

When Dissent is Stifled: The Same-Sex Marriage and Right-to-Treatment Debates

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Professor Lynn Wardle

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The following article is an excerpt of his presentation at the 1999 NARTH Conference. The full text of this paper appears in the 1999 NARTH Collected Papers, where the reader will obtain footnoted references which were included in the original article.

In this paper, Professor Wardle outlines the problems faced by NARTH therapists in treating dissatisfied homosexuals, as well as the problems faced by advocates of traditional marriage within his own profession as a lawyer. He calls on NARTH members to have the courage to speak up for the silent majority—citing, by way of encouragement, a personal experience from his own youth during a stint in the Army.

“It is absolutely imperative that all of you accept, as your personal responsibility, the duty of writing and raising your voice,” Professor Wardle warns the reader. “You must not let these issues pass by uncontested. If you do, by your silence, you have assented to these positions.”

“Many of you will work in obscurity, unheralded, unsung, with little peer support among your professional colleagues,” he acknowledges. “But you will leave a magnificent legacy to your patients, to your posterity, and to your profession.”

In many professions, including the law and therapeutic professions, there exists an intellectual taboo against expressions unsympathetic to gay-lesbian prerogatives.

It is simply unacceptable in many academic circles to openly oppose same-sex marriage or adoption by gay and lesbian couples. Tolerance of “gay rights” is a litmus test for academic credibility. Opposition to same-sex marriage is treated as proof of narrow-mindedness, dangerous fundamentalism, or an unprofessional mixing of personal moral/religious preferences and law.

In the current academic climate, it is difficult to engage in research about homosexual orientation or lifestyle consequences that does not start with an assumption and end with a result that supports gay/lesbian interests.

The consequences of publicly expressing arguments against gay-lesbian family status or similar social objectives, including same-sex marriage, can be very unpleasant and potentially damaging to scholars. Members of NARTH certainly understand the price one may have to pay.

And you are not alone. I can tell you from my own experience of some incidents that have been unpleasant.

Getting the Silent Treatment

I was speaking at a meeting of the family law section of the American Association of Law Schools, an annual conference that draws about 3,000 law teachers every year. In this session, there was a panel discussion from a number of different points of view considering developments relating to the redefinition of the family. I was invited to participate to provide the point-of-view that same-sex marriage and family relations are not a good thing.

I raised concerns about same-sex parenting from the perspective of the children, and I questioned whether same-sex couples contributed as much to society as traditional married couples do, for the purpose of demonstrating that there was a justification for distinguishing between the two.

One lesbian law professor got up during the question period and began literally screaming at me. She and her partner were raising a child, and she was extremely angry at my point-of-view. I was surprised and disappointed by her behavior, but I was not intimidated. However, I can assure you that it had a very chilling effect upon the audience. After her embarrassing outburst, there was no one willing

to express a point of view critical of gay or lesbian marriage or child-rearing, for fear that they too would be subjected to that kind of outburst.

On another occasion, I was invited at a law school in the Midwest to a conference about new constitutional developments in family law. Again, I participated on a panel and again, when the question of same-sex marriage arose, I responded with a criticism. I said, "What do same-sex marriages contribute to society that is comparable to the tremendous contribution made by traditional marriages of a man and a woman?" That provoked quite a reaction from many of the gays and lesbians in the audience and from a couple of co-panelists who were gay or gay-sympathizers.

At lunch immediately after that session, I had the interesting experience of dining alone. That is, not a single other person in the conference would sit at my table. After about ten minutes, a conservative faculty member of the host institution came and sat by me and said, "Isn't this remarkable? There is an obvious effort to shun you. I'm sorry for it and apologize about it." Again, I wasn't intimidated by it and I thought it was really quite an interesting sociological phenomenon to observe.

When I came up to people afterward, they would avert their eyes, they did not want to make contact, and they did not want to talk to me. (Most were lesbians or lesbian sympathizers.) A friend of mine who is a respected family law professor, who was also invited to participate in the conference, came to me afterward in a darkened hallway and said "Lynn, I agree completely with what you had to say. Completely!" But he was unwilling to say that openly in the meeting for fear of the intimidation effect—particularly, the outrage and hostile treatment that I had experienced.

Many Disciplines Are Affected

Many people in other disciplines have had worse experiences than I have. Among family studies professors and those in the social sciences, I have the impression that the same kind of opposition is encountered. In a setting in which respect for minority views is less a part of the professional tradition, there is overwhelming support for same-sex marriage and same-sex family styles, and little tolerance for those who disagree.

