

Homosexuality - A Freedom Too Far

(by Charles W. Socarides, M.D., 1995, published by Adam Margrave Books, 1-800-507-BOOK).

In this excerpt, Dr. Socarides responds question-and-answer style on the subject of treatment.

Have any psychiatrists or psychoanalysts been successful in treating homosexuality?

Yes. But you have to realize this is one of the most difficult problems in the history of psychiatry. Freud briefly saw very few homosexuals, and he did not have notable success with them. Nor did many of his followers. The early outlook among members of my profession was pessimistic. But then, starting in the 1940s, Edmund Bergler, a New York psychoanalyst, began helping some of his homosexual patients. He published reports on his successful therapies in 1944 and 1959 (and, for that, he was the object of an open hate campaign against him by organized homosexual activists of the time).

Despite the attacks, a number of other courageous psychoanalysts followed in Bergler's path: Gustav Bychowski published results of his work in 1944, 1954 and 1956, Sandor Lorand in 1956, Albert Ellis in '56 and '59, Harry Gershman in 1967, Samuel Hadden in 1958 and 1966, Lionel Ovesey in 1969, Toby Bieber in 1971--they all demonstrated the success of various therapies.

In 1960, the Portman Forensic Clinic in London, under the guidance of the prominent psychoanalyst Edward Glover, reported in the treatment of a large number of cases that, "Psychotherapy appears to be *unsuccessful* in only a small number of patients of any age in whom a long habit is combined with psychopathic traits, heavy damage and a lack of desire to change."

One of the most-well-documented sets of results was published in 1962, by a research team led by Dr. Irving Bieber of New York. That work, under the title, *Homosexuality: A Psychoanalytic Study of Male Homosexuals* (New York: Basic Books) presented the findings of a nine-year study of male homosexuals. There were nine practicing psychoanalysts and two psychoanalytically-trained psychologists on the team, and they, in turn surveyed 77 respondents (all psychoanalysts) on a 500-item questionnaire concerning a research sample of their patients--106 male homosexuals, and a comparison group of 100 heterosexual males. All 206 of these patients were in treatment with members of the Society of Medical Psychoanalysts--all of whom were either members of the faculty or graduates of the Psychoanalytic Division of the Department of Psychiatry of New York Medical College.

What were the findings in the Bieber report?

Of the 106 homosexuals who started psychoanalytic therapy, 29 were exclusively heterosexual at the time the volume was published. This represented 27 percent of the total sample. Fourteen of these 29 had been exclusively homosexual when they began treatment; 15 were bisexual. In 1965, in a follow-up study of the 29, I was able to reclaim the data on 15 of the 29. Of these 15, twelve had remained exclusively heterosexual; the other three were predominantly heterosexual, but had occasional episodes of homosexuality when they came under severe stress.

That report was published more than 30 years ago. Anything more recent?

In 1969, the psychologist R. B. Evans did some work that confirmed Bieber's findings about the origins of homosexuality. So did J. R. Snortum and four other associates, in the same year. W. G. Stephan did some confirming research on the link between parental relationships and the early sexual experiences of homosexual males that was published in 1973. Also in 1973, N. L. Thompson Jr. and three other clinical psychologists presented the results of studies they had done on parent-child relationships and the sexual identities of male and female homosexuals that also confirmed some of Bieber's conclusions on the causes of homosexuality identity. After 1973, it became less fashionable (or more dangerous) to do that kind of research (much less, research on the *treatment* of homosexuals). So we didn't see any more until 1993, when --

Wait a minute. Why did it become "less fashionable" and/or "more dangerous" to do this kind of research?

Because the American Psychiatric Association cured homosexuality by fiat on December 15, 1973.

Okay. And what happened 20 years later, in 1993?

Houston MacIntosh, a certified psychoanalyst from Washington, D.C. had a report in the *Journal of the American Psychoanalytic Association*, concerning a survey he had done of 285 psychoanalysts who had had 1,215 homosexual patients under their care. He was prompted to do the survey when a member of the Gay Caucus of the American Psychiatric Association maintained that traditional psychoanalysts could not help a homosexual, and should not even try because "homosexuality is biological in nature and not subject to change." MacIntosh set out to find out

what his colleagues in Washington thought of this. He also sent out questionnaires to a semi-random national sample.

