well below 10%. Most studies agree that about 2% of the population have had at least one homosexual experience in the previous few years. In a large survey conducted by the National Opinion Research Center in 1992, 2.8% of men and 1.4% of women identified as "homosexual" or "bisexual." Another 3.2% of men and 4.1% of women identified as "heterosexual," but acknowledged some degree of same-sex attraction. The highest percentages reported in recent random-sample studies come from a market research firm, Yankelovich Partners, Inc., which stated that 5.7% of their respondents identified as "gay/homosexual/lesbian" (Page 62).

2. Inaccurate information is presented about the causation of homosexual desire. District materials and programs are biased in favor of the position that homosexual desire is a biologic or genetic aspect of a person's character that cannot and should not be changed. There is, however, a general consensus among members of the scientific community, including those who conducted many of the studies incorrectly reported as finding genetic or biologic causation, that there is no scientific evidence to support such a contention. The best overall summary of most respected researchers is that homosexuality is most likely due to a combination of *social, biological, and psychological factors*.

Says Dr. Simon LeVay in *Queer Science*:

At this point, the most widely held opinion [on causation of homosexuality] is that multiple factors play a role. In 1988, PFLAG member Tinkle Hake surveyed a number of well-known figures in the field about their views on homosexuality. She asked: "Many observers believe that a person's sexual orientation is determined by one of more of the following factors: genetic, hormonal, psychological, or social. Based on today's state-of-the-art-science, what is your opinion?"

The answers included the following: "all of the above in concert" (Alan Bell), "all of these variables" (Richard Green), "multiple factors" (Gilbert Herdt), "a combination of all the factors named" (Evelyn Hooker), "all of these factors" (Judd Marmor), "a combination of causes" (Richard Pillard), "possibly genetic and hormonal, but juvenile sexual rehearsal play is particularly important" (John Money), and "genetic and hormonal factors, and perhaps also some early childhood experiences" (James Weinrich). (Page 273.)

3. Important information concerning the health risks of homosexual conduct is not being presented in the schools' HIV/AIDS curricula. HIV/AIDS is only a part of the risk incurred by male homosexual activity. The life expectancy of homosexual men is roughly 30% less than for heterosexual men, and as little as 7% of that difference may be accounted for by AIDS.

Further, incomplete information is given concerning the risk of AIDS. According to Seattle County Public Health records, more than 80% of all new AIDS cases are among men who engage in homosexual sex. There is abundant and growing evidence that "safe sex" (either in practice or in theory) does not work. In his report published in *Clinical Psychiatric News*, October 1994, p.5., "Psychological Factors Generate HIV Resurgence in Young Gay Men," E.L. Goldman estimates that by age the age of thirty, 30% of gay men will be HIV-positive or death of AIDS. Many think this estimate is conservative.

Gay activist Gabriel Rotello in *Sexual Ecology—AIDS and the Destiny of Gay Men*, paints a chilling picture of homosexual culture plagued indefinitely by a continuing crisis of AIDS and other diseases that disproportionately affect homosexual men. Mr. Rotello bluntly proclaims that "safe sex" cannot solve the problem.

Additionally, SMAC, SSC, GLSEN and the District endorse the position that increased suicidal ideation and higher rate of successful suicide attempts by homosexual youth result from "homophobia." This assumption is forwarded as a compelling justification for affirming homosexuality in the schools. In response to concerns voiced at a recent Greater Seattle Business Association meeting, Supt. Stanford even promised to enlist the help of school principals in identifying "homosexual" eight-and nine-year-olds so they could be "affirmed."

Studies by homosexual researcher Gary Remafedi have shown, however, that early self-labeling as homosexual or bisexual is one of the three top risk factors for homosexual teen suicide attempts. The risk of suicide decreases by 80% for each year that a young person delays homosexual or bisexual self-labeling (*Pediatrics* 1991:87:869-857). Many other individuals within the gay community have written about the harm

caused to young people when they “come out” at a young age. Many youngsters who are thought to be homosexually-oriented are in fact experiencing transitory same-sex attractions for various emotional reasons. A 1992 study by Dr. Remafedi also published in *Pediatrics*, reported that 25.9% of 12-year-olds are uncertain if they are heterosexual or homosexual. This is significant because *only about 2%* of them will identify as homosexual in adulthood. This means that **23.9% may erroneously be identified as homosexual** if they are affirmed as gay at age 12.

If they are introduced to a homosexual sexual habit pattern while in this transitional stage, they may eventually find themselves confirmed in that behavior pattern—a behavior they might not have adopted on their own, but to which they have effectively been turned, often with devastating personal and social consequences.

4. Although there is no credible evidence that homosexual desire is genetically determined or immutable, and despite the existence of tens of thousands of people living today who have demonstrably affected or changed their sexual orientation through various therapeutic treatments, the District *does not provide any information to young people or their families concerning the potential for change*. Materials presented at the SMAC teacher training contained several references to articles claiming that homosexuality *cannot be changed*. In light of the serious health and other consequences risked by encouraging children to affirm same-sex desire, this omission is particularly unconscionable.

GLSEN also emphatically promotes the notion that *to attempt to change is psychologically harmful and wrong*. See for example, the GLSEN - Library School tools 032 Article located on the GLSEN Internet web site.

The National Association for Research and Therapy of Homosexuality recently surveyed over 850 individuals that had experienced some change in their sexual orientation as a result of counseling, and 200 therapists and counselors who have worked with such individuals. The survey found that before counseling or therapy, 68% of the

individuals perceived themselves as exclusively or almost exclusively homosexual, with another 22% stating they were more homosexual than heterosexual. After treatment, only 13% perceived themselves as exclusively or almost exclusively homosexual, and 33% described themselves as exclusively or almost exclusively heterosexual.

5. Another area that potentially implicates violations of the Controversial Issue policy is the presentation of information concerning same-sex marriage and parenting. The issue of whether alternative family structures should be accorded the same legal and social status as traditional families is also very controversial, and *should not be presented in the public schools without the presentation of conflicting opinions*.

There is voluminous empirical and clinical data demonstrating that married mother and father families are of significantly greater benefit to their members and to society than other family structures. *Love is demonstrably not enough to make a family*.

While non-traditional families should certainly not be excluded from the school community or treated unkindly, it is a disservice to the children you teach, and to the community of which they will become adult members, to glorify alternative families while failing to teach children of the proven advantages and benefits of “traditional” marriage and parenting.

Finally, I want to reiterate PTRS’ shared concern about tolerance for harrassment of school children and staff for any reason. The notion that affirmation of homosexuality is required to secure safety and respect for all children, however, is an obvious tactic designed to justify introducing just one side of a controversial political agenda, while explicitly excluding the others. In a pluralistic society, public school educators have a duty to present all reasonable options and perspectives on controversial issues.

As the District has emphatically embarked on the course of “affirmation,” please advise us how the District will come into compliance with its Controversial Issues Policy concerning the presentation of information about homosexuality. ■

Out of Egypt, continued from page 4

As a woman becomes secure in her gender, she automatically opens the door to femininity.

A good starting point in achieving gender security is to ask yourself pertinent questions. *What is my self-talk? Who do I say that I am?...* Consciously reject all thoughts that do not measure up with the truth...

Walking through the door to femininity can be awesome. It takes courage and determination to shed the old conception of oneself, and to embrace the emerging feminine self...

A startling revelation came when I discovered that heterosexual women did not float through life on gossamer wings. Although they did not share my particular gender confusion, many operated out of a greater sense of feminine brokenness than I did. This understanding enabled me to bring my homosexual struggles into perspective. I could discern what was inherently a lesbian problem, what was inherently a feminine problem, and what was intrinsically a “people” problem. ■

First AIDS Education, Then "Safe Schools," Then Gay Advocacy

The following newsletter of Parents and Teachers for Responsible Schools further details the remarkably broad based support enjoyed by gay activism in communities like Seattle, and the gradual process by which this support was gained. Not only is social/moral affirmation of homosexuality taught in these schools, but in many cases, inaccurate scientific data is used as well. "Those who disagree are perilously close to losing the right even to voice their concerns on this issue," Mrs. Durham warns. Her group can be contacted by writing Parents and Teachers for Responsible Schools, P.O. Box 28519, Seattle, WA 98118.

Dear Concerned Parent, Teacher, or Community Member:

Parents and Teachers for Responsible Schools (PTRS) is a group of community members concerned about the recent escalation in the campaign by homosexual activists to teach affirmation of homosexuality in the public schools.

We have learned that there are formidable challenges faced by parents of public-school children who question the authority of the School District to teach values that conflict with those of their families.

A group of us met with the superintendent of schools, and school board president in May. We were told that purchasing the homosexual affirming books was necessary to help make schools safe for all children, and to recognize and respect the diversity of the District's families. The District based its decision on inadequately substantiated and biased "studies" designed to justify the conclusion that homosexual teens were harassed and assaulted at school more than other students, and therefore were more likely to fail in school, suffer from depression, engage in high-risk sexual conduct, use alcohol and drugs, and commit suicide.

According to the District, the only way to effectively deal with this situation is to affirm homosexuality, thereby reducing harrassment and improving the homosexual teen's self-esteem, and thus eliminating the destructive behaviors.

Tolerance Yes, Affirmation No

PTRS agrees with the District that all children and their families should be safe from harrassment and physical harm on school grounds, and that differences between children and families should be tolerated. The District was unable to show how teaching affirmation of homosexuality would accomplish this, or how success would be measured, but they remain unyielding in their commitment to this plan. School officials flatly reject the proposal that zero-tolerance for all name-calling and bullying behavior be enforced without teaching affirmation and acceptance of homosexuality.

The district was also unable to provide any guidance as to how the wishes of parents who objected to their children's exposure to homosexual affirming material were to be honored, and none was offered. They have still failed to adequately address this issue.

City Funds Pay for Gay Lobbying

Since our meeting with the Superintendent in May, PTRS has reviewed thousands of District and City public records that establish that:

The City of Seattle and the Seattle School District have created departments, paid for with public money and staffed by public employees, to advocate for homosexual civil rights, which include the right to marry, adopt, conceive children through artificial insemination, and to receive legal status equivalent to that afforded race under law. These departments, the Seattle Commission on Sexual Minorities ("SCSM"), and the District's Sexual Minority Advocacy Council ("SMAC") are part of their respective Office of Civil Rights. Comparable departments exist at the county and state level to advocate for homosexual civil rights.

The District has already conducted teacher trainings—**instructing teachers at all levels how to incorporate acceptance and appreciation of homosexuality into all aspects of education, starting in kindergarten.** These trainings have incorporated the film "It's Elementary," which disparages conservative political and religious beliefs as "homophobic" and "heterosexist," and compares those who object to the normalization of homosexuality to Nazis who persecuted homosexuals during World War II.

Scientific Data is Distorted

The Family Living and Sexual Health (F.L.A.S.H.) Program, taught in Grades 5-12, *presents false and misleading information on homosexuality, and withholds very important information concerning health risks of homosexual conduct, as well as the potential for effective treatment for many who experience gender-identity problems and other emotional or psycho-social problems that may be the cause of same-sex desire.*

Through the teen-health centers located in most high schools (also recently approved for middle schools) and other student counseling services, "questioning" teens are referred to homosexual-affirming organizations that counsel them to accept their sexual orientation and "come out."

Some schools have devised "safe staff" lists identifying "homosexual-positive" staff as safe people with whom questioning teens can talk about sexual orientation. Some schools have had assemblies on the subject of "gay dating"

presented by Gay and Proud Theater; others have assigned students to debate the subject of same-sex marriage in history class.

Posters observing Gay and Lesbian History Month, or National Coming Out Day, or Pride Day, and other posters urging homosexuals to "Be Proud," may be seen in any school, depending on the preference of the principal or school staff.

Schools do not require notification of parents when homosexuality is discussed (outside of the context of the F.L.A.S.H. program), nor are schools required to offer an "opt out" when such instruction is given.