Recently I participated in a three-day international conference at Queen's University in Ontario, Canada on the subject of same-sex domestic partnerships. There were leading scholars there from around the world, but of all the speakers who participated, I was the only speaker who asserted that same-sex domestic partnership was contrary to public policy. Every other speaker, except one, very strongly supported same-sex domestic partnership.

There is an even more blatant effort to suppress therapeutic professional services to gays and lesbians who seek to change their sexual orientation or behavior. For many years, advocates of gay and lesbian lifestyles have criticized the provision of such counseling. Recently, this has taken an ugly turn and now there are efforts to prohibit such professional counseling and to impugn the professional integrity and credibility of those who do, or even to punish them.

Efforts to Discourage Treatment

Even more ominous have been the efforts to professionally isolate and punish therapists, counselors and other professionals who offer services to aid persons desiring to escape homosexual lifestyles or attractions. For example, The Washington State Psychological Association published a policy statement "discouraging psychologists from any participation in sexual orientation conversion therapy."

Likewise, the Utah Chapter of the National Association of Social Workers has formally taken a position "discouraging social workers from providing treatments designed to change sexual orientation, and from referring to practitioners or programs that claim to do so."

The American Psychological Association reportedly adopted a resolution on August 14, 1997, that "warned psychologists not to dupe patients into thinking that being gay is sick." Deb Price, news editor at the Washington bureau of the *Detroit News* and a columnist published nationally, reported in 1997 that claims of damage done by reparative therapy "might lead the APA [American Psychological Association] to brand such therapy unethical . . ."

An article in *Counseling Today* (December 1998) was entitled "Counselors say conversion therapy claims are groundless and prejudicial."

Frontiers published an article entitled "Silencing the Quacks." In England, Outrage!, a British support group for lesbians and gays, asked the Royal College of Psychiatrists to ban the use by its members "of all therapies that attempt to cure homosexuality."

The Psychiatric Association Statement

Probably the best-known example of professional pressure to suppress such mental-health services was the adoption by the Board of Trustees of the American Psychiatric Association in December 11, 1998, of its Position Statement on Psychiatric Treatment and Sexual Orientation. This was publicized nationally as a clear repudiation of professionals who offer services to aid persons desiring to escape homosexual lifestyles or attractions. Thus the *L.A. Times* headlined its story on December 12, 1998 as:

“Psychiatrists Reject Therapy to Alter Gays.” The lead sentence of that Associated Press story reported that the APA board statement said such treatment “can cause depression, anxiety and self-destructive behavior.”

In fact, the Position Statement on Psychiatric Treatment and Sexual Orientation adopted by the American Psychiatric Association Board of Trustees, December 11, 1998, is not nearly as harsh or definitive as some gay activists and their journalistic sympathizers suggest.

The first paragraph of this statement notes that homosexual orientation has been removed from the DSM. The next paragraph states that the association takes no position on treatment to help gays or lesbians change their sexual orientation, but notes that a study paper found no studies confirming that such therapies are effective. The third paragraph tries to be balanced by being schizophrenic. It notes “potential risks” of reparative therapy are “great,” notes that “many” gays have been told erroneously that they can never achieve satisfaction without changing, and condemns treatment based on the assumption that homosexual orientation is a mental disorder—but, significantly, it concedes that “there may be appropriate clinical indication for attempting to change sexual behaviors.”

In the final paragraph, the psychiatrists’ statement observes that other professional associations have “made statements against reparative therapy,” but it stops short of joining them. Rather, it notes that it has already expressed its opposition to discrimination, prejudice and unethical treatment with reference to sexual orientation.

Misinterpretations of the A.P.A.’s Position

In fact, that is the key point; the key sentence in the statement affirms that treatment for gays or lesbians who want to change their sexual orientation *may* be appropriate. *But this point is buried* among many other sentences designed to placate and comfort gay and lesbian activists who bitterly oppose such treatments. Thus, sadly, the president of the psychiatrists’ group commented (inaccurately but politically correctly): “It is fitting . . . that this position opposing reparative therapy has been adopted on the 25th anniversary of the removal of homosexuality as a mental disorder from the DSM. There is no scientific evidence that reparative or conversion therapy is effective in changing a person’s sexual orientation.’ He added that ‘there is, however, evidence that this type of therapy can be destructive.’”

Likewise, *Psychiatric News* reported that the APA Board of Trustees had adopted a policy “that opposes therapeutic techniques some psychiatrists and mental health professional claim can shift an individual’s sexual orientation from homosexual to heterosexual.” The front-page story in that self-proclaimed “Newspaper of the American Psychiatric

Association” was deceptively entitled “APA Maintains Reparative Therapy Not Effective.”

