

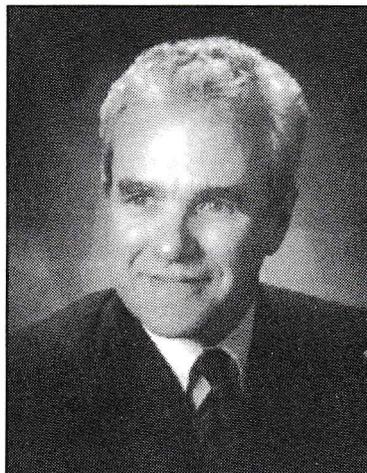
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Don't Forsake Homosexuals Who Want Help

by

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Suppose that a young man, seeking help for a psychological condition that was associated with serious health risks and made him desperately unhappy, were to be told by the professional he consulted that no treatment is available, that his condition is permanent and genetically based, and that he must learn to live with it. Perhaps this young man, unwilling to give up hope, sought out other specialists only to receive the same message: "Nothing can be done for you. Accept your condition."



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How would this man and his family feel when they discovered years later that numerous therapeutic approaches have been available for his specific problem for more than 60 years? What would be his reaction when informed that, although none of these approaches guaranteed results and most required a long period of treatment, a patient who was willing to follow a proven treatment regime had a good chance of being free from the condition? How would this man feel if he discovered that the reason he was not informed that treatment for his condition was available was that certain groups were, for political reasons, pressuring professionals to deny that effective treatment existed?

Every day young men seek help because they are experiencing an unwanted sexual attraction to other men, and are told that their condition is untreatable. It is not surprising that many of these young men fall into depression or despair when they are informed that a normal life with a wife and children is never to be theirs.

This despair can lead to reckless and life-threatening actions. Many young men with homosexual inclinations, feeling their lives are of little value, are choosing to engage in unprotected sex with strangers. Epidemiologists are well aware that the number of new HIV infections among young men involved in homosexual activity is rising at an alarming rate; within this population, the "safer sex" message is falling on deaf ears. One recent study revealed that 38% of homosexual adolescents had engaged in unprotected sex in the previous six months.

Young men and the parents of at-risk males have a right to know that prevention and effective treatment are available.

They have a right to expect that every professional they consult will inform them of all their therapeutic options and allow them to make their own choices based on the best clinical evidence. A variety of studies have shown that between 25% and 50% of those seeking treatment experienced significant improvement. If a therapist feels for whatever reason that he cannot treat someone of this condition, he has an obligation to refer the patient to someone who will.

Also, these young men and their parents have the right to know that, contrary to media propaganda, there is no proven biological basis for homosexuality. A November 1995 article in *Scientific American* pointed out that the much-publicized brain research by Simon LeVay has never been replicated, and that Dean Hamer's gene study has been contradicted by another study.

The truth is that the clinical experience of many therapists who work with men struggling with same-sex attractions indicates that there are many causes and various manifestations of homosexuality. No single category describes them all, but the disorder is characterized by a constellation of symptoms, including excessive clinging to the mother during early childhood, a sense that one's masculinity is defective, and powerful feelings of guilt, shame and inferiority beginning in adolescence.

If the emotional desire for another man is primarily a symptom of the failure to develop a strong masculine identity, then a man's unconscious desire to assume the manhood of another male may be more important than the sexual act. The goal of therapy in such cases is to help the client understand the various causes of his feelings and to strengthen his masculine identity. It has been our clinical experience that as these men become more comfortable and confident with their manhood, same-sex attractions decrease significantly. Eventually, many find the freedom they are seeking and are able to have normal relationships with women.

Help is available for men struggling with unwanted homosexual desires. The National Association for Research and Therapy of Homosexuality offers information for those interested in understanding the various therapeutic approaches to treatment. In addition, a number of self-help groups have sprung up to offer support to those who suffer from this problem.

As we grieve for all those lives so abruptly ended by AIDS, we would do well to reflect that many of the young men who have died of AIDS have sought treatment for their homosexuality and were denied knowledge and hope. Many of them would be alive today if they had only been told where to find the help they sought. ■