The District has associated itself with many homosexual-activist organizations, including GLSEN. Through the "Safe Schools Coalition," GLSEN members are presenting a program on homosexual issues to public-school teachers and students, including clips from the film, "It's Elementary."

Links to Pornographic Websites

PTRS discovered, and brought to the District's attention, direct links from the GLSEN Internet homepage to extremely pornographic sites—one of which is maintained by the company for which Chelle Mileur (of the PRIDE Foundation book grant) is an executive. The District did take steps to block access to the pornographic sites on school computers, but refused to criticize GLSEN for placing the links on its site in the first place.

Previously, PTRS had notified the District that many of the books on the PRIDE booklist were published by Alyson Publications, a major publisher of homosexual pornography. The District ignored our concern. Some of the Alyson publications, including *One Teenager in Ten*, had already been placed in the schools. These books encourage teens to, among other things, go to gay bars and have sex with adults to see if they like it. Alyson recently published *Becoming Visible*, a how-to on introducing the homosexual agenda into the public schools.

The District's position regarding parents' concerns about gay-affirming information in schools—outside the context of sexuality instruction—is that it is not required to get parental approval for curriculum, and parents have no right to opt out of instruction with which they disagree. Notwithstanding, the District has asked school principals and teachers to work with parents "to the fullest extent practicable" consistent with the school's "ability to educate all children."

In practice, this has meant that parents are on their own to negotiate with individual teachers and principals, and are without legal or procedural options when a teacher or principal refuses to cooperate with them.

AIDS Education was the First Step

Pro-homosexual advocates gained access to the schools in the late 1980's by capitalizing on fear about AIDS—and have increasingly been using the public schools as a forum to educate children to accept the normalization of homosexual conduct, same-sex marriage and parenting, and to promote civil-rights status based on homosexual conduct.

There is a growing sense among many well-intentioned, but sadly misinformed people, that homosexuality is the civil-rights cause of the era. The homosexual advocacy organizations are well-organized, well-financed, well-established in the public institutions, influential—and have the sympathy of the media and social liberals everywhere.

We are Fast Losing the Right to Dissent

Those who disagree with any objective of homosexual advocates—or simply think it wrong to use other people's children to engage in social or political indoctrination—are perilously close to losing the right to even voice their concerns on this issue. All opposition to homosexuality or homosexual political objectives is routinely viewed now as "homophobia," and many would designate all such speech "hate crime."

In a tragic story told by a Safe Schools Coalition member about her 15-year-old bisexual son's suicide, those who oppose homosexual civil rights—on any grounds, and particularly religious grounds—are directly responsible for the death of her son. Homosexual activists have repeatedly tried to implement rules that would strip any therapist who attempted to help a patient to change their sexual orientation, even on request, of his or her license.

We are working on several projects. First, we have been talking with a national organization that wants to stage an "educational event" in Seattle this year. We seek to build a speaker's bureau of individuals available to make presentations to interested community groups. And we are considering bringing suit against the District.

Several potential causes of action are presented by the situation in Seattle. *Just a few of the possible plaintiff groups:*

- 1) teachers whose names have not been placed on a "safe staff" list;
- 2) parents whose children have been exposed to gay-affirmative information against the parents' wishes, and
- 3) children who have tried to present conflicting ideas about homosexuality, but have been admonished or corrected for voicing differing opinions. ■

boys or girls should act, and sex by itself never hurt anyone. The only rules we need are simple: *do what feels right to you*, and take care not to hurt anyone else. That way, maybe we can all be comfortable with being the best thing of all—ourselves.”

From the chapter for teenage boys, “Doing It: Gay Men”:

“Learning how to give and receive love through sex is an important part of loving ourselves and becoming more comfortable with our sexuality. It also shows the straight world that we’re not going to live according to their narrow-minded myths about men, women, and sex...Most of all, just have a good time. Sex should be fun...”

From the chapter for teenage girls, “Doing It: Lesbians”:

“In lesbian loving, there are no rules, and we don’t want any...Being a lesbian means exploring.” (The author proceeds to suggest that her teenage reader masturbate, graphically describing how best to do so, and suggesting techniques for mutual masturbation with a girlfriend.)

“No one can tell you what is right for you, but you...Sex with someone you choose, at a time and place of your choosing, can be exciting and fun...you’re the only one that can know what you’re ready for, and when.”

Another book recommended for teenagers by the same P-FLAG pamphlet is *Brother to Brother: New Writings by Black Gay Men*.

From the chapter “Summer Chills”:

“I was lonely that day...I couldn’t find anyone that excited me the way I needed to be excited...I decided to go for a walk in the park...I put on the briefest outfit I could find...I only lived three blocks from the park, but because of my anticipation, the walk seemed to take forever. When I got there, I found the park filled with men in the same horny, hungry state of mind I was in. They were as undressed as I was...” (The story goes on to describe a sexual encounter in terms too pornographic to quote here. The author describes the “delicious pain” he feels during anal sex in the bushes with a stranger, as he is observed by a circle of chanting, swaying male voyeurs.)

From the recommended book for teenagers, *Bi Any Other Name: Bisexual People Speak Out* (L. Hutchins and L. Kaahumanu, Boston: Alyson Publications, 1991. (Some of the following excerpts are almost too pornographic to print, but their shock value is important for reader understanding):

(From the chapter, “The Queer in Me”): “I make a decision each time I have sex. I choose to honor the purr in my c-nt that says, ‘Gimme.’ I choose the thrill of attraction and the promise of pleasure, the c—nt, the c-ck, the fire in the eyes.

My partner now is a gay man and no, Mom—we’re not just friends...”

(From the chapter, “She Kissed Me!”) “One day while Sarah and I were studying, she asked me to go to the bathroom with her. As soon as the door closed, she kissed me. I was shocked, but got over that quickly...Later, we arranged to study at my house. We studied all of five minutes before Sarah began pulling the sheets back on my bed. We spent three wonderful hours exploring and making each other feel good.”

(From the chapter, “My Life as a Lesbian-Identified Bisexual Fag Hag”): “I got some measure of vicarious, voyeuristic thrills in watching the guys cruise...But come 2 a.m. they went off in two’s, or whatever, and went home. Somehow I was once again not being allowed to play. So I turned dyke...In the privacy of my own heart I knew that what I really wanted was to be wild and free, happily nonmonogamous, or even kinky (if I felt like it), like the faggots seemed to do with such ease...I was delighted to find that...a greater tolerance seems to exist [in the bisexual community] for things like open relationships, multi-person relationships, cross-dressing, group sex, kinkiness, and even for a mixed-up, lesbian-identified fag hag who was finding that she was not mixed up at all, but the people who were laying trips on her were...”

“Isn’t it about time to reconquer the realm of sex for ourselves? Isn’t it time for this woman to ask, ‘What do I want? What turns ME on?’...Isn’t it time to drop ALL labels of sick, or sinful, or politically incorrect?...Oh, honey, you bet yer ass!”

(From the chapter, written by a “once-straight” married man, “A Gift to Myself”): “After a few years of marriage, I happened across a classified ad for a rap group at the Bisexual Center in San Francisco. Bisexual? My vocabulary had never included that word...something told me to check it out...after I discovered others who felt loving and erotic feelings for *people* rather than a specific gender, I could never go back. I had my first sexual encounter with a man, ended my marriage, and finally accepted myself for the feelings I now knew were normal.”

(From the chapter, “Love, Friendship and Sex”): “My coming-out as a bisexual began at sixteen and is an ongoing process that will probably never stop. As long as we continue to examine who and what we are, we will always learn more about ourselves...In my early years I experimented and learned about sex with several people my own age, both male and female. It was exciting and naughty, and quite a lot of fun...”

“Eventually I came to the conclusion that since nearly all sex is recreational, as opposed to procreational, it really makes no difference whether you engage in sex with people of your own gender, or of the opposite one. The only

If the reader is uncertain of what evil is—or dismisses it as socially constructed—perhaps he will better understand, after reading the books P-FLAG recommends for teenagers.

requirement is that you both enjoy it...Other friends satisfy their bisexual needs in a group relationship. That may take the form of a communal threesome or foursome...Sex without love is equally normal...the term 'f-ck buddies' is sometimes used to describe people who have sex together just for the enjoyment of it..."

"...it is imperative to be true to oneself, which might mean experimenting and satisfying some curiosities."

(From the chapter, "Coming Out in Spirit and Flesh"): "I was in love with the man I married, but not with the role I felt pushed into playing...After the wedding, we were no longer seen as two individuals who loved each other, but as people who had functions to fill, chiefly to have children and to 'make a nice home'..."

"...I started drifting back to religion. I did not miss in the slightest the process of scraping my soul for sins to confess, nor the gory stories of tortured saints. However, I missed the atmosphere of magic, where light was transformed by stained glass into dark jewels, and water turned to wine...Before graduate school, I took a course on feminism and theology...what captured my imagination were essays about women who were forming groups and celebrating...rituals that used images of the goddess, and symbols from nature..."

"The night of the last class I took down a phone number and joined a coven of four women. Many times since then we have stood in a circle, chanting the names of goddesses, feeling our strength, our power to heal each other...I found myself repeating our ritual blessing when making love with a woman, 'Bless your lips...bless your breasts'...In Wicca, the goddess becomes a metaphor...She could even be He; there are covens who celebrate the horned God...I draw strength from my religion in which 'all acts of love and pleasure are Her rituals.'"

(From the chapter, "Overview"): "Today we hardly know what is natural, or how to heal the body-hating, homophobic, sex-negative culture we have inherited...Our curiosity and desire, the sacred spark, is thwarted at every turn. But the inner light, the inner truth stubbornly persists...We push ourselves through the accrued fear, the shame, the doubt to rediscover and reclaim the curiosity and passion, the sacred spark of life expressed through...gender and genitalia."

(From the chapter, "Beyond Bisexual"): "I started out monogamous. I ended up with two lovers. At present I have many lovers. There are four main ones. One is a woman I have deeply adored for three years. Another is a female-to-male transsexual/hermaphrodite—the perfect playmate for bi-sex! Number three is a gay man. Then there is my beautiful lover, the sky...I give her all my love and lust. I have an orgasm—

sometimes several. Maybe she has an orgasm too...I [have] had sex with thousands of people of all races, religions, colors, sexual persuasions, tried most every kink and fetish imaginable, worked in pornography and prostitution..."

"...do not judge yourself or others...get rid of any last vestiges of sexual guilt, and feelings that you don't deserve pleasure...abstinence can be dangerous to your health."

(From the chapter, "Growing Up With a Bisexual Dad"): "I was one of those kids always getting caught in sexual encounters. I got caught in the living room by my mother. I got caught in the garage by my father. But I didn't feel that my family was reprimanding me...I always felt comfortable and natural..."

"I began to explore more seriously when I went into the Marine Corps...I remember coming home on leave once, and deciding that I really needed to talk about this with my dad. I was having lots of fun, but somehow I felt that I was

doing something wrong or taboo. My dad just sat there with this blank stare, saying, 'What's the problem?'...Finally, he says, 'Look, all men play with other men, and so do I'... I remember this same conversation came up with my mother. Her response was...'If he got a little on the side, that was great.'"

(From the chapter "Sacred Rituals"): "Warm, wet mouths suddenly become ravenous as each of my

lovers' tongues eagerly explore my sexual abundance. As I am being caressed, as my sexuality is being celebrated, my consciousness melts into vague memories of holy sexual union...Tonight, my lovers and I are one in orgiastic celebration...Why was I taught to love god the father instead? As I partake in this spiritual, sexual rite, I know that I, a woman, am entitled to express my sexual self in any way that pleases me. Tonight, I got religion, and it was in bed!"

Throughout these books, the same themes are repeated—the imperative to judge for oneself what is good and what is bad; the idea that gay sex is sacred; that traditional religion is ridiculous, if not evil; sexual pleasure is a birthright of everyone, no matter how young; self-restraint is foolish; and marriage need not be monogamous.

