

Don't fence me in

A change in the APA's stance on 'conversion' therapy draws conservative backlash, equal rights advocates' applause

by Inga Sorensen

As many people geared up for Labor Day weekend—generally a time to relax with loved ones one last time before the more bustling autumn season kicks in—members of the conservative Family Research Council and “former homosexuals” were rallying at the American Psychological Association’s headquarters in Washington, D.C.

The Aug. 28 protest was in response to the APA’s passage two weeks earlier of a resolution which marked a serious setback to proponents of so-called “reparative” or “conversion” therapies intended to change lesbians and gay men into heterosexuals.

The resolution, which passed overwhelmingly at the APA convention in Chicago, asserts that there is no sound scientific evidence of the efficacy of such therapies, which some have compared to efforts to make left-handed people right-handed—they may learn to use their right hands but they still are innately left-handed.

The measure did not, however, go so far as to condemn the therapies as unethical—which was the gist of resolutions defeated by the APA and the American Psychiatric Association two years ago.

The resolution does strongly reaffirm that homosexuality is not a mental illness (the APA declassified homosexuality as a mental illness in 1973) and that psychologists must not “participate in or condone discriminatory practices with sexual minority clients.” In addition, it calls on psychologists to “respect the rights of individuals, including sexual minority clients, to privacy, confidentiality, self-determination and autonomy,” and directs psychologists to obtain appropriate “informed consent” to therapy when working with sexual minority clients, including minors.

According to *NewsPlanet*, “Informed consent... should include discussion of the potential for a rewarding life as a gay or lesbian person, consideration of the possibility that such therapy may make the client’s problems worse, a statement that there is no solid scientific evidence that the therapy is effective, and analysis of the client’s motives in desiring to change his/her orientation.”

Doug Haldeman, president of the APA’s Society for Psychological Study of Lesbian, Gay and Bisexual Issues, says, “Our concern is that a person, especially a young person, who enters into therapy to deal with issues of sexual orientation should be able to have the expectation that such therapy would take place in a professionally neutral environment, absent of any societal bias. Additionally, therapists should be providing clients with accurate information about same-sex sexual orientation. This resolution reasserts the profession’s commitment to those two principles.”

Rea Carey, director of the National Youth Advocacy Coalition, adds, “For many young people dealing with their sexual orientation, going to an allegedly helpful mental health provider turns into a nightmare of inappropriate questions, hospitalization, shock treatment and other archaic measures. All too often, reparative therapy is being pushed on young people who are seeking affirming support but are met instead with long sessions of shame.”

Some self-described “former homosexuals” from Transformation Ex-Gay Ministries, the Washington, D.C., affiliate of Exodus International—a Seattle-based Christian “change ministry” which purports to have more than 6,000 clients in therapy at its 90 locations across the country—were among those who protested at the APA’s headquarters.

“It is time to set the APA straight on the subject,” said Anthony Falzarano, Transformation’s executive director. “There is hope for anyone who wants to recover from homosexuality. If I did it, anyone can. This resolution by the APA is a death sentence for those who are unhappy being gay.”

“Therapists are going to have to lie to their patients about what it means to be gay,” added Robert H. Knight, director of cultural studies for the Family Research Council. “This goes against clinical knowledge and the tradition of professional psychological training, not to mention 5,000 years of human experience and the teaching of all major religions. It also interferes with the rights of parents.”

He added, “The presence here at APA headquarters of former homosexuals is a powerful witness for the truth that gays can change, that they deserve the right to change, and that nobody has the right to stand in their way.”

Reaction from national gay and lesbian groups was mixed.

Kim Mills, a spokesperson for the Washington, D.C.-based Human Rights Campaign, says, “This resolution reaffirms the fact that since there is nothing wrong with homosexuality, there is no reason that gay, lesbian or bisexual people should try to change their orientations. We stand with the APA in calling for an end to discrimination against people based on their sexual orientation.”

David Smith, HRC’s senior strategist, adds, “These therapies amount to nothing more than psychological terrorism and are usually performed by practitioners [who] are affiliated with extremist religious groups that promote the illusion that sexual orientation can be changed to further their political aims.”

The National Gay and Lesbian Task Force, meanwhile, said the APA resolution didn’t go far enough because it failed to call for a ban on “conversion” therapy.

“Attempts to change an individual’s sexual orientation through these therapies are morally and ethically wrong,” says Kerry Lobel, NGLTF’s executive director. “Such practices are a therapeutic perpetuation of homophobia that exists in society today. Equally repugnant are the coercive tactics employed by some psychologists who attempt to lure clients into treatment in the name of pseudo-science... While some adults may give their consent to conversation therapy, many are coerced into doing so.”

“The most vulnerable are young people at the mercy of confused parents or adult guardians seeking to ease their own shame or guilt about their child’s sexual orientation,” she continues. “Allowing conversion treatments to remain a viable option assures that many will endure potentially costly, painful and traumatic procedures that could increase rather than relieve suffering.”



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