

Sexual Orientation Change Efforts (Reparative Therapy) & requests for help to change sexual orientation

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Sexual Orientation Change Efforts - also known as Reparative Therapy (RT) or Conversion Therapy - is a multi-million pound industry practiced largely by conservative Christian groups (although there is one Jewish organisation (JONAH). It's big in America where there is a stronger religious culture, but Britain and other parts of the world are increasingly seeing 'missionary' work where some of the leading RT proponents are travelling the world and to preach their perverted form of 'love' (love the sinner, not the sin) and train Christian 'counsellors'.

However, the edifice of Reparative Therapy is crumbling. In April this year Dr Robert Spitzer, a psychiatrist who had been instrumental in getting the American Psychiatric Association to remove homosexuality from the DSM, offered an apology and retraction of his controversial and deeply flawed 2001 study which, when published in the Archives of Sexual Behavior, saw the rest of the volume dedicated to various critiques of his methodology and findings. Spitzer, who is now very unwell with Parkinson's Disease said "In retrospect, I have to admit I think the critiques are largely correct" What Spitzer found from conducting 200 telephone interviews with the best success cases of people put forward by the ex-gay movement was that even after many years of therapy and prayer that most still had same sex desires, including those who often found employment within the ex-gay organisations.

In June, Alan Chambers, President of Exodus International renounced their position on being able to 'cure' homosexuality. Exodus is the largest 'Ex-Gay' organisation in the world. Chambers told their annual conference that he is "wary of claims that the approach could 'cure' a person of same-sex attraction," essentially heterosexual re-orientation is an unsustainable myth.¹

At the end of August, California state senators voted (by 22-12) that they would ban RT being offered to children as they are unable to offer the informed consent necessary. Parental opposition to the proposal was along the lines that it infringed their individual civil rights to treat (and beat) their children as they so wished.

What concerns me most, as someone who has spent over thirty years working in this field is not the actions of a relatively small number of well funded cranks trading on the fears and concerns of religiously conflicted conservative Judeo-Christians, but the fact that when British therapists were asked (Bartlett et al, 2009) had they engaged in attempts to help reduce same sex attractions from 'confused' or conflicted lesbians and gay men, 1:6 had agreed to such contracts and 4% had attempted to 'cure' homosexuality. This has been well reported in by Daniels (2009).

I feel all this attention we're giving to RT is a diversion from my colleagues admitting their lack of knowledge or, discomfort, with people whose sexuality is different to their own. I feel they are deflecting their own responsibilities for culturally sensitive and informed care onto so called 'religious zealots' so they can feel comfortable in their own smug ignorance.

Bartlett et al's therapists were not acting from a personal conviction that homosexuality was a sin or morally wrong, but a mixture of ignorance and ideas about freedom of choice, and client autonomy. Such therapists have been severely let down by their training organisations who pay scant attention to human sexuality, let alone to equipping them to know how to

¹ There is a very moving and heartfelt YouTube video of three former Exodus International leaders issuing a public apology for the harm they may have done in the misguided belief that they could change sexual orientation http://youtu.be/aDiYeJ_bsQo

respond ethically when a client presents deeply upset or confused about their sexual desires and feelings.

Because harm surely does result from attempts to redirect sexual orientation, whether that is through RT or performed by well meaning counsellors who don't have a bloody clue because they've not actually read the literature or had any formal training. By agreeing to help the client reduce their Same Sex Attractions you are complicit in affirming the client's view that homosexuality is wrong, that gay people can't be happy and healthy and when you both fail to get the kind of results your client wants, the resulting depression, low self esteem and sense of hopelessness the client feels about their ability to function in a society which is oriented towards heterosexuality could well lead to suicide or self harm.

What would I like our professional associations to do about this? I would like to see them taking a proactive stance in ensuring all accredited courses adequately prepare their students to a level of competence that they know how to work with explicit requests to change sexual orientation and why such attempts are likely to fail.

I'd also like my colleagues who are already qualified to inform themselves about how to work with requests to change, either via training such as our own BACP endorsed CPD *Essentials in Gender and Sexual Diversity Therapy* or reading the comprehensive new guidelines from the British Psychological Society (BPS, 2012).

LGB people represent a lucrative 'cash cow' for many therapists as we have higher rates of mental health distress than the general population (King et al, 2003) and present more frequently for therapy and mental health support but it's my experience that very few training courses actively programme into the core curriculum, content on working with LGBT people and when it does happen, it's usually the lesbian or gay students who are asked to teach something (Davies, 2007).

References:

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Pink Therapy is the UK's largest independent therapy and training organisation to specialise in working with a broad range of gender and sexual diversities. Founded by Dominic Davies in 1999, we are regarded by all UK therapy organisations as the lead agency in this area. We run the only university accredited specialist Diploma in Gender and Sexual Diversity Therapy in Europe, which has attracted therapists from the UK, Netherlands, Singapore and Australia. We also run a six day intensive **International Summer School** where therapists from around the world come to study with us. Pink Therapy offers training, clinical consultation, supervision and consultancy to therapists overseas in person or via Skype.

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