Is this how the U.S. Department of Education would guide our teenagers?

Because this, in fact, is what they are learning.

—Linda Nicolosi

Postscript: In response to a pre-publication reading of this article, a spokesman at the U.S. Department of Education agreed to investigate NARTH's concerns.

P-FLAG —
supposedly a parenting
organization— is not what
appearances suggest.

More on P-FLAG:

In their newsletter, "P-FLAG Pole" (March/April 1997), there is an article entitled "P-FLAG Dallas President Comes Out." The president of the Dallas chapter, Pat Stone, describes her support for her adult lesbian daughter. After many years of attending P-FLAG meetings as a married parent, one day she was surprised to discover that she, herself, was unexpectedly "overwhelmed by romantic feelings" for an attractive woman she had just met.

She divorced her husband, explaining, "This is about who you are. There was no way for me to be, other than open and honest and positive: I had to come out. After my years with P-FLAG, how could I do this any differently?" She describes the warm support she received from the other parents of gays and the administration of P-FLAG.

In another article, a P-FLAG mother says, "My son considers his homosexuality a gift. It is a gift to me as well." Another says it is a "gift from God."

Interview, continued from page 3

tary of mine, now retired, who was the essence of empathy and womanliness.

DEB: The true feminine, I think, has been lost. Today's feminist is angry, aggressive, masculinized, and has lost her sacred place in the home.

JN: ...And in our culture.

DEB: Our culture especially honors the masculine—strength, dominance, achievement, striving. That creates in many women a neurotic split from their authentic natures. The woman represses the inner hurt and pain, and starts to identify with the masculine. It is out of the unhealed places of the wounded feminine psyche that she becomes aggressive and loud. Many women today are depressed, shut down, and overfunctioning.

JN: There seems to be a strong, militant feminist element in our culture.

DEB: And lesbianism quite naturally allies itself with this feminism. In the lesbian community you hear, "You don't need a man, you can do it on your own." Or, "What good are men? They only want one thing. Who needs them?" This, combined with a rebellious attitude toward the idea of receptivity, is part of lesbianism. Yet receptivity is the very core of the feminine. Rather than championing a war against men, we must bring back the life-giving spirit of the feminine—in ourselves, and in our culture.

**Femininity honors
heaven and earth,
embraces
body and spirit,
and is the essential
complementary element
for the masculine.**

The P-FLAG booklet, "Be Your Self: Questions and Answers for Gay, Lesbian and Bisexual Youth," also offers as fact the debunked myth that 10% of the population is gay, and repeatedly refers to gays as "minorities" in the same sense that blacks, women, and Jews are minorities. The booklet erroneously states that the American Psychological Association "says it would be unethical to try to change a person's sexual orientation."

The booklet also approvingly quote columnist Ann Landers:

"It never ceases to amaze me that in this day and age, so many people fail to understand that homosexuality is not a lifestyle that is chosen. That 'choice' was made at birth."

Paradoxically, the above inference is then contradicted by another P-FLAG publication: their carefully-researched and written booklet, "Why Ask Why?" which admits what science really *does* say about homosexuality: that "*no researcher has claimed that genes can determine sexual orientation.*" ■

JN: And you see much of this relating back to the mother?

DEB: I think it does. Mothers who cannot honor the feminine in their own natures become unavailable, dull, depressed, angry, compulsive—living by neurotic rituals which they use in order to fill the empty core of their being. Their daughters are wounded by this. And so the daughters carry on this wound to the feminine spirit for yet another generation.

JN: How do you help your clients connect with the feminine?

DEB: Through looking at how they're living their outer lives, and seeing how that severs them from being connected with the feminine within themselves. That is where the nourishment will come from. I'm trying to connect her with that reservoir within herself.

When she has been filled up by the feminine, she will find the nourishment she needs within her own depths. Only when she has been nourished by that deep connection, can a woman move on to connect with the masculine.

JN: So finding the feminine within herself is the work of therapy.

DEB: Yes. When a woman has rejected her own femininity, she pays a price. Because in seeking to unite with other women, she is trying to unite with herself, and this type of union will not, ultimately, heal the psyche. With another woman, she will have only the illusion of wholeness. The shadow, representing those real developmental needs that

continued on next page

were never met, will continue to haunt her.

JN: As you're speaking, I just can't help but think of my work with men—how they need to get in touch with the masculine within themselves, and how they did not get it from their fathers.

DEB: Yes, I think it tends to be a generational legacy. The mothers were often separated from their own feminine identity, so there was a psychic split. They've become much more masculinized, which is to become the doer, the achiever, very goal-oriented. Women have become fighters who say, "I can be like a man." And so they had to sacrifice something of themselves that was very rich and beautiful.

JN: Our culture is confused.

DEB: It is. So moving on from that point in therapy, we continue to go deeper. A lot of it is simply "being present" with that woman and making a connection. I work a lot with dreams and symbolic language. I work with whatever the pain source is, the shadow.

JN: Then you're proceeding with the work from a Jungian perspective.

DEB: In terms of symbolic language, yes. I want them to start connecting with the feminine experience...something that is artistic, alive and colorful. That is the essence of what the woman is striving to connect with in another woman. When she connects that way, lesbian feelings may surface because she thought it felt kind of sexual. That emotional, rich experience becomes sexualized. But it's not so much about sexuality. The connection with another woman takes her into her own inner life, into that part of herself where she starts to experience her own feminine nature. That is part of the hunger for God that we humans all feel, the natural drive to connect and feel that soul experience. That's why, often-times, lesbian relationships feel like soul connections.

JN: With my male clients, these guys also have a powerful need to connect. But they want to have that bonding in a more exciting, physical kind of way. The masculine approach is more like, "We're going to go climb a mountain and wrestle together."

DEB: Yes, it's very different. And some of the women I know—writers, movie makers—are finding this connection through the women's movement. There is something there that is offering them richness. If we're going to work with women, we have to understand why they're so pulled to this movement, instead of pooh-pooing it as being nothing more than a group of man-haters.

JN: Some of the men I work with were into the gay movement, and they found a sense of freedom and liberation there—even if it later proved to be shallow—because they

could drop the masculine pretense they maintained in order to feel acceptable in a straight world.

But to go back a little, I'm interested in hearing you describe this ideal of a kind of self-confident, individualistic, living-out of one's gender. It's attractive to men, too. Because when I ask my men, "What is your male ideal?" they say they're drawn to a man with a masculine, outgoing, self-confident, bold nature.

DEB: Yes. But in this society, a girl gets messages that encourage her to enact a certain role that severs part of her feminine identity. She grows up with all the billboards around her, objectifying her, make her nothing more than an object for male sexual gratification.

JN: It's a culturally created caricature. It's a cardboard figure, and she's trying to live it.

DEB: But femininity doesn't mean making yourself into a caricatured sex object. A woman can be earthy and wear baggy

clothes. That is part of the feminine, too—being connected with the earth, growing her herbs, doing the creative nurturing, toiling with the earth. And there's another misconception—that she must be passive and always place herself last. Therapy works to remove all of these misconceptions. But women must commit to stay in therapy long enough. For men it's an explicit sexual thing, but for women, they're not in pain, and they don't have the sexual agony. They can stop the sexual behavior more easily and still find a group of women to be friends with and get a certain nurturance.

The women who are more likely to continue in therapy have the spiritual-moral springboard from which they approach the issue, and they want to develop a more integrated, connected sense of the feminine self. They often say, "I don't want to be single for the rest of my life—I would like to become able to connect with a man."

JN: What about their being sexually responsive to a man... how does that come about?

DEB: (laughs) With a very accepting man! A lot of it is trust—a feeling of safety—so the woman can shed some of the old masculine persona and be able to let down and connect with the feminine heart of herself which she has never ventured into.

But as I mentioned before, all of these thoughts represent my own story. They don't fit every client, and I certainly won't impose my experiences on a client if they don't match her own reality. What I've described is a representation of what I've experienced. I had to uproot the old feminine, and replace it with the new feminine. My story doesn't end today, neatly wrapped up. For all of us, growth is a lifelong process of developing and individuating. ■

Closeness with another woman takes her into her own feminine nature...that's why same-sex love can feel like a "soul connection."

Change is Not Possible?

Letter to a Psychology Professor

We have received permission to reprint the following letter, written by a Catholic seminarian. It was addressed to the psychologist who is teaching one of his seminary classes:

Dear Dr. —:

During our last class session, we spent some time discussing homosexuality. This issue really hit very close to home for me, since I myself struggle with homosexuality.

I cannot recount any particular moment or age in my life when I was willing to say, "I am gay." Throughout my life I abhorred these feelings. Somehow I always knew there was something wrong with homosexuality, but I could never put my finger on what it was. I guess you can classify my psychological state as ego-dystonic, because I wrestled (and still do today) with homosexual thoughts and feelings, yet only acted out by way of sexual fantasy and masturbation, never with another man.

Over the last several years I have sought counseling in this area. I have found great solace in the works of Father John Harvey of Courage, a Catholic spiritual support group for men and women seeking chastity, and the works of Dr. Joseph Nicolosi, a founder of NARTH (see enclosed pamphlet describing that organization).

I now see myself as a man made primarily in the image and likeness of God and struggling with many issues, one of which happens to bring on the side-effect of same-sex attraction. I see homosexuality as incomplete psychosexual development; as a matter of stunted emotional growth in the area which would have prepared me to enter the world of men. The idea is simple: at some point in my childhood years I defensively detached from my father and the masculinity he offered due to hurt in the relationship or separation, and instead bonded more with my mother, my primary care-giver.

It is said that it takes a mother to raise a child into a boy, but that it takes a father to raise a boy into a man. And that didn't fully happen for me. I must work on that now, entering completely into manhood, with self-mentoring skills and by seeking out healthy, same-sex friendships, while continuing to build healthy opposite-sex friendships as well. For too long I have sought out this lost masculinity by homosexual attraction and desires, rather than through healthy friendships and relationships.

As I listened to you, I felt my blood boiling—for several reasons. First, I feel betrayed by society in general, which is lost in relativism and subjectivism, and which tells me that I should accept myself "the way God made me." God made me a human person, in His image and likeness. God

didn't make me gay. I can never accept that. Homosexuality is a result of the Fall. You do a great disservice to encourage someone to embrace a false identity.

Second, Church leaders have told me the same thing—that I should accept my "gayness," that I have "gay gifts" to offer the Church. This is more nonsense. A psychological disorder cannot offer anything but more problems.

Homosexuals are not "hard-wired" to come out homosexual. That is a lie propagated by the gay agenda, and people have begun to believe it because the gay agenda has blasted society with it. No one is born gay. The evidence for psychological root causes of homosexuality far outweighs the inconclusive biological research. Consider Anna Freud, Reuben Fine, Irving Bieber, Charles Socarides, Masters and Johnson, Gerard van den Aardweg, Fr. Jeffrey Keefe, Conrad Baars...the list goes on and on. I can add at least 20 more names to it easily, of people who have researched this field and point to psychological causes of homosexuality.

You say that anyone can use statistics to back up their point, yet I cannot allow you to dismiss my claim so easily in this manner. You must figure out if you, too, have been "duped" by the gay lobby, robbing you of your objective judgment in this matter.

What can you offer people like me? There are many of us out here, searching for someone who will hear our pain, the pain of wanting to be healed of an open wound. We find words of comfort in Church teaching, at Courage, NARTH, through private confessors and close friends, for no one else will listen. There are many of us out here, that want to say that the gay agenda is a lie—it insists we accept something disordered that leads to immoral acts; it insists we were born gay; that we cannot hope to change. Now even you, yourself, tell us that it is impossible to convert the homosexual man to heterosexuality.

You also bring us a false understanding of homosexuality and heterosexuality. One is abnormal, the other normal; one is incomplete gender identity, the other complete; one is a lie; the other true.