The American Psychological Association has also taken a public position on the issue. In a brochure produced by the Office of Public Affairs of the American Psychological Association entitled *Answers To Your Questions About Sexual Orientation and Homosexuality*, readers are informed: “*Can therapy change sexual orientation?* No. . . . [T]here is no scientific reason to attempt conversion of lesbians or gays to heterosexual orientation . . .” However, this pamphlet goes further than the official statement of this APA. Among the eight formal Resolutions that the psychologists’ organization has adopted is a Resolution on Appropriate Therapeutic Responses to Sexual Orientation.

The concluding resolution is that the association opposes the portrayal of persons with homosexual orientation as mentally ill, and it supports dissemination of accurate information. Again, the hype about this association’s official statement condemning conversion or reparative therapies to help gays and lesbians who desire treatment is exaggerated. In reality, the association reaffirmed support for patient self-determination and autonomy in treatment matters, and merely condemned labeling same-sex attraction as a mental illness, and warned against false advertising.

The Unofficial View Leaves Latitude

When questioned by a psychologist about the psychologist group’s statement, Dr. Martin Seligman, 1998 President of the American Psychological Association “said that he felt the media had misunderstood the intent of the statement. He felt a client had a right to request the type of therapy that he or she wants and receive it.” Likewise, Dr. Ray Fowler, Chief Executive Officer of the association suggested that “people need to re-read the statement, and that individual choice, whatever it is, must be respected. . . . If [the client’s] feelings are ego-dystonic and there is a desire to talk about changing, that is an acceptable choice and a psychologist may participate if he or she desires.”²⁷

However, the statements of both associations clearly convey a demeaning posture toward provision of therapy to help gays and lesbians who want to change their sexual orientation. Neither statement claims that such therapies are *per se* harmful, or even dangerous to all patients, but both repeat allegations that there may be harm from the inappropriate use of such therapies.

The collaboration of both associations with the press-release and media barrage, and the failure of either association to affirmatively disassociate itself from the gay-generated misleading media hype, suggests their willingness to promote disinformation to the general public that is negative about treatment.

For example, either association could have adopted a resolution defending the right of its members to offer such treatments to patients desiring them. They could at least have issued a press release to correct misrepresentations about the associations' positions. Instead, each association has tried to convey the false impression that it has found such therapies to be ineffective, and that reputable therapists or doctors do not use them. Such conduct of the associations merely confirms their well-known political biases.

In an important respect, the statements of both organizations that discourage providing or even advising clients about the availability of such treatment options flies in the face of established ethical professional standards (if not the legal duty) to inform patients of all reasonable treatment options, and to respect and support the patient's treatment preferences. Others have demonstrated that the APA's advocacy policy regarding gay and lesbian issues "have led a purportedly scientific organization to misinterpret, overgeneralize, and distort the results of research . . ."

Dr. Spitzer Enters the Controversy

Even more significantly, in the months since the November, 1999, NARTH convention, there have been some well-publicized and important developments regarding the legitimacy and efficacy of these therapies. Most prominently, Columbia University professor and psychiatrist Dr. Robert Spitzer has begun research into whether reparative or conversion therapies actually help people change their sexual orientation. At least initially, the research of Dr. Spitzer (who is called "the architect of the 1973 decision to remove homosexuality from the DSM") tends to support the conclusion that some people really have changed their sexual orientation as a result of the therapies.

He stated to radio talk show host, Dr. Laura Schlessinger, on January 21, 2000: "I'm convinced from people I have interviewed, that for many of them, they have made substantial changes toward becoming heterosexual . . . I think that's news." He added: "All the critics [of reorientation therapies]. . . have not been honest and taken the time to do the research, because it's just politics."

A Solution: Speak Up, Make Yourself Heard

There is a common solution to both of these problems - the problem of efforts to force same-sex marriage upon an unwilling public, and the problem of gagging and silencing those who provide therapies that will help some people to escape homosexual lifestyles.

The common solution is to speak up, speak out, raise your voice, write, and express yourself. We cannot just sit idly by. In the words of a Mormon religious leader that I respect, there should be no "uncontested lay-ups" in these contests. Speaking up and speaking out on these issues is not easy,

but it is very important.

That does not mean that we are going to win every battle. Indeed, even though we do speak up, raise our voices, and do not just sit idly by, but try to defend the values that we know to be true, I suspect that we are going to lose many significant battles—perhaps most of them. But that isn't the point. Society has its ups and downs, its ebbs and flows; it swings like a pendulum from side to side. Periodically, there are fads and fashions that are extreme, and extremely dangerous. But those fads and fashions pass.

