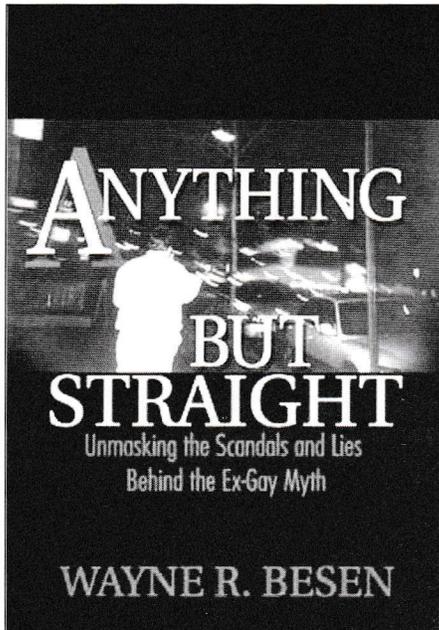


## Anything But Straightforward

A Book Review by Glenn Wyler



Wayne Besen's new book *Anything But Straight: Unmasking the Scandals and Lies Behind the Ex-Gay Myth* is described on the back cover as a "groundbreaking exposé." An exposé is—by definition—an attempt to discredit; to expose alleged corruption. Thus the reader should keep in mind that *Anything But Straight* is, by design, anything but straightforward. It is anything but fair, complete, or honest.

In its attempts to expose, it eschews all pretence of balance, fairness and honest inquiry. It is journalism that is decidedly yellow, and deliberately so. There may be nuggets of truth in the text, at times, but these are buried beneath such mounds of diatribe and surrounded by such vicious vituperation that all that can be determined for certain is that the author holds a seething hatred for anyone and anything that argues for the possibility of altering one's sexual attractions.

In presenting his nearly 300-page invective, Besen repeatedly employs name-calling and labeling, mockery and sarcasm, generalizations, stereotypes and double standards as he introduces one allegation and false claim after another. His central claims are that sexual orientation change is a myth, that there are absolutely no means of effecting change, and that everyone who claims to have experienced change is either lying or deluded.

He repeatedly makes completely unsupported allegations and uses anecdotes and hearsay to support *his* claims as though they were proven fact, then criticizes his opponents for supposedly having insufficient data or substandard studies to support *their* claims. He dismisses all evidence that counters his views (or more often, declines to mention that such evidence even exists) but accepts unquestionably any and all information that bolsters his position. He is the king of the double standard, liberally applying methods that he turns around and decries as the epitome of hate and ignorance whenever he is the recipient rather than the

purveyor of them.

### Name Calling and Labeling

To get a sense of Besen's intent, consider just a small sample of the name-calling and labeling the author uses throughout the book in an obvious effort to discredit and embarrass his subjects:

"the dangerous quack psychology of the lucrative reparative therapy industry" (p. 18) "the zany characters who run these programs" (p. 21) "Moberly sends the quack-o-meter off the charts" (p. 104) "the leading ex-gay ministries are a disorganized, shockingly unprofessional collection of unqualified counselors and fundamentalist shamans who cause untold damage to the very people they are supposed to be helping" (p. 59) "Moberly's pedestrian book" (p. 103) "twisted antigay doctors such as Jeffrey Satinover" (p. 137). "the avaricious Cohen" (p. 121).

In some of his most egregious moments of name calling, he actually titles two of his chapters "Nicolosi's Nonsense" (p. 133) and "Radical Richard" (p. 161), and throws in sub-heads like "Inside Nicolosi's Lair" (p. 150), "The Quacks Organize" (p. 136) and "An Underachiever Finds His Niche" (p. 134), for good measure. But his single most bitter denunciation may be this:

"Reparative therapists are detestable, money-hungry con artists who lure and bamboozle susceptible people with misleading promises and false hope. One reason these quacks practice their chicanery is to cash in on this lucrative industry, but one cannot dismiss raw hatred as the primary motive that drives these charlatans to extreme lengths to denigrate lesbians and gay men" (p.158).

Reading the nonstop slurs in *Anything But Straight* will make perfectly clear to the reader *who* exactly it is that us seething with "raw hatred." (Hint: It isn't the therapists.)

Besides, why on earth would anyone with "raw hatred" for lesbians and gays choose to spend his professional life, day after day, working with homosexuals? And if a professional were actually motivated by raw hatred, wouldn't that tend to come across to his clients, and drive them away in droves? On the contrary, reparative therapy is based in part on a model in which the therapist is *more* engaged with the client, more of a mentor, and plays *more* of a loving-parent role, than is the case with standard *therapy*. This places reparative therapists in an *emotionally* intimate relationship with their clients. Clearly, *homophobes* need not apply.

But Besen rarely attempts to actually defend his disparagements. It serves his purposes simply to sling verbal mud and hope it sufficiently dirties his subjects in the reader's mind so that he needn't provide any actual evidence of misconduct or malfeasance.

### Mockery and Sarcasm

Continuing in this spirit of verbal assault, the author delights in mockery and sarcasm, especially of all things religious. For a man who seems to think "diversity" and "tolerance" are the ultimate moral virtues, he certainly draws the line at religious diversity or respect for traditional Christianity, for which he clearly has a zero tolerance policy.

Besen describes his visit to a church in Orlando, Florida, that had, in his words, "an authoritarian, hocus-pocus worship style" (p. 48). This, under a chapter subhead he calls "Ministry Mouse and Deuteronomy Duck." He refers to "convincing Jesus to wave his magic wand" as the means by which some people experience change, and claims "they have reduced God to no more than a rabbit's foot, a simple good luck charm that is used to stop them from masturbating or running to an adult bookstore" (p. 44).

Besen, a self-described secular Jew, demonstrates his special contempt for the notion, widely held by people of many faiths, of listening to the whisperings of the Holy Spirit. He slanderously equates such experiences as signs of mental illness.

"Crazy stories are almost as ubiquitous in the ex-gay community as prayer" (p. 45) "Many of the ex-gay leaders appear to have untreated mental disorders...An alarmingly high number of ex-gays...report hearing voices and having visions, which may very well be hallucinations" (p. 43).

In one chapter subhead, he even coins the mocking moniker "Hallucinogenic Heterosexuals" (p. 43). But what kinds of hallucinations or divine acts (depending on one's point of view) is Besen referring to?

Regarding the infamous visit to a Washington gay bar by Focus on the Family's John Paulk, a public spokesman for sexual orientation change, Besen quotes a repentant Paulk as saying in an interview on Focus's radio program, "I heard the Holy Spirit say to me, 'Turn around and run. Do not go in there.'" Besen's mocking response: "I don't know about you, but if I heard the Holy Spirit personally tell me not to go into a bar, this Jew would sprint to the nearest sink, dunk my head under the water faucet, and self-baptize" (p. 20).

"Anne Paulk is one who seems to receive miracles from God as frequently as most people eat breakfast," Besen writes (p. 45). He then describes an answer to prayer Anne

writes about in her book in which she called on God to help her find a lost contact lens, and another where she receives a spiritual impression while looking at cloud formations that she might be pregnant. While Anne may be quicker to see the hand of God in her life than some others, her experiences are hardly on the fringe of spiritual life, as Besen likes to portray them.

Besen quotes author Richard Cohen, who at a critical juncture in his life sat down near a lake and prayed to God, with both impatience and resolve, "OK, God, it's show-down time! I'm not moving from this spot until you tell me what to do and where to go." Besen mocks: "God, sufficiently alarmed that Cohen might expire lakeside, dutifully dropped whatever he was working on and instantly submitted to Cohen's demands." Then, after Cohen received a clear prompting, Besen adds: "Knowing God was at his beck and call, Cohen had the chutzpah to ask for verbal confirmation, as if God were a travel agent" (p. 168).