Am I happy? I can honestly say that for the first time of my life, I am truly happy. Homosexuality offers me empty promises, to seek the masculinity of others by sexual means. Celibacy is not enough for me; I must pursue "healing," whatever that means in light of God's will for me. And I have been healed greatly—maybe not to complete heterosexuality, but I'm getting there.

Take a look at your son. Wouldn't you want what is best for him? What if he were gay? If homosexuality is treatable to a point where the person reaches a sense of wholeness about his life—that he is a man in every sense of the word—wouldn't you want that for him? By saying "there are no easy answers," you offer us empty words. There *are* answers in life; the problem is that people just don't want to hear them. ■

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 homosexual, 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 against discouragement.

"Cure" of homosexuality is very much like cure of alcoholism, low self-esteem, or a lifetime of unhealthy living habits. Like all psychological "cure," it is a longterm growth process. The client has always felt himself to be homosexual, but now he experiences his homosexuality as "not me"; rather, as something that comes to him 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, 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 other life issues, such as growing in a sense of competence and self-esteem; developing healthy male relationships; taking control of the events in his life; 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 many other aspects of his growth into mature adulthood.

Heterosexual Relationships

As the client's same-sex feelings diminish, an attraction to the opposite sex begins to develop.

Ex-gay men who have married report a deep emotional and sexual satisfaction with their wives. There is a sense of mature serenity, of "rightness," that was missing in gay sex.

But the same level of raw sexual excitement he felt in the gay world will most likely not be present in his marriage. An ex-gay man's first approach to a woman is through friendship, with a gradual awakening of sexual attraction when he feels safe in the relationship. This lack of raw intensity has been used as an argument that homosexuality must have been more normal and natural *for this person*.

Cocaine, too, provides a very intense "high." Some other people say they only feel truly "alive" during acts of sado-masochism. Most of the fetishes have an intense sexual compulsion attached to them. For the homosexual, the excitement draws its intensity from the *unnatural lifelong alienation* from males, which left a deep emotional vacuum of unmet needs. Intensity is not a reliable indicator of a healthy need. In fact, such unnatural intensity only creates a need for greater and greater intensity; and so we see the widespread use, in the gay community, of recreational drugs, S & M, three-way sex, and sex with strangers in public places.

The upscale, gay magazine *Genre* (October 1996) published a survey of over 1,000 readers which found that 52% of the respondents have had sex in a public park; 26% have paid for sex; 46% have had sex in a public toilet; and 32% had tied each other up during acts of sexual sadomasochism. What else can these figures indicate, if not addictive and self-perpetuating obsession for excitement, driven by an emotional deficit?

So the man with the homosexual background who marries will typically forfeit the old addictive "high" of gay life for a more subtle, but more enduringly satisfying relationship with his wife. Even heterosexuals find that intense sexual experience is more characteristic of the young person—typically diminishing during longterm marriage and being replaced with a more subtle emotional experience.

What Will Be "Cured"?

Successful therapy alters a client's sexuality. In NARTH's recent survey of 860 individuals, 68% had perceived themselves as exclusively or almost exclusively homosexual before counseling; afterward, only 13% perceived themselves as such. Thirty percent had had homosexual sex "very often" before counseling, while only 1% continued to do so afterwards.

But there are changes in other aspects of a person's emotional life. Conflicts with male authority figures are much less frequent and troublesome. We see a gradual resolution of the client's grievance with his parents. Self-esteem has grown; he feels more identified with his own masculinity; he is more self-possessed in the company of heterosexual men; and he fits in more comfortably with conventional society.

Ex-gay men have resolved much of their anxiety about being emotionally drained or weakened by intimacy with a woman. If they once tended to compromise themselves by falling into the solicitous, passive, "good-little-boy" role, they will find themselves relating in a more authentic manner. They no longer project onto all women their own (frequently) manipulative and overcontrolling mothers. Instead of being "pals" with women, or falling into the role of being "mothered" by them, they will begin to relate to women from a gender-distinct perspective, as heterosexual men do.

Finally, the ex-gay man will know the truth: that the dream he has nurtured for so long was but an illusion. There *is* no

same-sex "special friend" who will make him into a whole human being. Frank Worthen, respected counselor and former homosexual who lived a gay lifestyle for many years, says it well:

"The ex-gay person must give up the fantasy that just around the corner he will find the same-sex life companion of his dreams. This fantasy leaves the back door open, and will defeat any real progress. Of all the things we must part with, this is the most difficult."

The Challenge of Committed Relationships

Most people think heterosexual functioning is the mark of successful therapy. In reality, many ex-gay men will be able to function sexually without extraordinary difficulty. The greater challenge, however, is the issue of trust—how to develop an intimate, vulnerable relationship with a woman, and not to perceive her as his mother. She should be a woman who will affirm his masculinity—who trusts and assumes that in spite of everything she knows he has gone through, he is man enough for her. When the ex-gay man perceives this unquestioning confidence in his masculinity, he can usually relax and allow his male body to respond naturally to her.

There is a general developmental immaturity which makes it difficult for many men to move on to the commitment of marriage. Ex-gay men are very challenged by the demand to extend themselves, go beyond their self-protective isolationism, and allow people into their inner lives. There is great fear of being a head of household, with wife and children financially dependent on them. A lot of men are "stuck" at the adolescent phase where they are only able to take care of themselves, with their own little apartment and their own checkbook. Many cannot even imagine making the longterm career commitment that would be necessary to sustain a household. When you look closely at the man living a gay lifestyle, or the man transitioning out of homosexuality, there is usually that attitude of "one foot in, one foot out, ready to run away." When the man's life has been *truly* changed, he will be able to make that commitment.

The Boy Grows Into His Masculine Potential

If the client is a gender-disturbed child, treatment aims toward making him fully comfortable with his maleness. Studies show that if such a boy receives no treatment, he is likely to become homosexual, bisexual or transgendered in adulthood. If he is a sensitive, artistic, and anxious boy, we don't expect him to deny his gentle nature—but we help him mature to the fullest possible extent into *his own* masculine potential. Mothers of such children need to back off, and fathers need to be more involved. It is essential for the gender-disturbed boy to develop friendships of equality and mutuality so he won't be idealizing those exciting, mysterious, and unattainable guys playing baseball outside his kitchen window.

Childhood treatment is ethical and useful. Studies show us that gender-disturbed boys are more likely to suffer from emotional and family problems, and later, in adolescence, to attempt suicide (see article, "Which Gay Teens Attempt Suicide?" in this issue).

Because all psychological change is to some extent a life-time process, I advise my clients as follows:

- 1) They must take responsibility to put into practice the insights and techniques they have learned during treatment—particularly, by maintaining intimate, satisfying male friendships;
- 2) They must be mindful of what triggers a return to the old ways of coping. Most men find they are particularly vulnerable when they feel weak, inadequate, or out-of-control in life circumstances, especially when they have felt hurt or let down by a significant person (usually another man).
- 3) They must maintain an ongoing, honest relationship about their feelings with themselves, their wives, their pastors, and at least one close, straight male friend.

So is the homosexual ever really "cured"? Or is he just a repressed, counterfeit "straight" man?

We find some insight into the nature of psychological change in Dr. Salman Akhtar's book, *Broken Structures*, where he describes "The Parable of Two Flower Vases":

"Let us suppose that there are two flower vases made of fine china. Both are intricately carved and of comparable value, elegance and beauty. Then a wind blows and one of them falls from its stand, and is broken into pieces.

"An expert from a distant land is called. Painstakingly, step-by-step, the expert glues the pieces back together. Soon the broken vase is intact again, and can hold water without leaking, and is unblemished to all who see it.

"Yet this vase is now different from the other one. The lines along which it had broken, a subtle reminder of yesterday, will always remain discernible to an experienced eye. However it will have a certain wisdom, since it knows something that the vase that has never been broken does not; it knows what it is to break, and what it is to come together."

And thus we see that the man who grows out of homosexuality is not an imitation heterosexual, but a man who has struggled for what is rightfully his—his masculine identity, along with the self-possession, self-discipline, and capacity for lifelong, monogamous intimacy which are the hallmarks of mature adulthood. For this man, there is also a deep and abiding *sense of rightness*. ■

The Mailbag

NARTH recently opened a website (www.narth.com). The following is a sampling of the inquiries and comments that we have received:

Hi, I am a young guy that struggles with homosexual urges, and I was referred to your website by another guy from Focus on the Family. I only hope and pray that you people are always able to help guys like myself. I wish I could do more to support groups like you!

I'm on the East Coast, age 48, father of two sons. I spent 4 great sessions with a very good reparative therapist on the West Coast a few years ago; then I had to come back home. But in those years since then, I have not been able to find any more help. The results of my loneliness have been a turmoil which won't go away. I'm still married but need help. My resources are limited and I'm in an HMO. I really don't know what to do, or if anything will help. I'd just like to go through my days without obsessing over every man who has that masculine character I've always felt I lacked. I just want to feel "manly." *Thanks for your web page.*

Hello, I am a 28-year-old medical student. Recently I have been having a lot of questions about my sexuality. I really feel distraught most of the time without really knowing what foundation to base my feelings on. I picked up a copy of— [a book on sexual-reorientation therapy] and I found many of the author's insights inspiring and revelatory. My problem is that I feel I have a lot of internal conflict that I can't deal with alone. Would you please send me information on someone to talk to in my area who shares these ideas? I live in Providence, R.I.

I have been in a marriage of 33 years. Eight years ago, my husband informed me that he thought he was gay. He has not left my daughters and me, and he has not been actively pursuing a gay lifestyle. However, we both seem angry, distant, confused, etc. I am seeking support in learning how to deal with my own disappointments in this situation. My husband is also seeking information and perhaps counseling. Please send a list of counselors who are members of your organization who reside in the New York City area.

I would like to thank you for having such an organization. I have long been frustrated with the strictly religious approach to this subject. I believe homosexuality is more than just religiously harmful: I see its effects on both the psyche and the body. I believe these aspects also need attention, and your organization seems to share that concern.

I read about NARTH in *Christian American* magazine. I figured it was worth a try to find you on the Web, and narth.com was a reasonable guess. I'm finding your information very interesting. It's dangerously explicit common sense, to be sure! I'm glad SOMEONE is out there, telling the truth. Don't think that no one is listening!

I have just completed a masters of science degree in psychiatric-type mental health nursing and have been a psychiatric nurse since 1983. I just want to say how much I appreciate your work and believe in what you say. Thank you for your stand with the APA! This is one of the greatest lies ever inflicted upon men and women, and as you say, homosexuality destroys the ability for genuine love between members of the same sex. Thank you again for your work.

Warmest regards to all of the officers at NARTH. I applaud your persevering efforts in educating and dispelling the myth of homosexuality. I was extremely glad to have found this very informative site. I felt greatly relieved after reading the relevant articles, and that has certainly soothed the pain which I have endured for so long—the pain of living with homosexual tendencies. I was desperately searching for someone to talk to, but the right person does not seem to come by. I am 35 years old, and married with three children. My ultimate hope is to attain purely heterosexual feelings and build up a satisfying relationship with my wife. I would neither like to live in hypocrisy, nor betray my family. I sincerely wish to be introduced to one of your therapists, and would like to know if there is any support group.

My wife recently found a graphic account of a lesbian experience written by my 14-year-old daughter. When my wife inquired about it, my daughter said that she had indeed experienced this herself. She told my wife that she later realized that it was wrong, and that it was all behind her. My daughter told my wife that she would appreciate it if we forgot about the incident, as she has. She also emphatically stated that she is not gay and that the whole incident was just a mistake that she has gotten past.

But since then, we have learned things that lead us to believe that she may still be actively seeking homosexual relationships. The reason I am writing is that I would appreciate a referral to a therapist associated with your organization. If she is receptive, I would like to be ready with the name of such a person. We are Orthodox Jews, and I would appreciate it if the therapist were someone

who would not ignore the religious aspects of our actions and choices. They need not be the same religion as we are, just *have* a religion! This problem is a very new one to me, and I greatly appreciate the information on your website. If you could help me with a referral, I would be very grateful.

