

Position Statement on Therapies Focused on Attempts to Change Sexual Orientation (Reparative or Conversion Therapies)

Approved by the Board of Trustees, March 2000

Approved by the Assembly, May 2000

"Policy documents are approved by the APA Assembly and Board of Trustees...These are...position statements that define APA official policy on specific subjects..." – *APA Operations Manual*.

Preamble

In December of 1998, the Board of Trustees issued a position statement (see attached) that the American Psychiatric Association opposes any psychiatric treatment, such as "reparative" or conversion therapy, which is based upon the assumption that homosexuality per se is a mental disorder or based upon the a priori assumption that a patient should change his/her sexual homosexual orientation. In doing so, the APA joined many other professional organizations that either oppose or are critical of "reparative" therapies, including the American Academy of Pediatrics, the American Medical Association, the American Psychological Association, The American Counseling Association, and the National Association of Social Workers (1).

The following Position Statement expands and elaborates upon the statement issued by the Board of Trustees in order to further address public and professional concerns about therapies designed to change a patient's sexual orientation or sexual identity. It *augments* rather than replaces the 1998 statement.

Position Statement

In the past, defining homosexuality as an illness buttressed society's moral opprobrium of same-sex relationships (2). In the current social climate, claiming homosexuality is a mental disorder stems from efforts to discredit the growing social acceptance of homosexuality as a normal variant of human sexuality. Consequently, the issue of changing sexual orientation has become highly politicized. The integration of gays and lesbians into the mainstream of American society is opposed by those who fear that such an integration is morally wrong and harmful to the social fabric. The political and moral debates surrounding this issue have obscured the scientific data by calling into question the motives and even the character of individuals on both sides of the issue. This document attempts to shed some light on this heated issue.

The validity, efficacy and ethics of clinical attempts to change an individual's sexual orientation have been challenged (3,4,5,6). To date, there are no scientifically rigorous outcome studies to determine either the actual efficacy or harm of "reparative" treatments. There is

sparse scientific data about selection criteria, risks versus benefits of the treatment, and long-term outcomes of "reparative" therapies. The literature consists of anecdotal reports of individuals who have claimed to change, people who claim that attempts to change were harmful to them, and others who claimed to have changed and then later recanted those claims (7,8,9).

Even though there are little data about patients, it is still possible to evaluate the theories which rationalize the conduct of "reparative" and conversion therapies. Firstly, they are at odds with the scientific position of the American Psychiatric Association which has maintained, since 1973, that homosexuality per se, is not a mental disorder. The theories of "reparative" therapists define homosexuality as either a developmental arrest, a severe form of psychopathology, or some combination of both (10-15). In recent years, noted practitioners of "reparative" therapy have openly integrated older psychoanalytic theories that pathologize homosexuality with traditional religious beliefs condemning homosexuality (16,17,18).

The earliest scientific criticisms of the early theories and religious beliefs informing "reparative" or conversion therapies came primarily from sexology researchers (19-27). Later, criticisms emerged from psychoanalytic sources as well (28-39). There has also been an increasing body of religious thought arguing against traditional, biblical interpretations that condemn homosexuality and which underlie religious types of "reparative" therapy (40-46).

References

1. National Association for Research and Treatment of Homosexuality, (1999), American Counseling Association Passes Resolution to Oppose Reparative Therapy. NARTH Web site: (www.narth.com/docs/acaresolution.html).
2. Bayer, R. (1981), Homosexuality and American Psychiatry; The Politics of Diagnosis. New York: Basic Books.
3. Haldeman, D. (1991), Sexual orientation conversion therapy for gay men and lesbians: A scientific examination. In Homosexuality: Research Implications for Public Policy, ed. J. C. Gonsiorek & J. D. Weinrich. Newbury Park, CA: Sage Pub., pp. 149-161.
4. Haldeman, D. (1994), The practice and ethics of sexual orientation conversion therapy. J. Consulting & Clin. Psychol., 62(2):221-227.
5. Brown, L. S. (1996), Ethical concerns with sexual minority patients. In: Textbook of Homosexuality and Mental Health. ed. R. Cabaj & T. Stein. Washington: American Psychiatric Press, pp. 897-916.
6. Drescher, J. (1997), What needs changing? Some questions raised by reparative therapy practices. New York State Psychiatric Society Bulletin, 40(1):8-10.
7. Duberman, M. (1991), Cures: A Gay Man's Odyssey. New York: Dutton.
8. White, M. (1994), Stranger at the Gate: To be Gay and Christian in America. New York: Simon & Schuster.
9. Isay, R. (1996), Becoming Gay: The Journey to Self-Acceptance. New York: Pantheon.