Besen should know, but apparently does not, that this kind of spiritual seeking is hardly unique to ex-gay experience. By openly ridiculing these and similar experiences in his book, Besen proves his utter disdain for the spiritual life of Christians and other people of faith generally. By mocking these testimonies, he also mocks anyone who seeks to listen for and follow the whisperings of God's Spirit.

Besen's mocking is not reserved for spirituality. Naturally, he takes delight in mocking such things as "lipstick application seminars to help some lesbians become more feminine and touch football games to butch up some of the more effeminate homosexual men" (p. 16). And naturally, he mocks without explaining that the deeper psychological purpose of such activities is to help same-sex attracted women and men face their fears of traditional gender associations.

### Generalizations, Stereotypes and Double Standards

Given the vehemence with which Besen blasts any perceived slight against homosexuals or gay culture, the blatant and hostile stereotypes and generalizations that he directs at ex-gays and reparative therapists represent the worst kind of double standard:

"Most (ex-gays) are suffering unbelievably dark, lonely, miserable lives" (p. 37). "Most (ex-gays) are chronically depressed" (p. 40) "The vast majority of the (ex-gay ministry) leadership and nearly all of the spokespeople...(are) self-destructive, unstable individuals who lack self-control and have decimated their personal lives" (p. 42) "A significant number appear to have problems with mental illness" (p. 42). "Little evidence supports the existence of 'normal' ex-gays" (p. 56). "Most ex-gays are not looking for a religion, but a regimen. They are learning scripture because they seek structure. When they claim they are searching for God, they really mean they are searching for

guidance" (p. 48). (Apparently, Besen is a mind reader who can divine what seekers are "really" seeking.)

"They have left behind colorful, three-dimensional lives of uncertainty and despair for monochrome, one dimensional lives of relative stability and security" (p. 52). (This may be the most bizarre sentence in the entire book. Colorful, three-dimensional lives of *uncertainty and despair*? What kind of a color is *that*?) Ex-gays "are stuck in a *lifestyle* that demeans, diminishes and dehumanizes them for who they are" (p. 18, emphasis added). Reparative therapy clients are "hapless victims" with "fragile minds" (p. 156).

Imagine the howls of protest if these same aspersions were directed at gays instead of ex-gays!

Besen charges reparative therapists with nothing short of malpractice for allegedly telling clients that there is no true happiness to be found in a homosexual life, or that promiscuity, disease, infidelity and broken relationships are rampant in the gay community. This is supposedly reckless and demeaning, driving reparative therapy clients to the brink of suicide. But Besen thinks it's perfectly acceptable to label thousands of people as mentally unstable, out-of-control, chronically depressed, unable to handle personal freedom, and on and on – *simply for not wanting to be gay!*

In one glaring example of his double standards, Besen decries the use of the term "gay lifestyle" as small-minded and bigoted, because it supposedly indicates that there is one monolithic gay scene that defines all of homosexual life. But then he deliberately titles a chapter subhead "The Ex-Gay Lifestyle" (p. 55) and says ex-gays are "stuck in a lifestyle that demeans" them.

An even more egregious example: Besen quotes NARTH as saying, "In reality, there is no evidence that homosexuality is simply genetic," and then charges, "This phrase illustrates how slippery NARTH really is. The statement is technically true," Besen says, "because the research cannot show, at this point, that homosexuality is *simply* genetic, but NARTH's statement conveniently omits the incontrovertible fact that a growing body of research points to a possible biological component."

That's on page 149. Now flip back just two pages. Besen summarizes the Pillard-Bailey twin study, which found that out of 56 gays who had an identical twin, 29 of the twin brothers were also gay. Besen concludes, "This study clearly showed a biological/genetic component to sexual orientation..." Stop right there. No, it didn't. A biological component is only one possible explanation, since these twins shared a common upbringing. Besen continues his sentence: "but the fact that not all of the identical twins were gay *suggested* that there *may* be more than just a *simple* genetic explanation for homosexuality" (emphasis added).

"*May*" be? *Suggested*? Now who is slippery? And the sentence isn't even close to technically true. The study *actually proved* that there *must* be more than genetics at work, since identical twins, by definition, share identical genes.

Understanding Besen's "slipperiness," spite, and ill intent will help to put into perspective the allegations and false claims he presents throughout his book.

### Allegation: Nobody Ever Succeeds at Change

Wayne Besen's central claim is, of course, that sexual orientation change is a myth. He writes:

"The extraordinary claims made by ex-gay groups are without merit, and the efficacy of their programs is dubious at best and harmful at worst" (p. 16). "The most these deceptive entities can usually accomplish is teaching fearful people how to repress natural feelings, at the risk of grave psychological harm, which is really no accomplishment at all" (p. 17).

"Sexual orientation is a deep-seated, unalterable part of who people are; it runs as deep as the soul; it is the very core of being" (p. 192).

"In general, ex-gay groups have a near total failure rate" (p. 40). "Nobody has 'changed'" (p. 38)

Supporting his viewpoint, Besen contends that *everyone* who claims to have experienced change is either lying or deluded: "For a time, through faith and mental repression, a person may even believe he or she has become the straight person being portrayed" (p. 16, emphasis added). But he claims those who say they have experienced change will inevitably have to face the "truth" one day that they really haven't changed at all.

Besen's greatest concession to the possibility of change comes in this qualifier-packed sentence: "I would not rule out the remote possibility that, in some very rare circumstances, a few people may be comfortable and honestly function as if they have changed their sexual orientation" (p. 16, emphasis added). (Would it be possible to hedge this sentence any more without it collapsing under the weight of its own equivocation?)

But Besen sets up a precarious predicament for himself by taking the extreme position that change is *always* impossible and in fact nobody has *ever* changed – precarious because it requires only a single success story to debunk his thesis. By contrast, the ex-gay ministries and reparative therapists are on much firmer ground by defending the position that *some* people have experienced *some* degree of change, and are happier for it, and if change is possible for some people, it is likely possible for some others *as well*. This position is not subject to the Achilles Heel of Besen's absolutist perspective. It is not subject to collapse from a

single case, or any number of cases, countering its claims.

So let's consider (since Besen certainly doesn't) the abundant evidence that some people have experienced at least some degree of change in their sexual attractions.

In more than 50 years of research, including 48 studies referenced in this paper, there are data and published accounts documenting easily more than 3,000 cases of change from homosexual to heterosexual attraction and functioning. With one notable exception – a chapter dedicated to railing against Dr. Robert L. Spitzer's 2001 study of successful sexual reorientation clients – Besen disregards this entire body of psychological literature, preferring to pretend it doesn't even exist.

But he is in good company. Besen approvingly quotes the American Psychiatric Association's medical director as saying, "There is no published scientific evidence supporting the efficacy of reparative therapy as a treatment to change one's sexual orientation" (p. 235). With that, Besen can safely skirt the debate, and avoid confusing the poor reader with the facts. After all, even the experts say there is "no published evidence."

But is that true?

#### **"Homosexuality and the Possibility of Change" Project**

New Direction Ministries in Toronto, Canada, has collected and critiqued 31 clinical research studies, individual case studies and surveys on homosexuality and the possibility of change published in books or academic journals between 1952 and 2003.<sup>1</sup> The reviewers looked for reported changes, and supporting evidence for changes, in behavior, attractions, fantasy and self-identification by the subjects of the various studies and surveys. On their Web page, they summarize the collective results of 28 of the studies, and discuss the other three separately.