Hello, my name is Tom, and I am writing from Canada. I am looking for some information on counseling services of therapists in my area. I have always found myself to be a "regular" heterosexual male. However, recently, I have gotten this nagging feeling that I am homosexual. I don't think that I am, and I don't wish to be. Therefore, this feeling has made me feel really strange with myself, and caused me a lot of stress. I would like to talk to someone who is familiar with cases like mine (I am assuming that I am not unique) to determine what is going on. I saw your web page, and like what you had to say.

I am a 26-year-old male who is suffering from homosexuality. I sought help from two different psychologists who both told me that I have to accept my homosexuality. I refused that, but I need help. I am very upset with my problem and I want to overcome it, so please help me.

Since I discovered your site early in 1997 I have been a transformed person. Before, I had done a lot of work on my own to figure out my own psychology. It was a painful and lonely journey, and it seemed to have led to no firm conclusion. But as I read through much of your material, I wept with joy. For the first time ever in my life, I was reading my story...I realized my searching wasn't so solitary after all...I had looked at religious sites describing ex-homosexuals, but it made a great deal of difference to me to find a site that was largely secular.

At last an organization that is fighting the battle to show change is possible! I am looking for information on root causes of homosexuality, especially regarding child molestation as a contributing factor. I have several lesbian friends who were molested as children. I would also like to know if you can suggest any therapists in Texas. I know many gay men who are getting tired of the struggle and have been unable to find a good therapist.

I am a male homosexual teenager. I want desperately change to heterosexuality. What do I have to do to change? My family knows about me, but they have no idea what to do. I can't afford to go to a psychologist. I just want happiness back. What steps must I do to reach my goal of heterosexuality? How do you ignore a part of you that won't go away and that seems to be a permanent part? Am I deformed? I hate being me because of it. Can you give me any advice?

Please send any current information on evidence that homosexuals can change. I know they can, because I have

counseled them in the process. I am debating a person on radio in Virginia this week. Any recent data would be appreciated. Also, please send an application for NARTH membership.

My town in Massachusetts has taken the disastrous step of sponsoring a "gay-straight alliance" at the high school. My wife and I have written two letters to the local paper in opposition to this. Most recently, we defended a teacher who declines to read aloud the promotions which she is supposed to announce for this club. I also received a phone call yesterday from a student. She spouted all the propaganda she's received for years—i.e., "they're born that way." So I'm glad to have found your website, and will refer any callers to it. Do you have any members in Massachusetts who would be willing to speak at our high school? Also, do you have any informational brochures which would be useful for teenagers? Thanks for your web page.

It is wonderful to see the new NARTH page - so full of content and rich in information. I first learned about it from one of my patients. What a wonderful surprise.

This site will make a substantial contribution to NARTH's cause. Many people should benefit from it. As struggling individuals search the internet for information about homosexuality, no longer they will find only pages that promote and affirm homosexuality. Thank you all for your effort. Wonderful.

Great Homepage! I like especially the interview with Dr. Coulson.

I found your web page greatly interesting and informative. "Putting the Pieces Together" by Jeffrey Satinover is one of the most rational and unbiased articles around. I will pass the word on that there is truth to be found about homosexuality from NARTH. There's much work to do and NARTH has made an awesome impact.

Awesome! Searching for real answers to a lifetime of homosexual emotions which the Holy Spirit is helping me overcome. Thank you for your webpage. I feel hope reviving. God bless.

Just saying "Thanks for being there." In a world awash with one perspective on the gay issue, it is refreshing to see that there is a wealth of good and factual information available that deals with the issue from a perspective I am more close to. I am just a family man trying to face the issue squarely and fairly, and having your website available goes a long way toward helping me do so. ■

Book Excerpt

The Pluralist Game:

Pluralism, Liberalism and the Moral Conscience

by Francis Canavan (Rowman and Littlefield, 1995).

“On the Fundamental Issues of Social Life, One Side Always Wins”

This tightly-written, scholarly but readable book provides a context for understanding the cultural struggle that is currently being played out in our schools and courts. Must a democratic society teach children that homosexuality is equal to heterosexuality? That lesbian mothers are as good for society as a traditional family? Is social affirmation of homosexuality a legitimate civil-rights demand?

Francis Canavan, a Jesuit scholar and professor of political science, attempts to sort out the ways society can function under the conflicting demands of pluralism. He makes several key points. When individual liberty is the only acknowledged ordering principle, community disintegrates, and government becomes nothing more than the arbiter of an unending series of competing claims for “rights.” He believes *it is essential that we acknowledge a public philosophy*. Subjectivism and liberalism are not “neutral” philosophies. Philosophically, one side always wins.

He notes that the moral and intellectual consensus on which our society has lived is rapidly disintegrating. “There is a widely diffused feeling that we are ceasing to agree even in basic aspects on what man should be, and how he should live...For multitudes today, truth is only what the individual thinks is true, good is only what the individual personally prefers, and justice is his right to act on his preferences.” Liberalism, the guiding principle of our society, has “blossomed into mere permissiveness.”

“The reasoning is everywhere the same,” he writes; we believe that “Freedom of expression is a seamless robe, and we cannot pull one thread out of its fabric lest the whole garment should unravel. Expression is expression...and all forms of it stand or fall together.” If pornography is restricted, then, it is said, the right to free exercise of religion will be equally threatened. But “there is no reason to believe that the successful operation of democratic institutions depends on the availability of peep shows.”

At the core of this insistence on unlimited liberty is the belief that there is no *objective good*, and that all lifestyles and con-

victions are merely subjective tastes and preferences, all of which are equally entitled to protection under the law. In fact subjectivism is, he says, the essence of liberalism.

“Millions of Americans are no longer sure that either faith or reason can tell them what virtue is, or how to acquire it. They are left with the uneasy feeling (or the passionate belief) that all individual opinions and appetites are morally equal, and should be equal in the eyes of the law...it is assumed that there are no objective moral truths that individuals can recognize and agree upon.”

Freedom: The Only Universal Good?

Subjectivism and individualism have had a corrosive effect on our culture. “To put it briefly, liberalism has made freedom the *essential and defining characteristic* of man...Truth itself—whether religious philosophical, or moral—must be subordinated to the requirements of the individual’s liberty...”

The one conviction on which free men can agree is that orthodoxy is dangerous.”

**Truth itself—whether
religious, philosophical,
or moral—has been
subordinated to the
requirements of the
individual’s liberty**

“Yet liberty and equality cannot be the highest values of a political system because they relativize and ultimately destroy all other values. When we make them our supreme norms, we have no set of objectively valid human ends that can provide answers to the questions,

‘Liberty for what?’ And ‘Equality in what?’ We therefore cannot have the communal beliefs without which, in the long run, there is no community. In short, American society now lacks what Walter Lippman once called the public philosophy. We shall lack it increasingly as the moral and religious capital of our culture, on which liberalism has always traded even as it eroded it, is drained away. We are left with an unending battle between conflicting claims to liberty and equality, and no publicly acknowledged principle which to resolve the conflict.”

The problem is, he says, that subjectivism and individualism are not “neutral” philosophies. “The pluralist game will continue to be played, of course, because there is no other game in town. But there is no need for it to keep on being a confidence game in which one side proclaims its cause as

Should the State be the Educator?

neutrality, and the other side is gullible enough to believe it. Societies *do* face moral issues to which they must give moral answers...We shall play the pluralist game more honestly, perhaps even with better results, if we admit openly what the game is, and what stakes we are playing for."

"Viewed from a certain angle, the ultimate liberal ideal appears to be normlessness. Normlessness, however, turns out to be itself a norm. It is a steady choice of individual freedom over any other human or social good that conflicts with it, and unrelenting subordination of all allegedly *objective* goods to the *subjective* good of individual preference. Such a policy does not merely set individuals free to shape their own lives. It necessarily sets norms for a whole society, creates an environment in which everyone has to live, and exerts a powerful influence on social institutions."

Even in a pluralist society, he says, there is a public morality. "Divided though it be, the community is a community by virtue of what its members have in common. Among the things they hold in common are certain moral values and principles." The values of the majority of the community determine the norms that society will favor or even impose—either by pressure of opinion or by force of law.

For example, civil-rights laws which single out homosexuals are not simply "neutral" applications of liberty and equality. "To the extent that they are a demand for public acceptance of homosexuality as a separate but equal way of life, [they] pose an issue to which *there is no neutral answer*. This is a demand that the public commit itself to a particular view of the nature and function of sex in human life. Faced with this demand, the public and its government cannot commit itself to a specious neutrality by leaving the matter to individual consciences...government is under constant pressure—to which it frequently yields—to use its power to promote or enforce new norms in the guise of leaving normative decisions to individuals. The net result is not *no norms*, but *different norms* and reshaping of the institutions of society."

Marriage is a Contract with Social Consequences

If we believe that government has no business deciding what forms of marriage it should or should not recognize, "we are saying that the only value of marriage is a purely private one. The best sexual relationship is the one that best pleases the individuals who participate in it. Their pleasure is the norm, because no other norm is admissible. But accepting that proposition is not normlessness. It is the clear choice of one basic social norm over all others, a choice that has far-reaching consequences for society."

Pluralism has become a confidence game in which one side proclaims its cause as neutrality, and the other side is gullible enough to believe it

Similarly, when the state teaches only secular subjects from a secular point of view, it observes a neutrality that is tantamount to agnosticism, favoring "those of its citizens who regard religion as irrelevant to life, and believe that all human problems have purely human and secular answers. . . . The conclusion ought to be that the state is not well qualified for the task of teaching." Precisely as a recognition of pluralism, he says, the state should give support to different kinds of schools. This would solve many of the bitter battles today over sex education, affirmation of homosexuality, and trends toward divisive forms of multiculturalism. In a pluralist society a secular *state* is acceptable, Fr. Canavan says; but that does not mean we in turn must be a secular *society*.

Fr. Canavan believes that the just and ordered society is that which is governed by natural law. "For the present purpose it will be enough to call natural law any binding moral principles not made by men, but derived by reason from the nature of things or, more usually, from the nature of man...we are obliged to choose to act in accordance with it, because to violate it would be violating our own nature...Natural law must be translated into positive law through the medium of some group's conscience, to which conscience those of us who believe in natural law must appeal."

"Secular humanism," he notes, "is *not* the least common denominator of all American beliefs about human welfare. It is but one sectarian view among many, and any American is free to believe that he derives from his religion a richer, fuller and more truly human image of man. He is also free to use it as a basis for the views he

advocates on public policy."

The popular humanitarian-utilitarian ethic of today regards suffering as an absolute evil, and individual self-fulfillment as the highest good. Thus it is no accident, he says, "that the idealism of youth today is seldom directed toward self-conquest and self-discipline—these are easily dismissed as 'masochism'—but almost always toward social justice and the reform of institutions." Similarly, the self-denying struggle to overcome homosexuality tends to be disparaged, particularly by the intellectual elite.

Because our democratic society assumes it can uphold no rational standard for a hierarchy of values, "we stipulate that all goals are equal...Justice thus loses all substantive content and becomes pure form...The pluralistic society, therefore, stands upon no *moral* principles, but is unified only by the *procedural* principle of an official neutrality."

"But if we carry liberal individualism to its logical term in

order to preserve unity through pluralism, we shall learn that this solution, too, carries a price. The constant disparagement of particular communities and their beliefs, and the steady subordination of their cherished ideals to the unity and stability of the political society, end by robbing the political society itself of vitality, and drying up the springs of political loyalty and love of country. Those who do not love their families, their kinsmen, their own kind, their neighborhoods or their churches are not likely to love a merely *political* unit, or the democratic system."