10. Freud, S. (1905), Three essays on the theory of sexuality. Standard Edition, 7:123-246. London: Hogarth Press, 1953.
11. Rado, S. (1940), A critical examination of the concept of bisexuality. *Psychosomatic Medicine*, 2:459-467. Reprinted in *Sexual Inversion: The Multiple Roots of Homosexuality*, ed. J. Marmor. New York: Basic Books, 1965, pp. 175-189.
12. Bieber, I., Dain, H., Dince, P., Drellich, M., Grand, H., Gundlach, R., Kremer, M., Rifkin, A., Wilbur, C., & Bieber T. (1962), *Homosexuality: A Psychoanalytic Study*. New York: Basic Books.
13. Socarides, C. (1968), *The Overt Homosexual*. New York: Grune & Stratton.
14. Ovesey, L. (1969), *Homosexuality and Pseudohomosexuality*. New York: Science House.
15. Hatterer, L. (1970), *Changing Homosexuality in the Male*. New York: McGraw Hill.
16. Moberly, E. (1983), *Homosexuality: A New Christian Ethic*. Cambridge, UK: James Clarke & Co.
17. Harvey, J. (1987), *The Homosexual Person: New Thinking in Pastoral Care*. San Francisco, CA: Ignatius.
18. Nicolosi, J. (1991), *Reparative Therapy of Male Homosexuality: A New Clinical Approach*. Northvale, NJ: Aronson.
19. Kinsey, A., Pomeroy, W., & Martin, C. (1948), *Sexual Behavior in the Human Male*. Philadelphia, PA: Saunders.
20. Kinsey, A., Pomeroy, W., & Martin, C. and Gebhard, P. (1953), *Sexual Behavior in the Human Female*. Philadelphia, PA: Saunders.
21. Ford, C. & Beach, F. (1951), *Patterns of Sexual Behavior*. New York: Harper.
22. Hooker, E. (1957), The adjustment of the male overt homosexual. *J Proj Tech*, 21:18-31.
23. Bell, A. & Weinberg, M. (1978), *Homosexualities: A Study of Diversity Among Men and Women*. New York: Simon and Schuster.
24. Bell, A., Weinberg, M. & Hammersmith S. (1981), *Sexual Preference: Its Development in Men and Women*. Bloomington, IN: Indiana University Press.
25. LeVay, S. (1991), A difference in hypothalamic structure between heterosexual and homosexual men. *Science*, 253:1034-1037.
26. Hamer, D., Hu, S., Magnuson, V., Hu, N. & Pattatucci, A. (1993), A linkage between DNA markers on the X-chromosome and male sexual orientation. *Science*, 261:321-327.
27. Bem, D. (1996), Exotic becomes erotic: A developmental theory of sexual orientation. *Psychol. Review*, 103(2):320-335.
28. Marmor, J., ed. (1965), *Sexual Inversion: The Multiple Roots of Homosexuality*. New York: Basic Books.
29. Mitchell, S. (1978), Psychodynamics, homosexuality, and the question of pathology. *Psychiatry*, 41:254-263.
30. Marmor, J., ed. (1980), *Homosexual Behavior: A Modern Reappraisal*. New York: Basic Books.
31. Mitchell, S. (1981), The psychoanalytic treatment of homosexuality: Some technical considerations. *Int. Rev. Psycho-Anal.*, 8:63-80.
32. Morgenthaler, F. (1984), *Homosexuality Heterosexuality Perversion*, trans. A. Aebi. Hillsdale, NJ: The Analytic Press, 1988.
33. Lewes, K. (1988), *The Psychoanalytic Theory of Male Homosexuality*. New York: Simon and Schuster. Reissued as *Psychoanalysis and Male Homosexuality* (1995), Northvale, NJ: Aronson.
34. Friedman, R.C. (1988), *Male Homosexuality: A Contemporary Psychoanalytic Perspective*. New Haven: Yale University Press.
35. Isay, R. (1989), *Being Homosexual: Gay Men and Their Development*. New York: Farrar, Straus and Giroux.
36. O'Connor, N. & Ryan, J. (1993), *Wild Desires and Mistaken Identities: Lesbianism & Psychoanalysis*. New York: Columbia University.
37. Domenici, T. & Lesser, R., eds. (1995), *Disorienting Sexuality: Psychoanalytic Reappraisals of Sexual Identities*. New York: Routledge.
38. Magee, M. & Miller, D. (1997), *Lesbian Lives: Psychoanalytic Narratives Old and New*. Hillsdale, NJ: The Analytic Press.
39. Drescher, J. (1998) *Psychoanalytic Therapy and The Gay Man*. Hillsdale, NJ: The Analytic Press.
40. Boswell, J. (1980), *Christianity, Social Tolerance and Homosexuality*. Chicago, IL: University of Chicago Press.
41. McNeil, J. (1993), *The Church and the Homosexual*, Fourth Edition. Boston, MA: Beacon.
42. Pronk, P. (1993), *Against Nature: Types of Moral Argumentation Regarding Homosexuality*. Grand Rapids, MI: Eerdmans.
43. Boswell, J. (1994), *Same-Sex Unions in Premodern Europe*. New York: Villard Books.
44. Helminiak, D. (1994), *What the Bible Really Says About Homosexuality*. San Francisco, CA: Alamo Press.
45. Gomes, P. J. (1996). *The Good Book: Reading the Bible with Mind and Heart*. New York: Avon.
46. Carrol, W. (1997), On being gay and an American Baptist minister. *The InSpiriter*, Spring, pp. 6-7,11.