And what kind of response did he get?

Some 67 percent responded. Ninety-eight percent of them disagreed with the statement by the member of the Gay Caucus that homosexuals could not change their orientation. Sixty-two percent of them said they believed that homosexual patients "sometimes change to heterosexuality" in analysis. These doctors reported that 84 percent of their patients "achieved significant therapeutic benefit" from their treatment, regardless of whether or not they had changed their sexual orientation. However, 23 percent of their patients did change. Dr. MacIntosh's survey is important. It explodes the gay militants' assertion that homosexuality can't be changed.

Dr. MacIntosh also found, incidentally, that his therapist-respondents, as a group, tended to be tolerant toward homosexual patients who conducted their affairs in private with mutually consenting adults. And that a majority of them agreed with my guidelines in working with homosexual patients, published in my book *The Preoedipal Origin and Psychoanalytic Therapy of Sexual Perversions*.

What were those guidelines?

- 1) Interpreting the meaning of a person's homosexual behavior must be done with tact and without damaging the patient's pride.
- 2) It is wrong for a doctor to say that homosexuality is biological in origin or caused by genetic factors. (That would preclude any possibility of change.)
- 3) Modification of sexually deviant practices should be first suggested by the patient, and then proceed only when the patient and the analyst understand the underlying structure of the symptom.

So, how would you sum up the attitude of the psychiatric and the psychoanalytic community today toward homosexuality?

We've been under assault by a small coterie of gay doctors inside the profession, but we're trying to stand firm in our convictions that we can help homosexuals who want to be helped--despite loud and sometimes very obnoxious insistence on the part of gay activists that they don't need help.

What do you mean, "obnoxious"?

For some years now, gays have been disrupting our meetings, shouting down people trying to deliver their scientific papers, threatening individual doctors like myself. Gay activists threatened to file a lawsuit against us for discrimination.

What happened?

For years, we psychoanalysts didn't knowingly allow homosexual doctors into our training institutes unless they went through analysis for their homosexuality. In 1991, under a great deal of political pressure, we passed a resolution at a meeting of the American Psychoanalytic Association that allowed them entry. Then they demanded more; they wanted to become training analysts without first undergoing analysis of and treatment for their condition; and, when we refused, they actually succeeded in getting the ACLU to send a letter to the president of our association, threatening a lawsuit. The cost of fighting such a suit would have run into seven figures.

Because of the cost, we capitulated--to sexual politics and legal coercion. We sacrificed our scientific integrity, and let them in, without insisting that their homosexuality be subjected to the same rigorous analysis that other candidates get for their heterosexuality.

How was that a sacrifice of your integrity?

We have certain professional standards that come out of our tradition dating back all the way to Freud. And now we were letting outsiders in who wanted to undermine that tradition--on grounds that were not scientific, but political. The only thing we could do, then, was let them in, but tell them at the same time that we expected them to behave themselves.

Behave themselves?

Not play gay politics. Stop trying to stifle our research, disrupt our meetings, or try to derail our efforts to understand more about the origins and treatment of homosexuality--which a majority of us still believe is a developmental disorder.

Do you think they will behave themselves?

I doubt it. The gay activists have a ferocious irrationality. They turn every scientific agreement into a political issue--which is all they can really do, since the only science they have going for them is pseudoscience.

You don't believe that threatening homosexuals is "one of the most flagrant abuses of psychiatry in America"?

Absolutely not. And we will go on treating homosexuals despite the very successful campaign that gay activists have mounted to normalize what was always considered deviant behavior. It's more than a campaign, really. It's more like a movement. There are now hundreds of gay organizations in this country, all of them promoting a spurious homosexual freedom. As a result, to them, and to an increasing number of straight Americans, homosexuality has become "just another lifestyle." ■