"The attack on social moral standards is most obvious at the present time in the demand for 'gay rights' laws. The demand succeeds as often as it does because in this country's current egalitarian mood, it is hard to mobilize public sentiment against laws that only seem to *forbid discrimination*. But the thrust of these anti-discrimination laws is toward a deep change in social morality... Some like chocolate, some like vanilla. Some like Mozart, others prefer heavy metal. Some like girls, some like boys. ..It is all the same because man is a bundle of desires, and each man strives to satisfy the desires that he has. Society's only task

is [supposedly] to preside over the striving with impartial neutrality so that we can all live together in peace."

"Liberalism as a theory of ethics and politics lasted as long as it did because it is assumed that rational and decent people would see the difference between moral right and wrong, and would for the most part respect it. Liberalism however was able to do this because it incorporated into its idea of personal freedom moral norms that it did not create, but inherited from the classical and Christian past."

In summary, Fr. Canavan says, "A pluralist society must perforce strive to be neutral about many things that concern its divided citizens, but it cannot be neutral about all of them. If it tries or pretends to be neutral about certain issues, the pluralist game becomes a shell game by which people are tricked into consenting to changes in basic social standards and institutions, *on the pretense that nothing more is asked of them than respect for the rights of individuals*. Much more, however, is involved: on the fundamental issues of social life, *one side always wins*." ■

Which Gay Teens Attempt Suicide?

A study detailed in *Pediatrics* (1) pinpoints some key elements associated with the risk of attempted suicide in homosexual teenagers. "Compared with non-attempters, attempters had more feminine gender roles, and adopted a bisexual or homosexual identity at younger ages. Attempters were more likely than peers to report sexual abuse, drug abuse, and arrests for misconduct."

The researchers say that suicide attempts appear to be related to "'coming out' at a younger age, gender atypicality, low self-esteem, substance abuse, running away, involvement in prostitution, and other psychosocial morbidities." In 44% of cases, subjects attributed the suicide attempts to "'family problems,' including conflict with family members and parents' marital discord, divorce, or alcoholism."

Similarly, Saghir and Robins reported in 1973 (2) that youthful suicide attempts in a group of homosexual adults were "often in association with a history of childhood gender-atypical behavior or emotional disturbance."

Two key points can be inferred from these studies. First, that treatment for Gender-Identity Disorder of Childhood (GID), which is now under strong attack from within the psychological profession, may indeed be therapeutic for prevention of suicide attempts in adolescence. Gay and feminist advocacy groups have been lobbying for deletion of the diagnostic category (3). In contrast, clinicians such as Kenneth Zucker and Susan Bradley believe that it is ethical and therapeutic to help children become more comfortable with their biological

maleness or femaleness and to alleviate the emotional and family problems often associated with childhood gender nonconformity. (4)

Also, since early gay-self-labeling is associated with attempted suicide, it seems *unwise* to encourage young people to label themselves as gay during the volatile teenage years. The teen years serve as a transitional phase when affectional, emotional and identification needs can be eroticized. "No service is done to our children by offering them lifestyle options before they are properly able to make informed choices about them," says Dr. George Rekers, professor of neuropsychiatry and a specialist in psychosexual disorders at the University of South Carolina School of Medicine. (5) ■

(1) "Risk Factors for Attempted Suicide in Gay and Bisexual Youth," by Gary Remafedi, James Farrow and Robert Deisher, vol. 87, no. 6, June 1991, pp. 869-875.

(2) *Male and Female Homosexuality: A Comprehensive Investigation*; Baltimore, MD: Williams and Wilkins, 1973.

(3) The American Psychological Association *Monitor*, June 1997.

(4) *Gender Identity Disorder and Psychosexual Problems in Children and Adolescents*, 1995, New York: Guilford Press.

(5) Rekers, G., ed. (1995) *Handbook of Child and Adolescent Sexual Problems*. N.Y.: Lexington Books.

Psychology's Sexual Dis-orientation

by G.E. Zuriff, Ph.D.

The following article—reproduced here in abbreviated form, with subtitles added—first appeared in the April 1997 issue of The World and I, pp. 299-311. (Reprinted by permission of The World and I, a publication of The Washington Times Corporation, copyright 1997.)

Author G.E. Zuriff is professor of psychology at Wheaton College and a clinical psychologist in the Medical Department of the Massachusetts Institute of Technology. He argues that the question, "Is homosexuality a psychopathology?" is a social-cultural rather than a scientific one. Scientific studies may inform the discussion, but we must recognize that the final decision will be a social value judgment.

Dr. Zuriff also carefully considers, and rebuts, the most common arguments against conversion therapy.

Within the American mental health profession, there is now a strong movement to prevent conversion therapy, a type of psychotherapy in which a homosexual patient's sexual orientation is changed to heterosexual. Resolutions to this effect have already been adopted by the Washington State Psychological Association and a committee of the National Association of Social Workers, and are now under consideration by the American Psychological Association and the American Psychiatric Association.

Many liberals who vigorously oppose any outside interference in the private decision between a woman and her doctor about aborting a fetus have no qualms about interfering in the decision between the same woman and her doctor concerning a change in her sexual orientation. This is only one of many ironies in the extraordinary history of the American mental health profession's struggle with homosexuality, a history that can itself be characterized as a "conversion." This history opens a window on our societal ambivalence toward not only homosexuality, but also the broader questions of mental illness and individual rights...

How Do We Evaluate Pathology?

The scientific evidence [whether homosexuality is pathological] is not decisive because it is irrelevant. Whether something is a psychopathology can be judged only relative to standards of mental health, and these, in turn, depend on our societal conceptions of healthy functioning, the good life, and the purposes of human existence. What

is considered healthy functioning in one society may be viewed as an illness in another. Clearly, there is an evaluative dimension in deciding what is healthy and what is a disorder, and this dimension involves our deepest values as a society. Science can provide information, but it cannot decide questions of values. *It can tell us what we are, not how we ought to be.* Psychopathology is thus necessarily a matter of social construction—subject to historical, cultural, as well as political forces.

Thus, the decision whether homosexuality is a psychopathology is really a social-cultural question rather than a scientific one, and settling the matter by debate and a vote [as was done in 1973 by the American Psychiatric Association] is not as bizarre as it initially appears. Scientific studies may inform the discussion, but the final decision must be a societal value judgment. Accordingly, the continuing controversy in the mental health profession over this issue merely reflects the cultural divergences in our wider society over homosexuality, and politics within the profession have been critical in every stage of this debate.

Thus, in the early nineties, despite the elimination of homosexuality itself as a disorder, clients seeking conversion therapy could still be diagnosed and obtain treatment. But forces were at work to block even this one remaining avenue. For example, the Gay and Lesbian Caucus of the American Psychiatric Association advocated declaring the practice of conversion therapy to be professionally unethical. In response, the National Association for Research and Therapy of Homosexuality was founded in 1992 to protect the right to conversion therapy. NARTH planned to hold a 1995 conference, and, as is standard professional practice, it attempted to publish an announcement of its conference in the monthly newspaper of the American Psychological Association, the *Monitor*. The association refused to publish the announcement, however, because of NARTH's position that homosexuality is a treatable mental disorder.

The Debate is Ideological

This incident clearly indicates the ideological nature of the debate over the psychiatric status of homosexuality. Our understanding of sexuality, both homosexual and heterosexual, is very limited. We do not know, for example, how either comes about, or what explains the great variety in the ways they are manifested. One can theorize about these

matters, and propose hypotheses. But it hardly makes sense, given our ignorance, for a professional group to take a firm stand as if the issue were purely scientific. Only if the decision is seen as a value judgment is it reasonable for the APA to say, as a matter of policy, that homosexuality is not a mental disorder and to try to silence another professional group holding a different opinion.

When the anticonversion proposal was introduced to the Council of Representatives of the American Psychological Association, it immediately ran into a host of problems. Foremost was the advice of the association's own legal counsel. He noted that a resolution against conversion therapy could be challenged on the basis of antitrust laws as an unreasonable restraint on free trade. Conversion therapists could not practice their profession, and willing clients could not purchase the service. To defend against such a challenge, the association would have to show that the resolution is supported by sound scientific and professional data, and he [the legal counsel] raised the question as to whether this is the case. As he stated, "If the courts view APA's motivation as more political or ideological, rather than patient-protective, the reasons for enacting the resolution would be less defensible."

Furthermore, the resolution was opposed by a number of bodies within the American Psychological Association. For example, the Committee on Ethnic Minority Affairs supported clients' right to choose to understand and alter aspects of their sexuality they find problematic. In its evaluation of the proposal, the Committee on Women in Psychology questioned the resolution's assertion that conversion therapy is ineffective or harmful, and called for more research. Similarly the council representative from the Division for Humanistic Psychology opposed the resolution on the ground that it prejudged a number of issues before the data warranted any strong conclusions, and therefore interfered with freedom of expression.

Because of the problems encountered by the resolution, a subcommittee has been appointed to review the resolution, revise it, and propose a substitute. Although the substitute will undoubtedly soften some of the language of the original, it will certainly continue the trend toward normalization of homosexuality and opposition to any theory or treatment that disagree with that stand. Given the political climate prevailing in the association, it is likely that some form of the resolution will eventually be adopted. [Ed. Note: As NARTH reported last December, such a "softened" resolution was in fact passed in August 1997.]

Change is Possible

As a result, homosexuality, once regarded as a disorder requiring psychotherapy, will be seen as a normal condition for which treatment is discouraged even if requested.

Thus, in assessing the effectiveness of conversion therapy, it is important to specify the patient population, the method, and the definition and measurement of effectiveness. Much of the controversy over the effectiveness of conversion therapy surrounds disagreements over these issues. Conversion therapy may be less effective for those *exclusively* homosexual under a very strict criterion of effectiveness. However, for many homosexual clients in the middle of the continuum and for less extreme kinds of change, success is clearly possible. To be sure, the efficacies of the various types of conversion therapy have not yet been subjected to rigorous scientific tests. Nevertheless, contrary to the beliefs of some critics, the lack of conclusive evidence for effectiveness is not the same as conclusive evidence for a lack of effectiveness.

Clients should, of course, be informed of their likelihood of success, but even under circumstances for which the rate of success is low, informed clients may still reasonably choose to try. Similarly, a low success rate is not a good argument against research to discover more effective methods. As in all science, we cannot know in advance what future research may reveal.

Does Therapy Violate a Homosexual's Core Identity?

A second anti-choice argument is that homosexuality is part of a person's core identity. Trying to change this can only do violence to the person's self-identity and damage him psychologically. Again this is a controversial and complicated matter. Certainly clients should not be coerced, and they should be informed of possible risks. Obviously, conversion therapy methods that proved to be harmful should be banned. Nevertheless, there is currently no good evidence that all methods of conversion therapy harm clients. Indeed, one reason that the APA resolution could be legally challenged is that there is insufficient evidence to prove that conversion therapy is harmful.

Even on the theoretical level, there is reason to believe that conversion therapy can decrease rather than increase identity conflict. Consider two hypothetical cases:

- A 47-year-old female, married with two children, shows no psychopathology. She lives a fulfilling life within her career and family. After the birth of her second child, she had become active in feminist causes. As she became more involved politically, she found for the first time in her life that she was experiencing an increasingly intense erotic attraction toward another woman. She reports that she loves her husband and that she does not want to destroy her marriage and family, but she believes that acting on her lesbian urges will end the marriage. She asks for help in learning to control her urges.

- A 20-year-old Orthodox Jewish male reports homosexual erotic fantasies and desires since childhood.

continued next page

He has not acted on them because he considers them sinful. He is very well integrated into his Orthodox Jewish community and greatly desires to live a life consistent with its values. He appears well adjusted otherwise. He asks for a change in orientation sufficient to live a heterosexual life.

In both these cases, there are already serious conflicts among core aspects of these persons' identities. It does not seem unreasonable for them to choose to modify their sexual orientation. Conversion therapy adds no conflict not already present and might, in fact, decrease it to facilitate better integration of personality.

Is the Desire to Change Necessarily Neurotic?