Collectively, the 28 studies present information on 2,252 subjects. The reviewers with the "Homosexuality and the Possibility of Change" project selected for analysis only those subjects for whom enough data was available in the published reports to assign the subjects approximate before-and-after Kinsey sexual orientation scores of from 0 (exclusively heterosexual) to 6 (exclusively homosexual). They eliminated from consideration those subjects whose "before" scores were lower than 5 (where 5 is "predominantly homosexual") or for whom insufficient information was available to assign any scores at all.

The reviewers found that using even this conservative before-and-after analysis, the published research clearly supports at least:

- 45 cases of people who were exclusively or predominantly homosexual (a 6 or 5 on the Kinsey scale) mak-

ing a full shift in sexual orientation (to a 0 on the Kinsey scale).

- 287 cases of people who were exclusively or predominantly homosexual (a 6 or 5 on the Kinsey scale) making a partial shift in sexual orientation (to a 1 or 2 on the Kinsey scale).
- 86 cases of people who were exclusively or predominantly homosexual who transitioned to satisfying heterosexual relationships. (This third group of studies measured change by external behavior and reports of satisfaction, rather than reports of levels of attraction.)

Thus you have at least **418** cases in the published psychological literature of heterosexual orientation shift, according to the criteria used by the "Possibility of Change" project. However, the studies themselves actually report at least **563** subjects who experienced varying degrees of change toward increased heterosexuality. (The lower number is due to the project reviewers applying uniform criteria, years after the fact, to summarize more than 50 years of published studies, and thus excluding reports that didn't fit their criteria for analysis.)

Besen would argue, of course, that many of these studies are old, and thus outdated. But old and outdated are not synonymous. Research doesn't "go bad" with time alone, like old bread. Older research can be confirmed, expanded, reinterpreted or contradicted by new, better designed or more thorough research. But age alone never invalidates a research study. And it is striking that these 31 studies, conducted over 50-some years, consistently show at least some evidence for sexual orientation shift, every time.

#### **NARTH Survey of Reparative Therapy Clients<sup>2</sup>**

In addition to the 28 studies summarized above, the "Homosexuality and the Possibility of Change" project reports on three others. The first, conducted by the National Association for Research and Therapy of Homosexuality in 1997, is a survey of 882 individuals who had been in reparative therapy or other intervention programs in an effort to effect a sexual-orientation change.

The anonymous survey found that, before counseling or therapy, 581 men and women out of the 882, or 66%, considered themselves exclusively or almost entirely homosexual (Kinsey 6 or 5). Another 188 (21%) considered themselves more homosexual than heterosexual (Kinsey 4) before treatment.

After treatment, only 111 (13%) considered themselves exclusively or almost entirely homosexual (Kinsey 6 or 5). That's **470** fewer individuals who placed themselves in this category, post-treatment. And in fact, 282 individuals (32%) described themselves as either exclusively or almost entirely heterosexual after treatment (Kinsey 0 or 1).

*continued*

Those surveyed also reported significant decreases in the frequency and intensity of their homosexual thoughts – from 63% indicating “very often” before treatment to 3% after treatment. The same was true of sexual behaviors with a partner: 30% had homosexual sex “very often” before treatment, while only 1% did so afterward.

### NARTH Survey of Therapists<sup>3</sup>

The second survey was also conducted by the National Association for Research and Therapy of Homosexuality in 1997, but this one surveyed 206 therapists and counselors who have counseled individuals who sought to change from a homosexual orientation. Collectively, these 206 professionals had worked with a total of at least 9,702 homosexual clients seeking sexual reorientation.

More than 40% of therapists said that the majority (61% or more) of their clients had either “adopted a primarily heterosexual orientation (not just behavior)” or “experienced a significant decrease in unwanted homosexual thoughts, feelings and behaviors” or both. At an average of 47 clients per therapist, that would represent more than 2,350 clients who experienced a significant homosexual-to-heterosexual shift, according to the therapists who counseled them.

### Spitzer Study<sup>4</sup>

The last of the 31 studies summarized by the “Homosexuality and the Possibility of Change” project was conducted by Columbia University psychiatrist Dr. Robert L. Spitzer, who studied “the self-reported experiences of individuals who claim to have achieved a change from homosexual to heterosexual attraction that has lasted at least five years.” (This study was published in the *Archives of Sexual Behavior* in October 2003.) He located and interviewed 143 men and 57 women who had had a predominantly homosexual attraction for many years (defined as at least 60 on a 100-point scale of sexual attraction, where 0 is exclusively heterosexual and 100 is exclusively homosexual), and who, after therapy, had experienced a heterosexual shift of no less than 10 points, lasting at least 5 years.

Spitzer found that the average level of reported homosexual attraction among the 200 interviewees dropped from 90 (on a 100 point scale) in the 12 months before the change effort began to 19 in the 12 months just prior to the interview. Also:

- 37 (19%) of the respondents reported “complete” change, with no lingering homosexual thoughts, fantasies or desires.
- 119 (60%) met Spitzer’s criteria for “good heterosexual functioning” (which included never or rarely having same-sex thoughts during heterosexual sex).

### Other Studies

In their book, *Homosexuality: The Use of Scientific Research in the Church’s Moral Debate*, psychologists Dr. Stanton L. Jones and Dr. Mark A. Yarhouse present summary data on 30 research studies conducted between 1954 and 1994. Of these, 13 are also included in New Direction’s “Homosexuality and the Possibility of Change” summary, but 17 are not. These 17 additional studies,<sup>5</sup> conducted mostly in the 1960s and 1970s, present data on 327 subjects. Of these, 108 men and women made a successful shift from primarily homosexual to primarily heterosexual attractions and/or behaviors.

One of the more recent publications on the topic is in the American Psychological Association’s June 2002 issue of *Professional Psychology: Research and Practice*. An article by Dr. Warren Throckmorton, “Initial Empirical and Clinical Findings Concerning the Change Process for Ex-Gays,” summarizes 11 studies and concludes: “My literature review contradicts the policies of major mental health organizations because it suggests that sexual orientation, once thought to be an unchanging sexual trait, is actually quite flexible for many people, changing as a result of therapy for some, ministry for others and spontaneously for still others.”

### Personal Experience with Change Efforts

What is Besen’s response to all this published research by scores of professionals, published in dozens of books and journals, over several decades? Quite simply, to ignore it. To pretend it doesn’t exist. And to present instead anecdotes of seven former ex-gay leaders who either relapsed into old patterns or left their ministries altogether and recanted their claims of change.

These seven cases of failed (or in John Paulk’s case, incomplete) change efforts are supposed to counterbalance all the data collected on 3,000-plus individuals in 48 published studies over 50 years. This is the equivalent of saying that the experiences of millions of people who have found sobriety in Alcoholics Anonymous throughout the world are invalid simply because some people who succeed for a time later fall back into drunkenness. This is a ridiculous leap. Remember, Besen’s thesis is that nobody succeeds at change, not that some people fail. He has, at a bare minimum, hundreds more cases to attempt to discredit before he gets anywhere close to proving his thesis.

And he can’t have it both ways. He can’t present the anecdotal accounts of failed change efforts as proof of universal failure while dubbing all personal accounts of success as fraudulent. Why should we believe these seven individuals are representative of everyone who seeks change while disregarding the personal experiences of so many others?

