Homosexual Inclinations (HI): Politics vs. Science

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Resources

- Homosexuality & American Public Life. C. Wolfe (ed.), Spence Pub. 1999
- The Trojan Couch, Jeff Satinover, <u>www.narth.com</u>,
- The Truth About Homosexuality, Fr. Harvey, O.S.F.S., Ignatius Press. 1996.
- Courage Website <u>www.couragerc.net</u>
- National Association for Treatment and Research of Homosexuality. <u>www.narth.com</u>

APA& science

Fairytales remind us of those simple truths that, as adults, we no longer wish to accept. "The Emperor's New Robes" shows us that in every generation, on certain matters, a whole society ³/₄its experts, its most admired, respected, and trusted leaders and counselors will adopt as authoritative a complete illusion. Some of my psychiatric and psychological colleagues have woven for themselves their own set of illusory robes of authority, and for the past thirtyfive years have been proclaiming doctrines in the public square that depend upon the authority that derives from the public's belief that these robes exist.

APA and science

In particular, they have claimed to the Supreme Court that the scientific data show that homosexuals form a "class" whose boundaries are defined by a stable "trait". This presumption is false, yet the recent Supreme Court decisions pertaining to same-sex marriage have taken it for granted.

 Jeffrey Satinover, The Trojan Couch, www.narth.com

Destructive Trends in Mental Health

"The American Psychological Association has permitted political correctness to triumph over science, clinical knowledge and professional integrity. The public can no longer trust organized psychology to speak from evidence rather than from what it regards to be politically correct."

 Nicholas Cummings, Ph.D., past president, American Psychological Association. Destructive Trends in Mental Health, 2005.

Scientific literature

- Evelyn Hooker's paper in this book, The Adjustment of the Overt Male Homosexual, in 1957 is the only paper referenced in detail on the main website of the APA in its discussion of SSA issues in its attempts to make the case that there is no association between SSA and psychopathology.
- Her study was one of the two upon which in 1973 the APA decided to remove SSA from the DSM.
 - Hooker, E. (1957). "The adjustment of the overt male homosexual." Journal of Projective Techniques, 21:18-31

Hooker's paper

The one study discussed in the APA's brief in 2003 in the Lawrence case. It claims that "homosexuals are not inherently abnormal and that there is no difference between the pathologies of homosexual and heterosexual men.

Satinover, J. (2005) The Trojan Couch. www.narth.com

1973 "normalization" of SSA

- Dr. Robert Spitzer in 1973 presented the NIMH position on homosexuality to the APA for the normalization of homosexuality which strongly influenced its decision:
- According to Kinsey data exclusive homosexuality was a normal part of the human condition.
- 2. It was not a psychiatric disorder since it "does not either regularly cause subjective distress or is regularly associated with some generalized impairment in social functioning.
- 3.The book, Male and Female Homosexuality, claimed that homosexuality is normal.

APA's decision

 Ignored a number of studies which demonstrated much higher prevalence of psychopathology in males with SSA, particularly substance abuse, depression and suicide.

APA President 1974

- Call it a sense of contempt toward the mental health enterprise, radiating vaguely from a variety of quarters...a harsh questioning of the scientific basis of our professional expertise...is not the whole enterprise more of an illusiona successful public relations effort, perhaps, but certainly not the practical and effective application of a body of scientifically certifiable findings or theories?"
 - John Spiegel, Inaugural address upon assuming the presidency of the American Psychiatric Association, following the overturning of homosexualilty as a mental disorder. Satinover, J. The Trojan Couch,www.narth.com

Response to 1973 decision

Four years later 69% of psychiatrists disagreed with the decision.
Medical Aspects of Human Sexuality
Two years later American Psychological Association, 3 times larger than APA, caved in, and soon thereafter, the National Association of Social Workers.