According to a third anti-choice argument, although clients may report that the homosexuality is unwanted, the real problem is their inability to accept themselves. They have internalized the anti-homosexual attitudes of our culture, and the treatment should be aimed at self-acceptance rather than changing homosexuality. Extreme versions of this argument claim that in our anti-homosexual society, negative attitudes are so easily internalized that a request by a homosexual client for a change in sexual orientation must always be seen as "coerced"—a result of societal attitudes, rather than genuine.

This third argument raises important issues. In all requests for change in psychotherapy, both therapist and client must together come to understand whether the motivation may be found to be neurotic. A request for heterosexuality can just as well function, consciously or unconsciously, as a defense against homosexuality, as readily as homosexuality can serve as defense against heterosexuality. As in all cases, a therapist must exercise good clinical judgment in exploring when a request for a change represents a problem in self-acceptance. Yet there are instances, as in the two cases described above, when the desire for heterosexuality is a conscious choice, not a neurotic defense, and a change in sexual orientation is reasonable and clinically defensible resolution to a conflict.

It is Patronizing to Refuse Help to Change

To claim that a request for conversion therapy is always coerced, that clients do not really want change, is to attribute a false consciousness to clients; we know better than they, what they want. Not only is this a patronizing and disrespectful attitude, but it mirrors psychiatric attitudes of fifty years ago. Well-adjusted homosexual adults were told that although they believed they were happy, psychiatry, with its superior insights, knew that they were sick. We have now come full circle. In the words of one NARTH official, "The oppressed have now become the oppressors."

"Disorder" is Not a Prerequisite for Change

The first of the ethical anti-choice arguments is simple. Since homosexuality is not a disorder, it should not be treated simply to satisfy cultural prejudice. To see the weaknesses of this argument, consider the analogous case against cosmetic surgery, which exposes the patient to the risks of surgery to change a condition that is not a disorder. Often, such surgery is chosen because of prejudice (e.g., Asian women who undergo cosmetic surgery to look more "Western.") Similarly, for most abortions, pregnancy is not a disorder. Often, the reasons for the abortion are cultural-societal expectations about the "appropriate" financial and time resources needed to raise a child. Yet we do not discourage these procedures, and in some cases society funds them.

A second ethical anti-choice argument argues that although treatment without a pathology might be ethical in specific instances, the message implied by such treatment is morally problematic. By "treating" homosexuality, the profession sends the message that homosexuality is a disorder. Moreover, the theories on which treatment is based are psychopathological models of homosexuality. To many homosexual individuals, especially teenagers confused, shamed, and overwhelmed by their emerging homosexuality, the message that homosexuality can be "cured" intensifies their anguish, leading possibly to suicide.

Does Abortion Send a Message that Pregnancy is a Disorder?

This argument shares some of the weaknesses of the previous one. Psychological treatment does not imply a disorder. For example, psychologists treat people who want to increase their ability to relax, improve communication, manage time better, as well as a host of other American ideals of the nineties. Does abortion send a message that pregnancy is a disorder? Furthermore, some conversion therapies, most notably behavior therapy, are not based on a pathological model of homosexuality.

With or without conversion therapy, antihomosexual attitudes will continue. But for those seeking conversion therapy, its unavailability will make a major difference. Their suffering and the loss of individual rights to psychotherapeutic privacy and control over one's own psyche seem too steep a price to pay for a minor increment in society's tolerance.

Society must be made aware of how a commendable attempt to eliminate dangerous prejudice has grown into a threat to individual liberty and freedom of thought. ■

APA, Science and the Defense of Marriage Act

by Ray W. Johnson, Ph.D.
Founder, Psychologists for a Free APA

Science can never settle the issue, "Is gay marriage good for society?" because it cannot tell us, "What IS the good society?" But scientific evidence does indeed contribute to the discussion of these philosophical questions. Therefore, it is imperative that the evidence be properly gathered and accurately interpreted.

The following is a summary of an article by the same name published in Psychological Reports 81,1007-1016,1997. Reprints of the original article are available free of charge from:

**Psychologists for a Free A.P.A.
1807 North Elm Street, #321
Denton, Texas 76201**

In 1997 the Congress of the United States passed the Defense of Marriage Act (DOMA). This act defined, for federal purposes, marriage as being between a man and a woman. It also permitted each state to refuse to recognize marriage which had been contracted in other states between same-sex partners. The American Psychological Association opposed this bill. The APA public policy office described it as "anti-gay."

What is the Definition of "Homosexual"?

The American Psychological Association has repeatedly declared that its political actions are based on and directed by science. A fundamental requirement for an adequate science to attempt to influence public policy is a universal standard operationalized definition of the object of study. There is no such definition for any sexual orientation. In other words, with no standard operationalized definition there is no generalizable research. Therefore, there is no adequate science of homosexuality upon which to base decisions of public policy. So, there is no science to support APA's position on DOMA or its positions on homosexuality.

If the APA position on DOMA was based upon science it would be reasonable to expect APA to present scientific evidence that endorsement of its position would improve society and marriage or that, at least, society would not be damaged by supporting same-sex marriage. In its position paper, APA Public Policy Office Legislative Overview of the defense of Marriage Act (DOMA), there was no discussion of the function that marriage serves in society. There was no discussion of why government might have an interest in any marriage. There was no discussion of the possible impact of legalizing homosexual marriage on other social institutions.

APA attempted to answer the question "What is Sexual Orientation?" by presenting a melange of possible defini-

tions, all of which were woefully inadequate for scientific purposes. None of the definitions specified the standard operations necessary to determine if any person would fit into the sexual orientation categories, "*generally* [emphasis added] classified as heterosexual, or homosexual..."

How Does Homosexuality Develop?

The Overview also posed a question regarding what factors contribute to the development of sexual orientation. In the absence of an adequate definition for sexual orientation, an adequate scientific answer is not possible for this question. Nonetheless, the Overview said that adult homosexual orientation is predictable by early childhood. It declared that "By the time boys and girls reach adolescence, their sexual preference is likely to be already determined..." It emphasized research which purports to show biological causes in homosexual development. It dismissed social-development influences thusly: "Developmental precursors for adult homosexual orientation...have not been consistently identified *for the population as a whole.*" [Emphasis added]

In doing so, APA followed the political strategy for gaining public sympathy for pro-gay issues advocated in the October 1996 *APA Monitor*. It recommended emphasizing the biological as opposed to the learning possibilities in the development of homosexuality. The importance of this strategy lies in the implication of APA's statement "The scientific literature thus strongly indicates that sexual orientation is far from being a voluntary choice." The combination of emphasis on genetics and biology, the dismissal of social influences, and the absence of choice implies that homosexuality is biologically determined and therefore cannot be influenced by developmental experience.

APA's reason for dismissing research showing differences in "homosexuals" and "heterosexuals" in developmental experience as possible precursors of homosexuality is significant. The research was dismissed because the precursors "...have not been consistently identified *for the population as whole.*" [emphasis added] Since there is no standard operationalized definition for homosexuality, there is no possibility of defining a population. Furthermore, the same demand for a representative sample of the population was not made for research which APA approves.

Since no science can resolve the moral concerns which many have about this matter, they were not discussed in the full-length version of this paper. Other issues from the APA Overview were addressed, and in all of them the lack of an adequate science upon which to base public and professional policy was discussed. Most particularly, it was stressed that there is no science of homosexuality which *would justify the radical definition of marriage*, an institution fundamental to our society.

This paper concludes: (a) that since there was no adequate science to justify APA's opposition to DOMA, it was an example of APA's devotion to divisive political positions; and (b) that advocacy of this sort degrades psychological science and tends to strangle scientific discourse and debate. ■

"My Brain Made Me Do It" — More on the Biological Research

A *Newsweek* article ("My Brain Made Me Do It", 1-26-98, p.56) describes the new revolution in neurobiology. Behaviors now said to be biologically driven include substance abuse, eating disorders, learning disabilities, pathological gambling, explosive temper, poor impulse control, shyness, and even violence. The *Los Angeles Times* (2-26-98, p. 1) also recently reported that a USC scientist "has linked factors such as difficult birth and slow heart rate to violence...Experts have praised his scholarship as being impeccable."

More recently, a study reported in the March issue of the *Journal of the National Cancer Institute* linked a gene pattern to yet another condition: smoking addiction.

Then a March 3rd Associated Press release described new research on the foundations of homosexuality. Reporting in the Proceedings of the National Academy of Sciences (March 3rd), researchers at the University of Texas, Austin, found that the inner ears of the lesbians studied had undergone masculinization, possibly reflecting prenatal hormonal exposure.

But in a surprising contradiction, "gay gene" researcher Dean Hamer said in his just-published book, *Living With Our Genes*, that lesbianism is "culturally transmitted and not inherited."

The Popular Media Reassesses the "Born that Way" Evidence

In a surprising shift, the popular media is finally beginning to acknowledge that biology *influences*, but does not *determine*, homosexuality. *Life* magazine (4-98) ran a cover article "Were You Born That Way?" which says:

"The hoopla with which these discoveries have been greeted—'Gay Gene!' the headlines blared—has obscured the fact that other institutions have had mixed results when trying to replicate the findings. It has also made it seem as if single genes dictate these behaviors. The reality is more complicated. Genes don't make men gay, or children timid." (p. 42)

Dr. Gerald Zuriff, a psychologist at Wheaton College (whose article "Psychology's Sexual Disorientation" appears in this *Bulletin* issue) says we will eventually find

"a biological basis for everything. Some people will be courageous, some shy, some vandals—but people will still be responsible for what they do." (*Newsweek*, 1-26-98).

U.S. Films Banned in New Zealand

The widely-distributed U.S. films, "Gay Rights/Special Rights" and "AIDS: What You Haven't Been Told" were recently banned in New Zealand. That country's Office of Film and Literature Classification deemed the two films in violation of New Zealand's 1993 Human Rights Act because they imply a link between homosexuality and the spread of AIDS. (*Culture Facts*, February 25, 1998)

AIDS Fundraisers Spread AIDS?

One of the most popular attractions in the gay community is its international "Circuit Parties"—more than 60 annual events for gay men, most of which are AIDS fundraisers.

This series of parties began in earnest about ten years ago, and now attract an estimated 150,000 to 200,000 men yearly.

A circuit party in Montreal has about 8,000 attendees, while another in New York hosts 7,000. Crowds of at least 5,000 jam into other major circuit events in cities such as Miami and Palm Springs, and on Fire Island.

The Circuit Parties are linked with widespread illegal drug use. Drugs linked to the parties include Ecstasy, crystal meth, Special K and GHB, the "date-rape" drug. Stephen Ceplenski, the publisher of *Circuit Noize*, a magazine which covers the parties, estimates that about half of the attendees at any given party are using illegal drugs.

Paradoxically, these same AIDS fundraising parties are now being blamed for the spread of AIDS as well as a renewed gonorrhea epidemic.

Knowing Nothing: The New Vogue

The *New York Times* ran an amusing article, "Analysts Get Together for a Synthesis" (3-14-98) which reported on a conference at Mt. Sinai Hospital in Manhattan.

In dealing with their patients' histories, analysts avoid attempting to get to the truth in their patients' histories—"abandoning certainty in favor of a reasonable myth the patient can believe in." In terms of theoretical knowledge, they go out of their way to stress to their patients that there are multiple perspectives. "The discussion of *true* versus *false* is a false issue," asserted one analyst.

One analyst commented, "We're all anxious to show what we don't know."

"During the meeting," said the *Times*, "only a few analysts claimed to know anything."

continued

If Psychiatry Has No Answers, Philosophy Will Fill the Gap

Perhaps in reaction to the insistence of many psychiatrists and psychologists that they "know nothing," a new breed of counselor has sprung up: the professional philosopher.

Instead of urging the client to look to himself to discover "what is true for him"-- and refusing to offer answers, in the fashion of many psychotherapists - - the professional philosopher-counselor guides the client through personal crisis such as divorce, death in the family, and professional struggles using his knowledge of ideas and of ethics.