Consider also the many men and women who have pub-

lished autobiographical (or combined autobiographical and educational) books relating the authors' personal experiences with overcoming unwanted homosexuality: Scott Anderson, Richard Cohen, Andy Comiskey, Joe Dallas, Bob Davies, Erin Eldridge, D.L. Foster, Janelle Hallman, Jeanette Howard, Dennis Jernigan, Jeff Konrad, Alan Medinger, David Morrison, Jason Park, Anne Paulk, Sy Rogers, Barbara Swallow, and Frank Worthen, among others. In addition, Dr. Joseph Nicolosi has written a book of eight case studies,<sup>6</sup> and Bob Davies has compiled a book of 14 personal testimonials.<sup>7</sup> In addition, scores of personal accounts of change can be found on the World Wide Web.<sup>8</sup>

But never mind all that. In Besen's world, every last one of them is lying, faking or self-deluded.

### **Allegation: Only a 180-Degree Shift "Counts" as Change**

A linchpin of Besen's argument that no one ever changes is the self-created tenet that change must be a 180 degree shift from 100 percent homosexual to 100 percent heterosexual in order to be considered (by him) to be legitimate. It makes for a convenient stipulation, one that neither reparative therapists, ex-gay ministries nor we who have experienced change have ever made ourselves.

With this manufactured provision, Besen discounts claims of change by those who had any degree of heterosexual interest prior to pursuing change. Criticizing the Spitzer study, for instance, he claims that "many of the 'success' cases may have been bisexual or heterosexual prior to therapy" (p. 238) and wonders "whether a change in sexual orientation occurred or whether the subjects simply sublimated their homosexuality in favor of their heterosexual side" (p. 231).

At the other end of the scale, Besen disregards the experience of anyone who still has any degree of homosexual feelings or susceptibility to homosexual "temptation." He takes advantage of the honest candor of certain ex-gays who admit to not being "totally healed" or who confess that in times of stress, they sometimes think about resorting to past homosexual behaviors. See, they haven't really changed, Besen gloats. But one wonders why people who are supposedly lying or self-deluded don't just go all the way and claim complete change. Why tell half a lie?

Given Besen's harsh criteria for defining change, he would have to argue that no one has ever gotten sober in Alcoholics Anonymous. After all, even after 20 years or more of sobriety, AA members always speak of themselves as "recovering," never fully recovered, to remind themselves that they may always be vulnerable to backsliding.

So according to Besen, anyone who shifts from a Kinsey 5 (almost exclusively homosexual, but with some slight het-

erosexual interest) to a Kinsey 1 (almost exclusively heterosexual, but with some slight homosexual interest) hasn't really changed. The person wasn't "truly gay" before, and isn't really "straight" now, Besen maintains.

At the same time that splits hairs over the definitions of "gay" and "straight," Besen is critical of therapists and ministry leaders who can't agree on a clear definition of "change," and thus describe or measure it in varying ways. But of course. Sexual orientation is an extremely amorphous concept. Warren Throckmorton writes, "There is no consensus of a direct, physical means of assessing sexual orientation...Self-report is the most common means of assessing sexual orientation, with all of the limitations known for this assessment method."<sup>9</sup> And Throckmorton quotes John Gonsiorek and James Weinrich: "Given such significant measurement problems, one could conclude there is serious doubt whether sexual orientation is a valid concept at all."<sup>10</sup>

And to Besen, behavior change doesn't count, of course. "Remember, reparative therapy changes sexual behavior, not sexual orientation. People can learn to act straight and repress their sexual urges, but they rarely, if ever, change their fantasies, attractions or capacity to fall in love with members of the same sex" (p. 189). This claim once again ignores the psychological literature, which draws quite a different conclusion. But it also shows Besen's ignorance of the fact that, for many who seek change, sexual behavior *is* the real problem, not sexual attraction. They seek to bring their behavior in line with their values and beliefs, as a means of eliminating internal conflict. If they can accomplish that, living with an attraction to the same sex often-times is not particularly burdensome to them.

What Besen doesn't realize is that for most people who seek change, heterosexuality is not actually the ultimate goal; happiness is. For them, happiness is not contingent on sexuality alone, but on living a life congruent with their values, beliefs and life goals. So, unlike Besen's unreasonable demand for a 180 degree turn or nothing, the men and women who actually seek change are often quite content with a much subtler shift. To be free from the constant pull of homosexual desires, to have a happy marriage, to have children, and to live a life they believe to be in line with God's will for them – many ask for nothing more. Never mind where they fall on anyone's Kinsey scale or what critics like Besen expect.

### **Allegation: There's No Sane Reason to Want to Change**

Besen's portrayal of those who seek to alter their sexual attractions shows a deep misunderstanding – or more accurately, a mocking misrepresentation – of this sincerely motivated population. According to Besen, only homosexuals who are emotionally unstable, homophobic and victims of societal oppression would want to change their sex-

ual orientation, this is Besen at his most vicious.

"Unlike many other communities, the GLBT community is blessed with unparalleled freedoms. One can comfortably choose from a plethora of lifestyles that span the ideological, theological and fashion continuum with minimal condemnation,...from conservative Log Cabin Republicans to flamboyant drag queens. For those who are centered, this unbridled liberty and diversity can make for an incredibly rich and fulfilling life.

"However, for those who are weak-minded, mentally unstable, or lacking in self-esteem, the dearth of clearly defined rules in the GLBT community can be a nightmare... Without unambiguous strictures dictating every detail of their lives, they have to make choices for themselves, and, often, they make terrible choices that lead to addiction, misery and, in many cases, death.

"When these people hit rock bottom, they often mistakenly blame the GLBT community for their own personal failings. When these individuals say they 'hate the so-called gay lifestyle,' they really mean they disdain a world with limitless options. To thrive, these individuals need clear guidance – a roadmap for life...

"To join the ex-gay ministries, one has to accept a hard-core, right-wing fundamentalism that outlines every minute detail of one's life. This almost always means joining an authoritarian, right-wing church...[that appeals] to those who are mentally unstable" (p. 47-48)

Here again, Besen's duplicity is jaw-dropping. He praises the "unparalleled freedoms" and "limitless options" of the GLBT community, in which one can "comfortably choose from a plethora of lifestyles," but absolutely precludes from this plethora, the choice of *which* sexual orientation to pursue or develop. This, apparently, is the one area of choice that should be prohibited and universally condemned. All else is open season, a celebration of wonderful diversity.

Including gender. Notice the subtle inclusion of the "T," for transgender, in his use of the GLBT acronym. By slipping it in to his defense of limitless options, he is subtly arguing for the choice to determine one's own gender. Was anything ever more hardwired, more genetically encoded, then gender? And yet Besen and his ilk adamantly defend the rights of gender-benders and gender-switchers, including the right to undergo mutilating surgery and take chemical hormones to alter the body's natural hormone production. All this is celebrated as diversity and choice.

And yet sexual attraction – something that is far less bio-

logically based, that *may* only have a *possible* genetic component, yet to be discovered (as may just about any human inclination) – is not to be consciously channeled, according to Besen. This is where he abruptly slams the door on tolerance, diversity and choice. He clearly is no purist when it comes to these values. Rather, he merely uses them to bolster his only real value, which is homosexuality itself. If tolerance, diversity and choice collide with a pro-homosexual stance, they must fall by the wayside. Otherwise, he would have to tolerate the choice of some people to pursue a heterosexual shift, and respect their diversity. But there he draws the line.

Now, according to Besen:

"Most [ex-gays] are desperate, depressed people who have decimated their lives through irresponsible choices and now find it easier to blame their sexual orientation rather than themselves" (p. 30)

"One of the major reasons people join the ex-gay ministries is because they believe gay life is bars, drugs, and sex. This has more to do with their personal moral failings than those of the [gay] community" (p. 268).

"These individuals cannot handle freedom" (p. 52).