Position Statement on Psychiatric Treatment and Sexual Orientation

Approved by the Board of Trustees, December 1998
Approved by the Assembly, November 1998

"Policy documents are approved by the APA Assembly and Board of Trustees...These are...position statements that define APA official policy on specific subjects..." – *APA Operations Manual*.

The Board of Trustees of the American Psychiatric Association removed homosexuality from the *DSM* in 1973 after reviewing the evidence that it was not a mental disorder. In 1987, ego-dystonic homosexuality was not included in the *DSM-III-R* after a similar review.

The American Psychiatric Association does not currently have a formal position statement on treatments that attempt to change a person's sexual orientation, also known as reparative or conversion therapy. There is an APA 1997 *Fact Sheet on Homosexual and Bisexual Issues* which states that there is no published scientific evidence supporting the efficacy of reparative therapy as a treatment to change one's sexual orientation.

The potential risks of reparative therapy are great, including depression, anxiety and self-destructive behavior, since therapist alignment with societal prejudices against homosexuality may reinforce self-hatred already experienced by the patient. Many patients who have undergone reparative therapy relate that they were inaccurately told that homosexuals are lonely, unhappy individuals who never achieve acceptance or satisfaction. The possibility that the person might achieve happiness

and satisfying interpersonal relationships as a gay man or lesbian is not presented, nor are alternative approaches to dealing with the effects of societal stigmatization discussed. The APA recognizes that in the course of ongoing psychiatric treatment there may be appropriate clinical indications for attempting to change sexual behaviors.

Several major professional organizations including the American Psychological Association, the National Association of Social Workers and the American Academy of Pediatrics have all made statements against reparative therapy because of concerns for the harm caused to patients. The American Psychiatric Association has already taken clear stands against discrimination, prejudice and unethical treatment on a variety of issues including discrimination on the basis of sexual orientation.

Therefore, the American Psychiatric Association opposes any psychiatric treatment, such as reparative or conversion therapy which is based upon the assumption that homosexuality per se is a mental disorder or based upon the a priori assumption that the patient should change his/her sexual homosexual orientation.

An initial version of this position statement was proposed in September 1998 by the Committee on Gay, Lesbian, and Bisexual Issues of the Council on National Affairs. It was revised and approved by the American Psychiatric Association Assembly in November 1998. The revised version was approved by the Board of Trustees in December 1998.

APA Background Statement

Position Statement on Therapies Focused on Attempts to Change Sexual Orientation (Reparative or Conversion Therapies): SUPPLEMENT

Recommendations:

1. APA affirms its 1973 position that homosexuality per se is not a diagnosable mental disorder. Recent publicized efforts to repathologize homosexuality by claiming that it can be cured are often guided not by rigorous scientific or psychiatric research, but sometimes by religious and political forces opposed to full civil rights for gay men and lesbians. APA recommends that the APA respond quickly and appropriately as a scientific organization when claims that homosexuality is a curable illness are made by political or religious groups.
2. As a general principle, a therapist should not determine the goal of treatment either coercively or through subtle influence. Psychotherapeutic modalities to convert or "repair" homosexuality are based on developmental theories whose scientific validity is questionable. Furthermore, anecdotal reports of "cures" are counterbalanced by anecdotal claims of psychological harm.

In the last four decades, "reparative" therapists have not produced any rigorous scientific research to substantiate their claims of cure. Until there is such research available, APA recommends that ethical practitioners refrain from attempts to change individuals' sexual orientation, keeping in mind the medical dictum to First, do no harm.

3. The "reparative" therapy literature uses theories that make it difficult to formulate scientific selection criteria for their treatment modality. This literature not only ignores the impact of social stigma in motivating efforts to cure homosexuality, it is a literature that actively stigmatizes homosexuality as well. "Reparative" therapy literature also tends to overstate the treatment's accomplishments while neglecting any potential risks to patients. APA encourages and supports research in the NIMH and the academic research community to further determine "reparative" therapy's risks versus its benefits.