Sometimes it takes several generations for them to pass, but when they do pass, people look back and say, "Where were my ancestors on the issue? Where did they stand?" "Where were the people in my profession, the people from my community, from my faith, from my subgroup of society?" We need to let them know where we were.

Remember the Silent Majority

The second advantage of speaking up is that it taps into a very deep and very wide public sentiment of "the silent majority." I had such an experience when I was in the Army. In the hot summer of 1970, I was attending a "boot camp" for two-year ROTC cadets at Fort Knox, Kentucky. One segment of training involved twenty hours of map reading. The training segments were designed for people of very low education - mostly high-school dropouts. But all of the ROTC students attending that summer camp were college students, and many were in graduate school, so the training was not particularly challenging for them. In fact, it was painfully boring. Nevertheless, we were required to meet for a fifty-minute map reading lecture, and then take a ten minute break. We had to do that twenty times to complete the course.

The instructor, a foul-mouthed sergeant, began every hour of instruction with a very crude and filthy, vulgar joke - usually an x-rated, sexual joke. After the first couple of hours there was some grumbling by some of us. We did not want to be forced to listen to that kind of garbage. Apparently, some of the other instructors heard that some cadets were grumbling, and passed the word on to the map instructor. So when the third or fourth hour segment began, he said he would like to begin each segment with a little humor, but he understood that there were some "mama's boys" in the audience who didn't like the kind of jokes he'd been telling.

When he said that, there were some murmurs of "Who are the wimps?" "Just ignore them," "There'd better not be," and other such comments.

That is exactly the reaction the sergeant was hoping for. He was trying to stir up the people in the audience who liked his jokes to get them to intimidate those of us who didn't.

He said: "So I've decided that I will not tell any more of my favorite jokes, if there is anyone in the audience who objects to them. Now if there is anyone in the audience who objects to my telling of these kind of jokes, he can stand up now and I won't tell them anymore."

When he said that, a lot of the cadets began to say things like "Nobody here objects," or "There better not be any objectors," and making threats, and murmuring.

I was one of those who had privately objected. I hadn't intended to make a public issue of it. But the sergeant had made it a public issue, and I was really offended by his effort to intimidate me and others like me. If he had not said anything, I probably would have just grumbled privately, and endured his grotesque humor. However because he was forcing the issue, I decided that I would not back down from his challenge.

So when he said that, I paused a second or two, and then I stood up. I looked around and, to my surprise, I saw another fellow a few tables away who had also stood up. That made two of us. We made eye contact and I felt exhilarated.

Then an amazing thing happened. After we had been standing alone for a few seconds, other people began to stand up in the audience—one by one, one here, one there—and then two, then three, and finally there were at least fifteen or twenty of us out of a 160 or 170 cadets in the class who were standing up and staring down this bullying instructor.

The instructor was flabbergasted. He turned beet red, stammered and stuttered for a moment, and then after an awkward pause, began his map-reading lecture. He never told another dirty joke to us.

There Are Others Who Believe As You Do

That experience taught me that when you have the courage to stand up for what is right, it gives other people courage, and if they know they are not going to be standing alone, when they see you standing up, others will take courage and join you. Additionally, I am convinced that for every one who stood up that day, there were another four or five who silently agreed with us and supported our position.

Applied to the present situation, I believe there are a number of people who share our values in our professions, but they dare not speak up until they see that they will not be alone. If we have the courage to speak up and express ourselves openly, publicly and persistently, it will motivate others to also speak up and speak out.

And one thing needs to be remembered about the people who use the kind of tactics of intimidation that are promoting same-sex marriage, and attempting to silence and gag

reparative therapy. They are, for the most part, cowards. They do as much as they can get away with. But when they confront open opposition, they often shrink and back down.

It is absolutely imperative that all of you—and each one of you individually—accept as your personal responsibility the duty of writing and raising your voice. *You must let your voice be heard on the issue of reparative therapy.* You must let your voice be heard on the issue of the dangers of gay and lesbian parenting. You must let your voice be heard on the issue of same-sex marriage. You must not let these issues pass by uncontested. If you do, by your silence, you have assented to these positions.

Of course, life is too short to spend *all* of our time expressing our opposition to every dumb and silly idea with which we disagree. But as to these issues - fundamental issues of offering treatment to persons engaged in homosexual behavior who want to escape that lifestyle, and issues of the definition and composition of the family—we *cannot afford to be silent.* These are issues that have pushed society to the edge of a precipice, and we can not remain mute on them.