Did Besen ever ask even one individual why he *wanted* to change his sexual orientation? When Robert Spitzer asked that question of 200 men and women who said *they had* changed, the number one answer was that *they did not* find a homosexual life to be emotionally satisfying (81% of respondents), closely followed by 79% who said it *conflicted* with their religious beliefs. Fifty-eight percent *said that* gay life was an obstacle to their desire either to *marry* or remain married.<sup>11</sup>

These responses are consistent with my own *experience* supporting men who seek change. When I asked the *question* (open-ended) on one of the People Can Change *online* support groups, the most frequent reasons given for *seeking* change were:

- Living as a homosexual felt wrong and conflicted with my moral beliefs (10 responses) It conflicted with my religious beliefs or my beliefs about God's will for my life (10 responses) I wanted to one day have a wife and children (8 responses) I felt emotionally unfulfilled in a gay life; it didn't meet my deeper needs (8 responses) I wanted to hold together an existing marriage and family (5 responses).

- For me, homosexuality was addictive, *obsessive* or compulsive (5 responses) I couldn't find "Mr. Right" and stopped believing he existed in the *gay world* (5 response) I feared disease and early death (5 responses).

Seventeen additional responses were volunteered by one or two people each. Only two people responded that one reason they were pursuing change was that they feared societal rejection and wanted to fit into mainstream society.

These are not the life goals of mentally unstable people who "can't handle freedom" or have "decimated their personal lives." Seeking emotionally satisfying relationships, working to live in congruence with one's moral belief system, seeking to do God's will as they understand it, desiring to get married and have children or hold an existing family together – these are hardly the desires of a mentally unstable fringe group. If Besen truly wants to welcome these men and women into the gay fold, he needs to consider what, if anything, the homosexual community has to people with this particular set of moral values and life goals.

Despite Besen's insistence that gay life is not just bars, sex and drugs, the research indicates that, in fact, much of it is. No wonder that Spitzer's respondents – an unusually spiritually oriented group – said they found homosexual life to be so emotionally unsatisfying. It should be obvious to even the most casual observer of gay culture that the homosexual community emphasizes sex and promotes promiscuity, which in turn leads to notoriously short-lived relationships, casual and risky sex, drug use, and untold health problems.

Speaking among themselves, gays are generally quick to acknowledge their culture's celebration of unrestrained sexual expression. (As one man described it to me, he was once scolded for his abstinence, "Quit screaming gay if you're not going to put out." Then there is the gay advocacy group "Sex Panic," which considers anonymous sex with multiple partners to be a defining value of gay culture.<sup>12</sup>) It is only when they attempt to propagandize conservative heterosexuals that gay apologists sometimes profess that homosexuals are no more promiscuous as a group than heterosexuals. (At other times, they take a completely different tack, freely admitting to gay promiscuity but insisting that it is the non-promiscuous who are sexually repressed and thus mentally or emotionally unhealthy.)

So let's look at the facts. A.P. Bell and M.S. Weinberg, in a 1978 study<sup>13</sup> found that:

- 74% of male homosexuals reported having more than 100 partners during their lifetime, 43% more than 500 partners, and 28% more than 1,000.
- 75% reported that more than half their partners were strangers.
- 65% reported that they had sex with more than half their partners only once.

A study of several hundred male couples published in

1984<sup>14</sup> found that:

- 87% of those who had been together less than a year were non-monogamous
- 91% of those who had been together more than five years were non-monogamous.

A Kinsey Institute study<sup>15</sup> published in 1990 found that:

- 79% of homosexual male couples reported at least one instance of non-monogamy in the previous year, compared to 10% among married heterosexuals and 23% among cohabitating heterosexuals.

In 1984, gay researchers McWhirter and Mattison published a study of 156 male couples in relationships that had lasted between one and 37 years. Only seven of those couples (4%) were monogamous, and all seven had been together less than five years.<sup>16</sup> More recently, surveys published in 2001 of more than 13,000 gay men in Seattle showed the number reporting six or more partners in the previous 12 months increased from 45 percent in 1994 to 58 percent in 2000.<sup>17</sup>

Drug abuse in the homosexual community is likewise well documented. A study published in the *Journal of the National Cancer Institute* in 1989<sup>18</sup> found that:

- 89% of gays used marijuana (compared to 25% of heterosexuals)
- 72% used poppers, an illicit nitrate inhalant used as a sexual stimulant (compared to 2% of heterosexuals)
- 50% used cocaine (compared to 6% of heterosexuals)
- 50% used LSD (compared to 3% of heterosexuals) and 33% used barbiturates (compared to 9% of heterosexuals).

A study published in the *American Journal of Epidemiology* in 1992<sup>19</sup> found that, between 1985 and 1988:

- 80% of 481 homosexual men studied had used marijuana
- 70% had used poppers
- 60% had used cocaine
- 30% had used amphetamines
- and 20% had used LSD

And a study published in the *British Journal of Addiction* in

*continued*

1992<sup>20</sup> found:

- 58 times as much use of poppers among gays as among the general population
- 4 times as much tranquilizer use
- 3.6 times as much marijuana use
- 2.3 times the cocaine use and 1.5 times the alcohol use.

The health consequences of all this indiscriminate sex and illicit drug use are all too predictable. Surveys published in 2001 of gay men in Miami found 16% of 23 to 29 years olds and 34% of those over 29 were HIV positive.<sup>21</sup> Meanwhile, a six-city study by the Center for Disease Control and Prevention in 2001 found 30% of gay black men in the 23-to-29 age group were HIV positive, as were 12% of 23-to-29 year-olds overall.<sup>22</sup>

But the health risks go well beyond HIV and AIDS to include all forms of sexually transmitted diseases as well as intestinal diseases, hepatitis, anal cancer and rectal trauma. Rowan and Gillette's *Gay Health Guide* devotes eight chapters to common diseases among male homosexuals. Studies have found:

- an estimated 75% of gay men have a history of at least one sexually transmitted disease<sup>23</sup>, compared to 17% of the general population<sup>24</sup>
- 65% have a history of hepatitis B<sup>25</sup>
- 25% or more report a history of syphilis or gonorrhea<sup>26</sup>

Putting all these numbers into perspective, Thomas Schmidt summarizes, in his book *Straight & Narrow?* (p. 127):

"Suppose you were to move into a large house in San Francisco with a group of 10 randomly selected homosexual men in their mid-thirties. According to the most recent research from scientific sources, whose authors are without exception either neutral or positive in their assessment of homosexual behavior, and with the use of lower numbers where statistics differ, the relational and physical health of the group would look like this.

"Four of the 10 men are currently in relationships, but only one of those is faithful to his partner, and he will not be within a year. Four have never had a relationship that lasted more than a year, and only one has had a relationship that lasted more than three years. Six are having sex regularly with strangers, and the group averages almost two partners per person per month. Three of them occasionally take part in orgies. One is a sado-masochist. One prefers boys to men.

"Three of the men are currently alcoholics, five have a history of alcohol abuse, and four have a history of drug abuse. Three currently smoke cigarettes, five regularly use at least one illegal drug, and three are multiple drug users. Four have a history of acute depression, three have seriously contemplated suicide, and two have attempted suicide. Eight have a history of sexually transmitted diseases... At least three are HIV-infected, and one has AIDS."

All of this has led one health professional to ask: "Can anyone refute that increased morbidity and mortality is an unavoidable result of male-with-male sex – not to mention the increased rates of alcoholism, drug abuse, depression, suicide and other maladies that so often accompany a homosexual lifestyle? ...My primary question is: *why isn't homosexuality considered a disorder on the basis of its medical consequences alone?*"<sup>27</sup>

When we look at what all this "unparalleled freedom" and "unbridled liberty and diversity" have brought the GLBT community, we have to ask Wayne Besen: Just **who** is it really who has decimated their lives through **irresponsible** choices? Who is it really who can't handle **freedom**?

