

What Does It Mean to Change?

By Joseph Nicolosi, Ph.D.

The man who has overcome his homosexuality is truly a *man who has recaptured his own nature*. In fact, a basic assumption of reparative therapy is that every man is, on some deeper level, heterosexual—even if he has been struggling with a homosexual *problem*.

During my 25 years of experience as a practicing psychologist, over and over again I have observed the same phenomenon: the man struggling with a homosexual problem suffers from a conflict in his natural desire to connect with men. And so we see a characteristic emotional block called *same-sex defensive detachment*. Such a self-protective stance alienates him not only from other men, but from his own masculine self. Men are mysteries; the homosexual is afraid of them and does not feel a part of the masculine world, yet he still longs for them because they embody an unexpressed part of his own nature.

This defensive attitude is based upon the anticipation of “not measuring up” to other males and of being hurt by them—first in relationship with father, and soon after, with male peers. Often, the relationship with the mother also interfered with his independence and masculine development. So this is the conflict: his desire to connect with men, and his anticipation of rejection. That is why the homosexual is emotionally “stuck” — because what he is most afraid of, is what he needs the most.

Says one former homosexual man:

“I think part of my problem was that instead of meeting the challenges I faced when I was growing up, I tended to avoid whatever activity or challenge caused that feeling of inadequacy, of being different, of being ‘less than other men.’ I’d avoid the whole masculine realm.”

Gender Identity is Essential to Maturity

Gender is a central developmental pathway through which we grow. Since homosexuals typically evidence a gender-identity disturbance, there has inevitably been a block in the maturation process. We therefore often see a general immaturity, characterized by a struggle with self-discipline, low frustration tolerance, narcissistic preoccupation with self, and a fragile sense of personhood. In relationships we tend to see the following: defensiveness, anticipation of betrayal, a weak sense of personal boundaries, preoccupation with “image” (his own, and that of his lover), jealousy, and a repeated pattern of overinfatuation followed by crushing disillusionment. This disappointment is due to the unconscious expectation that he will be made complete by some other, special person.

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

Growth out of homosexuality comes through an identity change produced through *resolution of emotional conflict*. The client learns to push beyond defensive detachment to establish non-erotic intimacy with other men. The healing task is to de-mystify men and masculinity, to experience himself as “one of the guys,” and to receive the masculine affirmation that only a man can bestow upon another man. These are the deepest needs of the homosexual, *not sex*.

The other healing factor is the person’s own powerful desire to change. The men I have worked with who have been successful in reparative therapy possessed a *strong will to overcome*.

Psychology Doesn't Have All the Answers

But where does the will come from? Psychology is unable to explain its origins. What is it about certain individuals, that they will take on, and then *persist*, in such a daunting struggle? For many, religious faith is a powerful motivator. Religious clients have more clarity about their therapeutic goals, as well as support from their faith community. Other men may also be powerfully motivated by the desire for a wife and family. But science still can't explain why some individuals prove so determined, while others lose the desire to persevere against discouragement.

"Cure" of homosexuality is very much like cure of alcoholism, low self-esteem, or a lifetime of unhealthy living habits. As with all types of psychological change, there must be a longterm growth process. Gradually the client comes to experience his homosexuality as "not me." Instead he begins to see his fantasies as something that comes to him as a symptom, or signal, that important aspects of his emotional life have been neglected. He recognizes that certain normal life stressors "set him up" to experience attractions to men—particularly anxiety, loneliness, boredom, envy, failure, and especially, feelings of intimidation by other men.

One ex-gay man describes the situation which makes him most vulnerable:

"Somebody will come across my path—maybe I'm on a committee with him—and I notice my old pattern of recoiling into myself and feeling inadequate, and then I begin to notice this particular man. It's like there's this mysterious male out there—what is he like? Why don't I feel like him? Instead I try to get to know him, maybe even touch him with a pat on the back, and get under his skin just a little, and then all of a sudden I see his weaknesses—this is *just a guy*, and the mystique is broken."

It's About Much More Than Sex

When the client is on his way as an overcomer, the most pressing issue that brought him into therapy—namely, his sexual problem—soon becomes subordinate to other life issues, such as growing in a sense of competence and self-esteem; developing healthy male relationships; taking control of the events in his life; and finding longterm relational fulfillment. And so he

sees that homosexuality is much more than a sexual problem; it is really an *identity problem* which has blocked many other aspects of his growth into mature adulthood.

Heterosexual Relationships Will Feel Different

As the client's same-sex feelings diminish, an attraction to the opposite sex will often slowly begin to develop.

Ex-gay men who have married report a deep emotional and sexual satisfaction with their wives. There is a sense of mature serenity, of "rightness," that was missing in gay sex. One of my clients described the superficiality of gay sex—in retrospect after treatment—as having been like "two boys playing together in a sandbox."

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

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

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

The man with the homosexual background who marries will typically forfeit this old, addictive

“high” of gay life for a more subtle, but more enduringly satisfying relationship with his wife. Even straight men find that intense sexual experience is more characteristic of the young person—typically diminishing during longterm marriage and being replaced with a more subtle emotional experience.

“Change” Means General Interpersonal Improvement

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

Ex-gay men have resolved much of their anxiety about being weakened by intimacy with a woman. If they once tended to compromise themselves by falling into the solicitous, passive, “good-little-boy” role, they will now find themselves relating in a more authentic and self-possessed manner. They no longer project onto women the image of their own mothers, who were often intrusive. Instead of being “pals” with women, or falling into the familiar role of letting themselves be “mothered” by them, they will begin to relate to women from a gender-distinct perspective, as heterosexual men do.

Finally, the ex-gay man will know the truth: that the dream he has nurtured for so long was but an illusion. *There is no same-sex special friend* out there who will make him into a whole person. Frank Worthen, who lived a gay lifestyle but is now recognized as the “father of the ex-gay movement,” says:

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

The Challenge of Committed Relationships

Most people think heterosexual functioning is the mark of successful therapy. In reality, many ex-gay men will be able to function sexually

without extraordinary difficulty. The greater challenge, however, is the issue of trust—how to develop an intimate, vulnerable relationship with a woman, and not to perceive her as his mother, or someone who will weaken his masculine autonomy. She should be a woman who will affirm him as a male—who trusts and assumes that in spite of everything she knows her future husband has gone through, he is man enough for her. When the ex-gay man perceives this unquestioning confidence in his masculinity, he can usually relax and allow his male body to respond naturally to her.

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

NARTH Survey Says Change is Possible

Since 1973, when the American Psychiatric Association officially removed homosexuality from its list of disorders, research on the subject has changed direction. Conducted almost entirely from a gay advocacy perspective, it is often funded by gay sponsors, carried out by gay researchers, and designed to prove that homosexuality is innate, psychologically normal, and socially desirable.

With its 1997 survey, NARTH took a step in the direction abandoned 25 years ago. For many years, NARTH clinicians have been saying that sexual orientation change is possible, and that attempts at change are *not* inherently psychologically harmful. Results of our study support that assertion.

The self-report survey included 822 respondents (78% male, 22% female). NARTH specifically sought out individuals who claim to have made a degree of sexual-orientation change.

Among the findings:

Of the respondents, just over half (476) had obtained therapy from a professional therapist. The remainder received help from a pastoral counselor or non-professional therapist, and some had relied on self-help, reading, and supportive relationships with friends and family.

The average length of time elapsed since the

experience of sexual-orientation change had occurred was 6.7 years. A total of 45.4% of the respondents reported a shift that made them more heterosexual than homosexual: that is, 17.6% now considered themselves exclusively heterosexual; 16.7% almost entirely heterosexual; and 11.1% said they were now more heterosexual than homosexual.

The respondents who had undertaken therapy were overwhelmingly in agreement that conversion therapy had helped them cope with and reduce their homosexual attractions. Many perceived their homosexual behaviors as an addiction, and were relieved to feel less consumed by these disturbing preoccupations.

A large majority said their religious and spiritual beliefs played a crucial, supportive role in overcoming their homosexuality.

Information was obtained from the respondents about their past and current psychological and sexual functioning. Participants were asked to recall the time in their lives when they were most strongly experiencing homosexual thoughts, feelings and behaviors and compare it to their current functioning.

It is important to note that even those respondents who, at the time of the survey, still struggled with some degree of remaining attractions, nevertheless reported significant growth in self-esteem, self-understanding and self-acceptance.

Areas of functioning in which the respondents report significant improvement include the following:

- Diminishment of homosexual thoughts, feelings and behaviors
- Self-acceptance
- Self-understanding
- Ability to trust and disclose with both same and opposite-sex individuals
- Sense of personal power
- Assertiveness
- Sense of clarity and security in gender identity
- Self-esteem
- Diminishment of loneliness
- Improvement in emotional stability and maturity
- Lessened depression
- Better ability to resolve interpersonal conflicts
- Increased openness to the possibility of marriage.

Before counseling or therapy, 68% of the respondents perceived themselves as exclusively or almost entirely homosexual, with another 22%

stating they were more homosexual than heterosexual. After treatment, only 13% perceived themselves as exclusively or almost entirely homosexual, while 34% described themselves as either exclusively or almost entirely heterosexual.

Ninety-nine percent of respondents said they now believe treatment to change homosexuality can be effective and valuable.

Those surveyed reported very significant decreases, following treatment, in the frequency and intensity of their homosexual thoughts and fantasies. The same was true of sexual behaviors with a partner (30% had homosexual sex "very often" before treatment, while only 1% did so afterwards). Detailed survey results are available from the NARTH office.

Of the psychotherapists surveyed, 82% said they believe therapy can help change unwanted homosexuality. They indicated that on average, one-third to one-half of their clients had adopted a primarily heterosexual orientation.

The study's authors caution that a major orientation shift will not be achieved by everyone; that some remaining degree of struggle is usually necessary over the client's lifetime, particularly during times of stress (as with alcoholics, overeaters and clients struggling with self-esteem issues); and that some clients will change their minds about the direction of treatment, and decide to go back to a gay lifestyle.

Speaking of the men and women who have emerged from gay life, Dr. Jeffrey Satinover says,

"When I see the personal difficulties they have squarely faced, the sheer courage they have displayed not only in facing these difficulties, but also in confronting a culture that uses every possible means to deny the validity of their values, goals and experiences—I truly stand back in wonder.

"In my various explorations within the worlds of psychoanalysis, psychotherapy, and psychiatry, I have simply never before seen such profound healing."

Adds a survey respondent:

"People can and do change, and become free."