According to philosopher Louis Marinoff, members of his profession focus on the universal questions of values, meaning and ethics, which he sees as an area that has been abandoned by psychotherapists. Dr. Marinoff teaches a course on the subject at Felician College in New Jersey, and has won the support of a New York legislator who is sponsoring a bill to license philosophical practitioners. He describes his work as an art form, not a science, and charges \$100 an hour for his services.

Herbert Sacks, president of the American Psychiatric Association, has accused Dr. Marinoff of a breach of ethics and of practicing medicine without a license.

-- from the *Los Angeles Times*, 4-5-98, p.A34

Tolerance with Limits

A new study shows that in spite of Americans' almost universal valuing of nonjudgmentalism, one exception still persists, at least in suburbia: non-acceptance of homosexuality. In the just-published book *One Nation, After All*, (Viking), author Alan Wolfe, a professor at Boston University, said that four times as many people surveyed were disapproving of homosexuality than were positively accepting of it.

"Born Gay" is a Myth, says Gay Organization

P-FLAG—the 70,000-member, national organization, "Parents and Friends of Lesbians and Gays"—offers an extensive, meticulously argued and scientifically accurate booklet on the biological research into the origins of homosexuality.

Prepared with the assistance of professionals including Dr. Clinton Anderson of the American Psychological

Association, the booklet is entitled, "Why Ask Why? Addressing the Research on Homosexuality and Biology."

This pamphlet offers the same conclusion typically seen in serious scientific journals—but misunderstood by educators, clergy, the courts, and those psychotherapists who have been educated by the popular media.

It says:

"To date, no researcher has claimed that genes can determine sexual orientation. At best, researchers believe that there may be a genetic component. No human behavior, let alone sexual behavior, has been connected to genetic markers to date."

The booklet clearly admits that "sexuality, like every other behavior, is undoubtedly influenced by both biological and societal factors." However, as its title "Why Ask Why?" suggests, the booklet *advises against looking for those family and developmental causes* on the basis that human sexuality is too "complex." If we take for granted the reasons why people become heterosexual, the booklet claims, then we don't need to know why people become homosexual; this information simply doesn't matter.

Misinformation Widespread Among Psychiatrists, NARTH Study Reveals

P-FLAG's surprising concession to the scientific literature on biological foundations for homosexuality marks an interesting contrast to a recent NARTH study. Even as gay-advocacy organizations and the popular media are beginning to concede that homosexuality is not biologically predetermined, psychiatrists seem to lag behind on that shift of position.

A pilot study was conducted in 1997 by Joseph Nicolosi, Ph.D., Ryan Howes, M.A. and Douglas Smith, Ph.D., questioning 100 Los Angeles-area psychiatrists by mail. Forty-one responses were received. It was entitled "A Survey of Psychiatrists on the Nature and Etiology of Homosexuality."

Of those psychiatrists responding, fully 68% said they believed homosexuality was biologically determined.

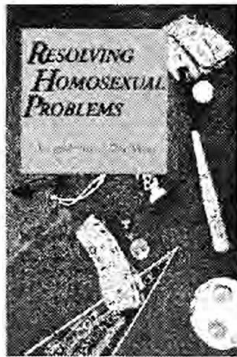
NARTH plans to follow this pilot study with more extensive surveys asking psychotherapy professionals around the country where they obtained their information on homosexuality, and what studies caused them to conclude that homosexuality is biologically predetermined. ■

Help for those who struggle with homosexual problems

From a gospel perspective, these new books provide understanding and guidance.

Resolving Homosexual Problems: A Guide for LDS Men by Jason Park
\$15.95

This book is written to Christian—especially Latter-day Saint—men who want to resolve their



homosexual feelings. It provides clear answers and practical solutions to resolve the difficult personal problems they face.

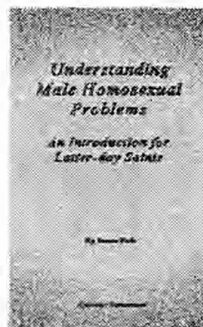
Helping LDS Men Resolve their Homosexual Problems: A Guide for Family, Friends, and Church Leaders by Jason Park
\$14.95



This book urges compassion toward those who struggle with homosexual difficulties. The journey out of homosexual problems will

be easier with the support of family and friends. This book provides guidance on how to help those who struggle with homosexual attractions.

Understanding Male Homosexual Problems: An Introduction for Latter-day Saints by Jason Park
\$2.95



For a quick overview, get this 48-page booklet that summarizes the information from the other two books.

Jason Park knows about the homosexual struggle. He made the journey out. His story is a compelling one. For men who struggle with unwanted homosexual attractions, and for the family, friends, and professionals who want to help them, these books provide an important message: change is possible.

—A. Dean Byrd, Ph.D.
Clinical Psychologist
Clinical Professor of Psychology

These are great books written by a skilled author. One is an important guide for the struggler and the other an instructional text for Church leaders, families, and friends who are seeking to understand this difficult issue. The books support therapeutic information with scriptures and instructions from Church leaders. The combination is a powerful testimony for those seeking to transition out of homosexual problems.

—David Pruden
Executive Director,
Evergreen International

Thorough in their content and documentation, they are the best products I have seen.

—J. R. Johansen, Bishop

A very thorough treatment of a complex subject by a man who has walked this difficult journey. These books will bless the lives of many.

—Dan Gray, LCSW

How to Order

Get these books at your local bookstore or order by mail directly from the publisher:

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Salt Lake City, UT 84147

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century.publishing@usa.net

Shipping & handling: 1st book \$2.00, \$1.00 each additional book (1st booklet \$1.25 + 15¢ each additional booklet)

Utah residents add 6.1% sales tax

These books focus on understanding and resolving the inner conflicts that underlie the homosexual struggle. The homosexual impulse will not disappear until the legitimate emotional needs are met. Meeting these legitimate emotional needs is the key to the healing process.

"HEALING HOMOSEXUALITY"

Audio tape series from upcoming book by
Richard Cohen, M.A.

Tape One

Meaning and Causes

The underlying meaning and causes of homosexuality are presented. The many factors that lead an individual into a homosexual orientation are clearly described. This tape is an excellent introduction for everyone.

Tape Two

Process of Transitioning

This presentation describes what to do in order to transition from homosexual to heterosexual. A complete plan for transitioning is detailed in a four-stage model of recovery.

Tape Three

Tool and Techniques

This presentation describes how to do it, a step-by-step guide to successfully work through each stage of recovery. Practical tools and techniques are explained in detail. A list of books and workbooks are recommended.

Tape Four

Affirmations and Meditations

This tape consists of several affirmations and meditations to use each day in accomplishing your desires and dreams. The affirmations and meditations are on such topics as healing gender-identity, building self confidence, healing relationships, and achieving your goals.

Tape Five

Healing Your Inner Child and Memory Healing

Healing Your Inner Child is a meditation on recapturing and liberating your inner child and true self. The concept of "inner child" is explained. Memory Healing is about resolving painful experiences through guided imagery.

Healing Homosexuality - Manual and Video

The Healing Homosexuality manual will help you understand the causes and treatment of homosexuality, as well as allow you to make your own presentations. Both include:

- Meaning and Causes of Homosexuality
- Process of Transitioning
- Current Statistics / Research on Homosexuality
- Strategies of the Homosexual Movement
- Positive Ways to Promote Change in our Communities
- Resources: Book List and Referral Services

This presentation is excellent for schools, universities, religious organizations, mental health agencies. **Manual - \$ 15 / Video - \$25**

Reparenting: A Mentorship Model - Manual

The 4 stages of transitioning from homosexuality to heterosexuality are detailed. In addition, the manual for reparenting describes a mentorship program for healing homo-emotional and hetero-emotional wounds. Both the roles and responsibilities of the reparenter and adult child are outlined. **Manual - \$ 10**

Alfie's Home - Children's Book

Alfie's Home is the story of a boy who struggles with homosexuality well into his teenage years, then transitions into heterosexuality after finding help and experiencing love in his family. This is the first resource of its kind for parents, teachers, students, counselors, clergy and anyone interested in helping children and adults heal their gender identity. **Book - \$ 10**

Mr. Cohen is available for speaking engagements, healing seminars, training and supervision.

1 Tape: \$10.00 / 2 Tapes: \$18.00 / 3 Tapes: \$25.00
/ 4 Tapes: \$32.00 / 5 Tapes: \$40.00

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Please make check payable to:

International Healing Foundation
P.O. Box 901, Bowie, MD 20718-0901
Tel. (301) 805-6111

Announcement: New "Leaving Homosexuality" Web Page

In order to share their success with others, an independent group of men and women who have experienced a significant degree of freedom from homosexual desires is creating a web page on the internet. The working title for the web page is "Leaving Homosexuality."

Others who can offer first-hand testimonials are invited to join the group in developing the web page, or to submit a short, first-person testimonial to be included. Testimonials may be anonymous, but must be from the individual's own experience with homosexuality.

To volunteer to participate in developing the web page, or to submit a testimonial, send an e-mail to "relyw@aol.com."

The group is not affiliated with NARTH, with any ex-gay ministry, or any other church or association.

The web page will include a "road map" or "master plan" to eliminating homosexual behavior and reducing same-sex obsessions and desires, based on the collective first-hand experience of those who have experienced change. It will include spiritual as well as therapeutic insights that have made a difference in their lives.

It will also include answers to frequently asked questions and commentary on how much change is realistic to expect, why change is worth the effort, etc.

The web page will specifically state that its purpose is not to "convert" or argue with gays who are content with their lives, but to offer help and hope to men and women who want to stop unwanted homosexual behavior, minimize their homosexual desires, and find peace. ■

1996 Collected Papers

The Collected Papers from our 1996 NARTH Conference are available. Suggested donation is \$20, postpaid. (Outside U.S. and Canada, \$25--in U.S. funds only, please)

For all three Collected Papers (1994, 1995, and the current 1996 issue) please send \$50. (\$60 outside the U.S. and Canada)

Articles Wanted

Readers are invited to submit original articles to be considered for publication in the *NARTH Bulletin*.

To those NARTH members have been sending article reprints and news clippings for our use, we thank you for keeping us informed. Even though we have not responded to you individually, please be assured of our continuing appreciation.

Book Available:

Homosexuality: A Freedom Too Far,
by Charles Socarides, M.D.

Credit card orders accepted. Call Adam Margrave Books at 1-800-931-4166. Price: \$27.00. Preview the book on the Internet at <http://tx.com/bookzone/10000480.peek.html>

Attention Members:

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(Note: If your carrier charges you to make a change of service, Lifeline will reimburse you.)

Many other non-profit organizations have similar arrangements with Lifeline. NARTH's own office has changed service to Lifeline, and is receiving a 10% rebate.

Thank you for helping NARTH!

Sex-Education Guidelines Available

Are you meeting with your school board to discuss sex-education and school counseling policies? Does the "other side" seem to have all the answers--but the wrong ones?

Now available--our 16-page, comprehensive School Sex-Education Guidelines: Teaching about Homosexuality.

Suggested donation for your postpaid copy: \$3. For orders of five or more to the same address, suggested donation is \$2 each.

Resource Available

NARTH has completed a 120-page booklet reprinting the most informative sections from previous publications by Jeffrey Satinover M.D., Charles Socarides, M.D., Thomas Schmidt, Ph.D., and Joseph Nicolosi, Ph.D., among others. An excellent all-round resource in readable language. Ask for "Understanding Homosexuality." Suggested Donation-- \$15.

Alliance Website

Internet. To access it, type in: <http://www.therapeuticchoice.com>

Paper Available from NARTH:

This 22-page, detailed historical description describes the behind-the-scenes proceedings that resulted in the deletion of homosexuality from the Diagnostic Manual. "Sexual Politics and Scientific Logic: The Issue of Homosexuality," by Charles Socarides, M.D., originally appeared in the *Journal of Psychohistory* (Winter 1992). Suggested donation: \$10.

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