And how can the desire to avoid a culture of **promiscuity**, infidelity, drugs and health problems be **considered** anything but sane?

#### **Allegation: They're Forcing Change Therapies on the Unwilling**

But Besen thinks he knows better what **truly** motivates people to seek change.

"People go to these 'doctors' **only** because they are made to feel terrible about themselves," he writes. "They are convinced that they will go to hell if they do not change, and many believe that **suicide** may be the only alternative. They are **lied to** – told that there are no happy, productive gay people and that the so-called gay lifestyle leads to **only 'death and destruction.'** These dejected individuals also fear that coming out will mean a **loss of status**, family, friends, and church. *Under such duress, how can one argue that these people are freely making the choice to change?*" (p. 142, emphasis added).

Since Besen has proven that he believes "these people" are weak minded and mentally unstable, it should be no surprise that he also thinks they are not capable of freely making the choice to change. In fact, he sees "Nicolosi and his cohorts [using] deceit and guile to bully desperate people into reparative therapy" (p. 141). (One imagines Nicolosi donning a motorcycle jacket and beating up gays in West Hollywood until they beg for mercy by agreeing to **pay for** unwanted therapy.)

This may be one of Besen's most ridiculous claims in the entire book: that people are somehow being forced to pursue change against their will. One wonders: How would that even be possible, short of cult kidnapping and brainwashing? But Besen insists:

"My opinion on reparative therapy ... [calls for] the discontinuation of forced medical 'treatments' designed to 'cure' homosexuality" (p. 142).

"There is also the matter of coercion and forced participation. Although *I have found no evidence of adults being forced to attend therapy*, adolescents – and even toddlers – are often dragged into Nicolosi's clutches against their will" (p. 142, *emphasis added*).

"Unfortunately, bad science has not stopped Nicolosi from convincing parents to force kids into his programs" (p. 142).

Surely, if he knew of any such cases of forced therapy, Besen wouldn't hesitate to document them. The best he can offer is anecdotes of teenagers being escorted by their parents to a reparative therapy conference, or asked to read ex-gay literature – hardly cause for court intervention in family life. But yes, Nicolosi does offer counseling on issues related to gender identity disorder in children and youth<sup>28</sup> – a diagnosis that has long been recognized by the American Psychiatric Association (although it is under heavy attack by the gay lobby).

The fact is that the large majority of people pursuing change are in their twenties and thirties at the time they begin the change effort. (In the Spitzer study, the average age of interviewees – who had maintained a heterosexual shift for at least five years – was 43.) Relatively few are teenagers or living under their parents' roof. A significant number are married, with children. (Twenty percent of Spitzer's subjects were married before beginning therapy.) They have matured enough and struggled, often silently, long enough to know what they want in life and what they don't want. (Three-quarters of Spitzer's subjects were college graduates.)

In fact, in the People Can Change online support groups, members often express frustration at the *lack of support* for their change efforts – from the psychological community, certainly, but also at times from family members, peers, fellow church or synagogue members and even pastors and rabbis. They tire of people telling them to "just accept and enjoy" something they consider to be a cancer in their lives. Recognizing that "gay" is not who they truly "are," that these unwanted desires, in their case, largely come from unmet emotional needs, they diligently search the country for the too-rare professional who is knowledgeable and experienced enough to help them in the way they want to be helped.

As morally aghast as Besen is at the fantasy that some people are forced into reparative therapy against their will, he sees nothing at all immoral with outlawing reparative therapy for those who freely seek it. In fact, that is what Besen argues for – an outright ban. Never mind what the client wants. Never mind that reparative therapy is often successful. Never mind that many say they have benefited from it. If it isn't pro-gay, it should go away.

Besen asks rhetorically, "Would these people want to change if they were not subject to religious persecution, legally sanctioned discrimination, and social condemnation – if not outright physical danger?" (p. 142).

The answer, inevitably, is an emphatic yes – as a matter free will by those who are strong-minded enough, mentally stable enough, and determined to create for themselves constructive, moral and fulfilling lives that are congruent with their own, deeply held values.

### **Allegation: Reparative Therapy Theories Have Been Discredited and Disproved**

For as many times as Besen beats this drum throughout his book, you would think he would provide some evidence. He repeatedly labels reparative therapy principles and research as "old, outdated ideas" (p. 136), "outlandish, unproven therapies" (p. 171), with "anachronistic data" (p. 131), "outdated notions" (p. 132) and "outdated psychoanalytic techniques" (p. 172). He claims "reparative therapy is rooted in outdated and disproved psychoanalytic thought" (p. 183) and the so-called "discredited works of Bieber, Socarides, Moberly and Nicolosi" (p. 172).

Yet Besen offers virtually nothing in the way of evidence that the research and principles supporting reparative therapy have actually been disproved or discredited.

He claims that findings from Dr. Irving Bieber's 1962 study of 106 homosexual clients (which found, for instance, that all 106 men experienced profound disturbance in their relationship with their fathers) "could not be replicated and were disproved by more diligent researchers" (p. 127). But Besen doesn't offer so much as a footnote to support this claim.

He writes that "Dr. Charles Silverstein released an exhaustive survey (in the early 1970s) that showed that previous research on homosexuality was either skewed or biased" (p. 130). Again, he offers not so much as a footnote to reference this supposedly exhaustive survey. And he certainly doesn't bother to mention, lest it should bias the reader, that this is the same Charles Silverstein who wrote the illustrated, erotic handbook, *The Joy of Gay Sex: An Intimate Guide for Gay Men to the Pleasures of a Gay Lifestyle*.

That's it. That is all Besen can do to back up his repeated claims of "outdated ideas" and "discredited works." In

contrast, in his seminal work, *Reparative Therapy of Male Homosexuality: A New Clinical Approach* (1991), Dr. Joseph Nicolosi references no fewer than 300 books, academic studies and journal articles as he lays out the core principles of reparative therapy. These principles, and the basic profile of the "typical" reparative therapy client, have been borne out in the clinical experience of hundreds of therapists and counselors working with thousands of clients over the years. And as we've seen in the surveys and clinical studies of thousands who have participated in these therapies, they work. Not always, and not perfectly, but much of the time they produce the desired outcome.

Reparative therapy has not been discredited. It has simply fallen out of favor since the 1973 vote by the board of the American Psychiatric Association to remove homosexuality from its official encyclopedia of mental disorders. What Besen sees as outdated is simply out of fashion. The research hasn't been disproved; it has simply been disenfranchised by the political correctness of the times.

### **Allegation: Change Efforts Cause Psychological Harm**

"The ex-gay ministries can be a soul-shattering experience that leads to low self-esteem, depression and sometimes suicide," Besen claims (p. 59).

He quotes several people who failed to change, who felt like they had wasted time and money, and that the whole effort only prolonged an inevitable "coming out." These are unfortunate cases, but what do they prove? Only that that particular therapy or ministry was not helpful or appropriate for those particular individuals at the time. It doesn't prove that they are not helpful to or appropriate for anyone ever – any more than the grumblings of a few lapsed Catholics would "prove" that Catholicism is harmful to all. Especially when there is significant evidence of others who benefit.