Part of the problem is that we have taken for granted for much too long the value of the institutions and practices that are now challenged. We take marriage for granted, we take parenting for granted, we take the value of treating people who have sexual problems for granted. However, we can no longer afford to take them for granted, because a generation is growing up which doesn't understand the *value* of those things. Unless we openly and courageously defend those principles and values now, we stand in risk of losing them.

The truths that we speak are dangerous truths - they are dangerous and threatening to false and distorted philosophies and lifestyles. Persons who choose to see the world through the lens of those distorted philosophies are angry about those who tell the truth that threatens their preferences. In the name of tolerance, advocates of alternative lifestyles demand the power to suppress and repress those who disagree with them. They push relentlessly.

NARTH Professionals Must Publish

It is critically important for you to write professionally about these issues. It is important for you to write about the validity of reparative therapies. It is important because when the question arises whether it is legitimate to discriminate against you in professional societies, to answer that question, the lawyers and judges will turn to the professional literature.

You know that the professional literature is overwhelmingly on one side. But the question is not what most writers say; the question is whether there is a credible and significant minority opinion on the other side. If there is a credible

and significant minority opinion, it greatly limits their ability to discriminate against you. We live in a society that understands that professional principles change, and respects and supports the counter-majoritarian right to show that the popular position is erroneous.

For the same reason, it is important for legal purposes that the story be told, and that studies be performed, that research be done and reported in appropriate professional ways. The judges and lawmakers who will pass upon the rationality of various policies, such as those restricting marriage to male/female couples, and policies restricting or prohibiting adoption by lesbian couples or gay couples will also look to the literature to see what is said about the potential risks. Once again, the position we take will be a minority position, and we will be outnumbered by those on the other side.

But that isn't the question. They may put forward over 100 studies saying that having gay parents doesn't matter. All we have to do is put forward four or five that say that we found that it *does* matter, and that in these circumstances, we have shown a significant effect. Then the fact that they were unable to find *any* effect on the children pales to insignificance, and calls into question the methodology of their studies, because we have three or five very good studies that have shown a significant effect on families and parenting.

There Are Many Ways to Contribute

Thus I urge you to raise your voice, to speak out, to do research, to write, and to publish. Publish in professional publications. Publish in peer-reviewed publications. Publish in popular publications. Publish in the popular media. Publish in newspapers. Respond with letters to the editor to newspaper stories that are misleading or that convey false information. Meet with reporters and give them your point of view about these stories. Take the initiative to call newspapers, magazines, journals, and other publications. Write op-ed pieces and send them to the newspapers. Send them to your professional journals in response to articles. I urge you to do this very carefully, very accurately, very appropriately.

Avoid pejorative language. Avoid attacks. Avoid "fighting." Avoid making *ad hominem* attacks or bashing any individuals. Focus on the issues. Express positively your position. Point out respectfully the flaws in the studies or in the position that is asserted on the other side.

I am not asking you to believe that by doing this, we will

suddenly outnumber those on the other side. We won't. But we must not let the other point-of-view stand without response. We must not concede the point by default, and assent to those positions tacitly by our silence.

Abolitionists Spoke Up as a Minority View

Historically, there is a very significant precedent for what I am suggesting to you. It is the precedent of abolitionist voices in America 150 years ago. The effort to suppress abolitionists' voices, not merely in the South, but more shockingly in the North, is one of the stories of history that has largely been forgotten, but it is one of the most magnificent and inspiring stories of American history. The abolitionists refused to let their voices be stifled. By their persistent expression of a point-of-view that was largely unpopular—considered disruptive, marginalized, considered radical—they moved the nation in a direction that it needed to move, and ultimately ended with the emancipation of slaves in this country. Thus those marginalized voices succeeded in correcting the major flaw that had been in the American Constitution, and they set the country on a course that could rectify the problems of American slavery.³³

Speaking the truth may not lead to immediate victory. The history of how abolitionists were treated suggests that a long period of oppression, persecution, and hostility will precede the blossoming of the truths that we speak. Only if we endure, if we persist, if we persevere, can we prevail. The trail is not gentle, the task is not easy, but it is right, it is true, and it is important not to despair. We must never give up.

I salute and honor you who dedicate your professional lives to helping others, including those who seek to escape the tragic snare of same-sex attraction. Many of you will work in obscurity, unheralded, unsung, with little peer support among your professional colleagues. But you will leave a magnificent legacy to your patients, to your posterity, to your profession, and to the country by your courageous service.

Another generation will look back in awe and respect and gratitude for the work you did and the legacy you left. You will be honored by the truth of the principles you stood for, by the integrity with which you maintained those ideals, and by the courage with which you shared, taught, and expressed those truths.

That will be your legacy -- a legacy of integrity, and courage and honor, if you will but speak up for it. ■