Response to 1973 decision

- The APA... "had fallen victim to the disorder of a tumultuous era, when disruptive conflicts threatened to politicize every aspect of American social life. A furious egalitarianism ...had compelled psychiatrists to negotiate the pathological status of homosexuality with homosexuals themselves. The result was not a conclusion based upon an approximation of scientific truth as dictated by reason, but was instead an action demanded by the ideological temper of the times."
 - Bayer, R. (1987). Homosexuality and American Psychiatry: The Politics of Diagnosis. Princeton: Princeton University Press, pp. 3-4.

APA and politics

 According to Bayer, "The status of homosexuality is a political question, representing a historically rooted, socially determined choice regarding the ends of human sexuality. It requires a political analysis."

lbid, p. 5.

Proposal

Perhaps now is the time for the association to abide by its commitment that accompanied then-APA President Nicholas Cummings' proposal to remove homosexuality as a mental disorder in 1974: "a proscription that appropriate and needed research would be conducted to substantiate these decisions." None, however, was ever conducted.

 Dean Byrd, Ph.D., president of NARTH, March 2008, www.narth.com

APA & Science

In 1998, the American Psychological Association (APA) published a brochure titled "Answers to Your Questions about Sexual Orientation and Homosexuality."

"There is considerable recent evidence to suggest that biology, including genetic or inborn hormonal factors, play a significant role in a person's sexuality."

APA & Science 2008

- "There is no consensus among scientists about" the exact reasons that an individual develops a heterosexual, bisexual, gay or lesbian orientation. Although much research has examined the possible genetic, hormonal, developmental, social, and cultural influences on sexual orientation, no findings have emerged that permit scientists to conclude that sexual orientation is determined by any particular factor or factors. Many think that nature and nurture both play complex roles..."
 - Answers to Your Questions about Sexual Orientation and Homosexuality. APA 2008

APA & Science 2008

"Mental health organizations call on their members to respect a person's [client's] right to self-determination."

 There is no acknowledgement of the substantial research that clearly demonstrates that homosexuals are at greater risks for some forms of mental illness (Herrell, Ferguson, Sandfort).

Politics and Science

- Change of orientation therapy programs should be eliminated. Their availability only confirms professional and societal biases against homosexuality, despite seemingly progressive rhetoric about its normality.... Viewing therapists as contemporary society's secular priests rather than as value-neutral technicians will sensitize professionals and laypeople alike to large-scale social, political, and moral influences in human behavior."
 - G. C. Davison, (1982) Politics, ethics and therapy for homosexuality. (in Gonsiorek, J. Homosexuality and psychotherapy. NY Haworth Press) 89 - 96.

Prevalence of SSA

 Myth: 10% of the general population homosexual (Kinsey)

Fact: Only 2 - 3% of the general population are homosexual.

In a study of 5,898 adults conducted in the Netherlands, only 2.1% identified themselves as homosexual. Sandfort, TG. (1999) Arch Gen Psych. 56

is

Prevalence in Australia

- 1.03 percent of men and .66 percent of women and defined themselves as homosexual.
- 1.26 percent of women and 1.23 percent of men defined themselves as bi-sexual
- A study of 8,205 randomly selected Australians (4,124 females and 4,081 males)

 Dr. Julia Shelley of Deakin University in Melbourne March 19, 2008 (LifeSiteNews.com)

Prevalence in Canada

- 1.9% of the total Canadian population aged 18 to 59
- An estimated 346,000 adults identified themselves as gay, lesbian or bisexual in the survey
- 130,000 were gay men
- 59,000 bisexual men
- 71,000 lesbians
- 85,000 bisexual women

 Canadian Community Health Survey for adults aged 18 to 59 2003 and 2005 (lifesitenews, 3/20/08)

Is SSA Caused by Genes?

The first genome screen male sexual orientation
no genetic basis found.
Mustanski, BS, et al. (2005) A Genome wide scan of male sexual orientation. *Hum Genet.* 116: 272-8.

SSA and Genes

Studies of identical twins fail to show 100% concordance.

 If SSA were genetically determined, identical twins should each have SSA. Studies reveal concordance no higher than 50%.

Genes and SSA

- If one identical twin, male or female has SSA, the chances are only about 10 percent that the cotwin also has SSA, i.e. *identical twins usually differ for SSA*.
- sample of twins, (6,001 individual females and 3,152 males
- If SSA were determined by intrauterine hormonal experiences, the concordance for SSA should be high in twins.
 - Santtila, P., Sandnabba, N.K., Harlaar, N., Varjonen, M., Alanko, K., & von der Pahlen, B. (2008). Potential for homosexual response is prevalent and genetic. *Biological Psychology*, 77(1), 102-105.(fifth study on identical twins)

Genes and HI

 In a study of a large sample male identical twins when one twin had SSA in only 11% of the cases so did the other.

 J. Michael Bailey et al. (2000) Genetic and Environmental Influences on Sexual Orientation and its Correlates in an Australian Twins Sample, Journal of Personality and Social Psychology, March, 78 (3) 524-536

Is SSA Genetic?

Although the media has tried to promote the idea of a "gay gene," no genetic cause has ever been found for SSA.

 The studies looking for the gay gene have been flawed, unsuccessfully replicated, and do not claim to have found a gay gene. Archives of General Psychiatry (March 1993)

Genes & SSA

Francis S. Collins, one of the world's leading scientists who works on the cutting edge of DNA research, commented that "there is an inescapable component of heritability to many behavioral traits, however, for virtually none of them is heredity even close to predictive." Francis S. Collins, M.D., Ph.D. Director, National Human Genome Research Institute, NIH

Genes and SSA

"Evidence from twin studies support the conclusion that heritable factors play a role in male homosexuality. However, the likelihood that the identical twin of a homosexual male will also be homosexual is about 20%, indicating that whatever genes are involved represent predispositions, not predeterminations."

 Francis S. Collins, M.D., Ph.D. Director, National Human Genome Research Institute, NIH

SSA and genes

 There is no replicated scientific evidence that SSA is genetically or hormonally predetermined and unchangeable.

 John de Cecco, David Parker (ed) (1995) Sex, Cells, and Same-Sex Desire: The Biology of Sexual Preference, Harrington Park Press: NY.

SSA and genes

In a study of a large sample male identical twins when one twin had SSA in only 11% of the cases so did the other.

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Homosexuality as a "class"

- False scientific claim has been made that homosexuality is an innate and immutable trait.
- Claim made to the Supreme Court that homosexuals form a "class" whose boundaries are defined by a stable "trait."
- Supreme Court decisions have accepted this false scientific view.
- Montgomery County, MD, is attempting to have this fraudulent science taught in 8th and 10th grade science classses.

Major Communications Strategy Employed by MSM

- Desensitize the public to the dangers/truths of the lifestyle.
- Present those who oppose the lifestyle as angry/prejudiced homophobes.
- Convert people to accept the lifestyle as normal and healthy.
 - After The Ball, Kirk, M. & Madsen, H., 1989.

SSA Agenda

The homosexual activists consistently engage in name-calling and insults referring to those who oppose their agenda as bigots, homophobic, heterosexist, discriminatory, prejudiced, and perpetrators of violence, bullying, harassment, intimidation and hate speech. They lump people of faith who truly care about persons with SSA with criminals.

The SSA Agenda

- Despite no evidence of an SSA gene, there is an agenda in America to promote this myth.
 - Media Will & Grace, Queer Eye for the Straight Guy, The Real World, etc.
 - Education Mandatory SSA curriculum, support groups
 - Corporate World Mandatory sensitivity training for employees
 - Universities incorporate into all courses
 - Schools homosexual curriculum K through 12

The SSA Agenda

 Universities - diversity weeks, lesbian motherhood
 Judicial - same-sex marriages, arrest a Mass. father .
 Legislative - hate speech laws
 Churches - silence

The Dictatorship of Relativism

- Force the acceptance of same sex unions and adoption
- Require teaching of the homosexual agenda at every educational level
- Do not teach the medical and psychiatric dangers of the lifestyle
- Legally punish those opposed in any way to the homosexual agenda for the culture

Origins of SSA in Males

Weak Masculine Confidence **Peer Rejection** Father Conflicts Poor Body Image Ongoing rejection by significant others Sexual Abuse Victimization Mistrust of Women Mother Conflicts Female Betrayal/post divorce trauma Selfishness Sexual Addiction / Pansexuality

Newer Theory - 2007

 Youngest male sibling more vulnerable to have SSA based on biological/immune factors.

 Columbia/Yale study of 20,745 adolescents - no association between SSA and number of older siblings or hormonal or prenatal factors.

Berman, P. & Bruckner, H. (2002). Opposite Sex Twins & Adolescent SSA, *American Journal of Sociology*.

Origins of SSA in Females

Mistrust of Males Father Conflicts Male Betrayal Sexual Abuse Trauma from being used by others sexually Weak Feminine Identity Mother Conflicts Peer Rejection Poor Body Image Loneliness Anger - rebelliousness against the moral code Athleticism with identification with masculinity

Abuse and SSA

- A series of well designed studies demonstrate that a significant percentage of persons with SSA have been victims of Childhood Sexual Abuse (CSA) or rape.
 - Lynda Doll et al. (1992) Self-reported childhood and adolescent sexual abuse among adult homosexual and bisexual men, Child Abuse & Neglect, 16, p. 855-864.
 Over 40% of adult homosexual and bisexual men in this study reported a history of sexual abuse.); Johnson, R., Shrier, D. (1985) Sexual victimization of boys: Experience at an adolescent medicine clinic. Journal of Adolescent Health Care, 6: 372-376;

"Sexual Attraction/Inclination vs. Orientation"

"Sexual orientation has been found to be unstable over time in both males and females."
Laumann, E., et al. (1994). *The Social Organization of Sexuality: Sexual Practices in the U.S.* U. of Chicago

"Sexual Attraction vs. Orientation"

 Laumann and his colleagues found that sexual orientation over time was one-directional: declining, and very significantly so.
 Homosexuality tended to 'convert' into heterosexuality as a cohort of individuals aged, and this was true for both men and women.

Flexibility of "Orientation"

Sexual orientation (attraction) is inherently flexible, evolving continuously over the lifespan.
 Women demonstrate greater fluidity than men.
 Kinnish,KK, et al. (2005). "Sexual Differences in the Flexibility of Sexual Orientation: A Multidimensional Retrospective Assessment.". Archives of Sexual Behavior, 34(2), 173-83.

Motivation for therapy

- Did not find the lifestyle emotionally satisfying (85% males;70% females)
- Conflicts between SSA and tenets of their faith (79%)
- Desire to get married or stay married (males 67%; females 35%).
 - Spitzer, R. L. (2003), "Can Some Gay Men and Lesbians Change Their Orientation?" Archives of Sexual Behavior, 32(5), 403-417.

Treatment and depression

Depression has been reported to be a common side effect of unsuccessful attempts to change orientation. This is was not the case for our participants, who often reported that they were "markedly" or "extremely" depressed prior to treatment (males 43%, females 47%), but rarely that depressed after treatment (males 1%, females 4%). To the contrary, after treatment the vast majority reported that they were "not al all" or only "slightly" depressed (males 91%, females 88%). *Ibid*, p. 412

Benefits of therapy

Participants were presented with a list of several ways that therapy might have been "very helpful" (apart from change in sexual orientation). Notable were feeling more masculine (males) or more feminine (females) (87%) and developing more intimate nonsexual relations with the same sex (93%). *Ibid*, p. 412