Dr. Robert Spitzer found no evidence of harm among the sample he surveyed on their experience in reparative therapy and ex-gay ministries. He has stated, "To the contrary, they reported that it was helpful in a variety of ways beyond changing sexual orientation itself."<sup>29</sup>

The NARTH survey of 882 men and women who had pursued change said the therapy was beneficial to their mental health and helped them cope with and reduce their homosexual attractions. They also overwhelmingly rated their experience as positive on a range of variables, including self-acceptance, trust of the opposite sex, self-esteem, emotional stability, relationship with God, and depression. Only 7% of survey respondents said they were doing worse than before the therapy on three or more of 17 measures of psychological well-being.<sup>30</sup>

In fact, if there is one consistency in the scores of published

testimonials by those who have succeeded at change, it is the universal claim those that their lives are better now:

- "Tremendous rewards followed – fulfilling friendships with other men, better health and greater confidence with my body and emotional freedom and power."<sup>31</sup>

- "The journey has been the hardest thing I've ever done, but it was worth it. Today, I am a different man – stronger, healthier, happier, more loving, more confident, more mature. I am a better father, a better husband, a better friend, and a more devoted son of God. I would never trade the peace, growth and healing I have experienced for anything in the world."<sup>32</sup>

- "I am at the point in my life now where homosexuality is no longer a struggle. I'd have to go through a lot of barricades – psychologically, spiritually and emotionally – to get to the point of acting on any temptation. I am very fulfilled in my life. I no longer want homosexuality in my life. I no longer need it. Today, I identify with other heterosexual men as my peers, my brothers and my equals. I am in love with my wife. I love being a husband and a daddy."<sup>33</sup>

- "Finally, I am at peace with myself as a man. I am at peace in the world of men, grounded and connected. I have finally experienced unconditional love – from my wife, my mother, my therapist, my 'adopted' father and brothers and family. These are men and women who know my secrets and love me more, not less. I no longer yearn for sexual experience in order to feel love."<sup>34</sup>

- "I now feel I have successfully transitioned from gay and bisexual to straight. The change is immensely satisfying and rewarding. I started dating women again because I wanted a healthy relationship that would last. I will settle down with one, eventually. I am a stronger man now, better prepared to be in a close relationship, with more to give as a whole man."<sup>35</sup>

- "More and more, I was coming in to therapy sessions reporting joy instead of hurt, anger or fear, sharing my increased sense of identity and power as a man, reporting on new friendships I was building and new risks I was taking to test my increased inner strength....Now I could be in honest relationships with others. I could make friends. I could ask for help. I could be real. And more than anything else, I could love. I had learned to give love and receive love from other men as my brothers, and trust them with my heart. In this, I truly had found what I had been looking for all my life."<sup>36</sup>

These and countless other personal stories of change do not "prove" that reparative therapy and other change efforts are right for everyone or will work for everyone. But they do disprove Besen's thesis: that they work for no one and are harmful to everyone. **Virtually everything he**

has to contribute to the debate on the value and efficacy of sexual orientation change is politically motivated propaganda in the service of that discredited and disproved thesis. ■

### Endnotes

<sup>1</sup> Source: New Direction Ministries, "Homosexuality and the Possibility of Change" project, Toronto, Canada. [http://www.newdirection.ca/a\\_change.htm](http://www.newdirection.ca/a_change.htm) and <http://www.newdirection.ca/research/index.html>

<sup>2</sup> Nicolosi, J., Byrd, A.D., and Potts, R.W., "Retrospective Self-Reports of Changes in Homosexual Orientation: A Consumer Survey of Conversion Therapy Clients," *Psychological Reports*, June 2000, <http://www.newdirection.ca/research/narth1.htm>

<sup>3</sup> <http://www.newdirection.ca/research/narth2.htm>

<sup>4</sup> <http://www.newdirection.ca/research/spitzer.htm>

<sup>5</sup> Source: Jones, Stanton L., and Yarhouse, Mark A.,

### Summary of Published Research and Outcomes\*

Year	Name	Published	# subjects	# confirmed Hetero. Shift	Kinsey 6/5 to Kinsey 0/1 Shift*
1952	Poe, John S.	Psychoanalytic Review	1	1	1
1958	Hadfield, J.A.	British Medical Journal	9	6	6
1959	Ellis, Albert	Journal of Clinical Psychology	1	1	1
1962	Bieber, et al	Book: "Homosexuality: A Psychoanalytic Study"	106	29-43	14
1965	Mayerson & Lief	Book: "Sexual Inversion: The Multiple Roots of Homosexuality"	19	9	6
1966	Mintz	Journal of Consulting Psychology	10	3	3
1966	Hadden	International Journal of Group Psychology	32	12	12
1967	Kaye	Archives of General Psychiatry	?	?	--
1969	Wolpe	Book: The Practice of Behavior Therapy	1	1	1
1969	Wallace	Psychoanalytic Review	1	1	1
1970	Hatterer	Book: Changing Homosexuality in the Male	143	49-67	12
1973	Liss & Weiner	American Journal of Psychotherapy	1	1	1
1973	McCrary	Journal of Behavioral Therapy and Experimental Psychiatry	1	?	--
1973	Barlow and Agras	Journal of Applied Behavior Analysis	2	2	1
1974	Canton-Dutari	Archives of Sexual Behavior	54	44-49	15
1975	Freeman and Meyer	Behavior Therapy	11	9	4
1976	Callahan	Book: Counseling Methods	1	1	1
1978	Socarides	Book: Homosexuality	45	20	20
1979	Masters & Johnson	Book: Homosexuality in Perspective	67	29	12
1980	Pattison & Pattison	American Journal of Psychiatry	11	11	5
1980	Birk	Book: Homosexual Behavior: A Modern Reappraisal	29	18	18
1986	Van den Aardweg	Book: On the Origins and Treatment of Homosexuality	101	37	5
1992	Shechter	International Forum of Psychoanalysis	1	1	1
1993	Golwyn & Sevlie	Journal of Clinical Psychiatry	1	1	1
1994	Berger	American Journal of Psychotherapy	1	1	1
1994	MacIntosh	Journal of the American Psychoanalytic Association	1215	276	276
1999	Schaeffer	Journal of Psychology and Theology	140	?	--
2000	Schaeffer	Journal of Psychology and Christianity	248	?	--
Total			2252	563 (25%)	418 (19%)

\*Data collected by "Homosexuality and the Possibility of Change Project," New Direction Ministries, Toronto

continued

*Homosexuality: The Use of Scientific Research in the Church's Moral Debate*, InterVarsity Press, 2000, p. 123, 131

<sup>6</sup> Nicolosi, J., *Healing Homosexuality: Case Studies of Reparative Therapy*, (Northvale, NJ: Jason Aronson, 1993)

<sup>7</sup> Davies, B. and Gilbert, L., *Portraits of Freedom: 14 People Who Came Out of Homosexuality* (Downers Grove, IL, InterVarsity Press, 2001)

<sup>8</sup> See, for instance:

<http://couragerc.net/MemberTestimonies.html>,

<http://ourworld.compuserve.com/homepages/rossuk/h-testim.htm>,

<http://www.anotherway.com/menus/pages.html>,

<http://www.evergreen-intl.org/testimony.ivnu>,

[http://www.exodus-international.org/testimonials\\_left\\_HomoSexuality.shtml](http://www.exodus-international.org/testimonials_left_HomoSexuality.shtml),

<http://www.freetobeme.com/real.htm>,

<http://www.jonahweb.org/html/ourstories.phtml>,

<http://www.narth.com/menus/interviews.html>,

<http://www.newdirection.ca/stories.htm>,

<http://www.oneby1.org/testimonies.htm>,

[http://www.peoplecanchange.com/About\\_Us.htm](http://www.peoplecanchange.com/About_Us.htm),

<http://www.pfox.org/testimonies.html>

<http://www.stonewallrevisited.com/menus/pages.html>,

<http://www.transformingcong.org/Testimony.htm>,

<http://www.witnessfortheworld.org/Testimonies.html>

<sup>9</sup> Throckmorton, Warren, "Initial empirical and clinical findings concerning the change process for ex-gays," from *Professional Psychology: Research & Practice*, June 2002.

<sup>10</sup> Gonsoriek, J. C., Sell, R. L., & Weinrich, J. D. (1995). Definition and measurement of sexual orientation. *Suicide and Life Threatening Behavior*, 25, 40-51, as quoted in Throckmorton, W., "Initial empirical and clinical findings concerning the change process for ex-gays," *Professional Psychology: Research & Practice*, June 2002

<sup>11</sup> <http://www.newdirection.ca/research/spitzer.htm>

<sup>12</sup> <http://www.managingdesire.org/sexpanic/sexpanic-pressrelease.html>

<sup>13</sup> Bell, A.P., and Weinberg, M.S., *Homosexualities: A Study of Diversity Among Men and Women* (New York: Simon & Schuster, 1978), as quoted in Schmidt, Thomas E., *Straight & Narrow?* (InterVarsity Press 1995), p. 106

<sup>14</sup> J. Harry, *Gay Couples* (New York: Praeger Books, 1984), as quoted in Schmidt, Thomas E., *Straight & Narrow?* (InterVarsity Press 1995), p. 107

<sup>15</sup> Blumstein, P. and Schwartz, P., "Intimate

### Summary of Published Research (Homosexuality and the Possibility of Change Project)

Year	Name	Published	# subjects	# positive outcomes
1954	Eliasberg	Group Psychotherapy	6	3
1958	Hadden	American Journal of Psychiatry	3	1
1960	Beukenkamp	Archives of General Psychiatry	1	1
1960	Finney	Journal of the Society of Therapists	3	2
1961	Litman	International Journal of Group Psychotherapy	1	In process
1965	Munzer	Topical Problems of Psychotherapy	18	5
1966	Stone, Schengber & Seifried	International Journal of Group Psychotherapy	1	In process
1967	MacCulloch & Feldman	British Medical Journal	35	10
1967	Singer & Fischer	International Journal of Group Psychotherapy	8	4
1970	Johnsgard & Schumacher	Psychotherapy: Theory, Research and Practice	5	0
1970	McConaghy	British Journal of Psychiatry	40	10
1970	Truax, Moeller and Tourney	Journal of the Iowa Medical Society	20	In process
1971	Pittman & DeYoung	International Journal of Group Psychotherapy	6	3
1971	Truax & Tourney	Diseases of the Nervous System	30	20
1972	Covi	Psychotherapy and Psychosomatics	30	In process
1974	Birk	Journal of Sex and Marital Therapy	66	14
1984	Schwartz & Masters	American Journal of Psychiatry	54	35
Total			327	108 (33%)

Relationships and the Creation of Sexuality," in *Homosexuality / Heterosexuality: Concepts of Sexual Orientation*, ed. D.P. McWhirter, S.A. Sanders and J.M. Reinishch, Kinsey Institute Series 2 (New York: Oxford University Press, 1990), as quoted in Schmidt, Thomas E., *Straight & Narrow?* (Intervarsity Press 1995), p. 107-108

16 McWhirter, D. and Mattison, A. *The Male Couple: How Relationships Develop*, Englewood Cliffs, NJ: Prentice-Hall, 1984, as quoted in Nicolosi, Joseph, *Reparative Therapy of Male Homosexuality*, Northvale, NJ: Jason Aronson, 1991

17 "Era of Decline of U.S. AIDS Cases May Be Over," *Washington Post*, August 13, 2001

18 Holly, E.A., et al., "Anal Cancer Incidence," *Journal of the National Cancer Institute* 81 (1989) as quoted in Schmidt, Thomas E., *Straight & Narrow?* (Intervarsity Press 1995), p. 111

19 Seage, G.R., III, et al., "The Relation Between Nitrite Inhalants, Unprotected Anal Intercourse and the Risk of Immunodeficiency Virus Infection," *American Journal of Epidemiology* 135 (January 1, 1992), as quoted in Schmidt, Thomas E., *Straight & Narrow?* (Intervarsity Press 1995), p. 111

20 Myers, T., et al., "HIV, Substance Use and Related Behavior of Gay and Bisexual Men," *British Journal of Addiction* 87 (February 1992), as quoted in Schmidt, Thomas E., *Straight & Narrow?* (Intervarsity Press 1995), p. 203

21 "Era of Decline of U.S. AIDS Cases May Be Over," *Washington Post*, August 13, 2001

22 "Study in Six Cities Finds HIV in 30% of Young Black Gays," *New York Times*, Feb. 6, 2001

23 Bell, A.P., and Weinberg, M.S., *Homosexualities: A Study of Diversity Among Men and Women* (New York: Simon & Schuster, 1978), as quoted in Schmidt, Thomas E., *Straight & Narrow?* (Intervarsity Press 1995), p. 118, 122

24 Laumann, E.O., et al., *Social Organization of Sexuality* (Chicago: University of Chicago Press, 1994), as quoted in Schmidt, Thomas E., *Straight & Narrow?* (Intervarsity Press 1995), p. 122

25 Keefe, E.B., "Clinical Approach to Viral Hepatitis in Homosexual Men," *The Medical Clinics of North America* 70, no. 3 (1986), as quoted in Schmidt, Thomas E., *Straight & Narrow?* (Intervarsity Press 1995), p. 121

26 Holly, E.A., et al., "Anal Cancer Incidence," *Journal of the National Cancer Institute* 81 (1989), and Musick, L., et al., "AIDS and Sexual Behaviors Reported by Gay Men in San Francisco," *American Journal of Public Health* 75 (1985), as quoted in Schmidt, Thomas E., *Straight & Narrow?* (Intervarsity Press 1995), p. 120

27 Melonakos, Kathleen, M.A., R.N., Delaware Family Foundation, *NARTH Bulletin*, "Why Isn't Homosexuality Considered a Disorder on the Basis of Its Medical Consequences," August 2002, [http://www.narth.com/docs/consequences.html#\\_ednref5](http://www.narth.com/docs/consequences.html#_ednref5)

28 See Nicolosi, J. and Nicolosi, L.A., *A Parent's Guide to Preventing Homosexuality*, Intervarsity Press, 2002

29 <http://www.narth.com/docs/evidencefound.html>

30 Nicolosi, J., Byrd, A.D., and Potts, R.W., "Retrospective Self-Reports of Changes in Homosexual Orientation: A Consumer Survey of Conversion Therapy Clients," *Psychological Reports*, June 2000

31 [http://www.peoplecanchange.com/About\\_Us\\_Matheson.htm](http://www.peoplecanchange.com/About_Us_Matheson.htm)

32 [http://www.peoplecanchange.com/About\\_Us\\_Park.htm](http://www.peoplecanchange.com/About_Us_Park.htm)

33 [http://www.peoplecanchange.com/About\\_Us\\_Armelli.htm](http://www.peoplecanchange.com/About_Us_Armelli.htm)

34 [http://www.peoplecanchange.com/About\\_Us\\_John.htm](http://www.peoplecanchange.com/About_Us_John.htm)

35 [http://www.peoplecanchange.com/About\\_Us\\_Tom.htm](http://www.peoplecanchange.com/About_Us_Tom.htm)

36 [http://www.peoplecanchange.com/About\\_Us\\_Ben\\_Therapy.htm](http://www.peoplecanchange.com/About_Us_Ben_Therapy.htm)

### Part Time Position Available

NARTH seeks a dynamic, organized, part-time Executive Projects Coordinator with PR skills. Help us develop new strategies to put NARTH in the public eye; computer literate, self-starter, detail-oriented; writing ability is important. Work closely with NARTH President. Work out of your own home.

Salary offered is \$15 to \$25 an hour depending on qualifications.

Please fax resume to: