

Movement puts major focus on changing homosexuals

By Larry Witham
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A gathering of Transformation Ex-Gay Ministries tomorrow in Falls Church will be small compared with the numbers involved in the American sexual revolution, but its topic is no less explosive.

Former homosexuals will talk about how they were "healed" by counseling, behavior changes — and religious awakening.

The group, one of about 200 such ministries in the nation, is the Washington chapter of Exodus International, the largest umbrella group in the movement.

"This is growing rapidly to be a worldwide ministry," said Transformation director and former homosexual Anthony Falzarano, whose offices are in the District. "What Alcoholics Anonymous is to the alcoholic, Exodus will be to the homosexual."

Whatever the group's enthusiasm, its programs and theories are pitted against an establishment much larger than itself.

The idea of "reparative therapy" or spiritual "healing" has been rejected by committees of the nation's two associations of psychologists and psychiatrists and condemned by homosexual-rights advocates.

The daylong conference at Falls Church Episcopal Church weighs into the "nature vs. nurture" debate on whether genetics or experience shape sexuality and pits the two high priests of the West — the minister and psychiatrist — against each other.

"Ex-gay ministry merges Christian life with the psychological," Mr. Falzarano said. "We don't drag anyone in here, but our phone rings off the hook."

Homosexual-rights groups and some professional clinicians have called the trend quackery.

"These quacks and their so-called therapy are only making an impact on the vulnerable people," said Douglas Hattaway, spokesman for the Human Rights Campaign Fund, a large gay-rights

Professionals reject claims of 'healing'

organization.

Bryant L. Welch, a committee head for the American Psychological Association, said at a 1990 gay-rights news conference that "homosexuality is neither mental illness nor moral depravity."

He added: "Nor is homosexuality a matter of individual choice. Research suggests that the homosexual orientation is in place very early on in the life cycle, possibly even before birth."

The American Psychiatric Association fact sheet states: "There

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is no published scientific evidence supporting the efficacy of 'reparative therapy' as a treatment to change one's sexual orientation."

Mr. Falzarano and others say these statements come from small committees, often under pressure from lobbies or homosexuals in the profession.

But a 1979 American Psychiatric Association survey found that 69 percent of psychiatrists viewed homosexuality as a disorder, according to the book "Homosexuality and American Psychiatry."

When 207 psychologists were asked in a recent Research Corp. survey whether homosexuality could be changed, 53 percent said yes, 25 percent said "not sure" and 22 percent said no.

The debate over changing homosexuality gained prominence with the gay-rights movement.

In 1973, an American Psychiatric Association committee deleted homosexuality from its Diagnostic and Statistical Manual of Mental Disorders (DSM).

The category of "ego dystonic homosexuality," or feeling conflict with one's same-sex attraction, was deleted from the DSM in 1987.

"Homosexuality is an arrested emotional development from failure to bond with the same-sex parent figure," said David Forster, a former homosexual and Hollywood actor who directs Mastering Life Ministries in Nashville, Tenn.

Mr. Forster, a speaker tomorrow, said this need for same-sex love can make young people vulnerable to homosexual abuse by adults.

"The homosexual is looking for the love of his father," he said. "You could get that healing through therapy, but it's much tougher. We would add the power of God."

After more than a decade of homosexual living and prostitution in Hollywood, he said, "I was healed with a supernatural bonding with God the Father."

The secular school of therapy is called "Aesthetic Realism," which holds that homosexuality arises from a learned fear or hate of the opposite sex.

But it is the religious approach that is growing.

"If there's a non-religious movement it's less visible than the ministries," said Joe Dallas of Genesis Counseling in Orange, Calif.

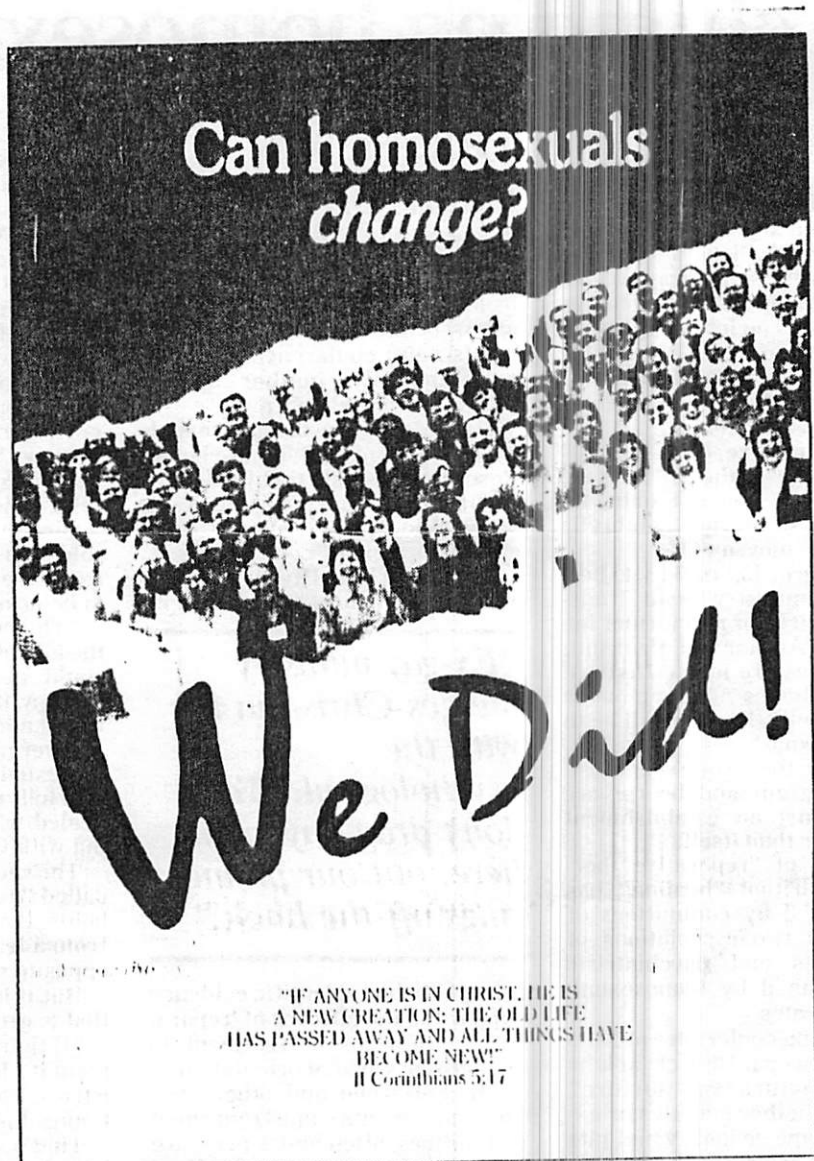
That's probably because, he added, religion takes beliefs seriously, whereas psychology looks at behavior or biology. "It's a person's world view that shapes their sexuality in my view," Mr. Dallas said.

He said the "ego-dystonic" distinction was helpful because it clinically allowed persons to reject or accept their homosexual behavior on the grounds of beliefs. "It allowed mutual respect," he said.

All of this puts reparative therapy on the nurture side of the nature-nurture debate.

"When we hear the other side we can make a choice," said Marjorie Hopper, 63, a former lesbian who

Jull



This poster of Exodus International is adamant in its assertion that homosexuals can — and should — change their sexual orientation.

heads Another Chance Ministry in Vancouver, British Columbia. "Now I've made a choice."

Miss Hopper, also a speaker tomorrow, was close to having surgery to become a man after 30 years of lesbian life.

Judith Reisman, a researcher in the field of sexual abuse, said that homosexual media can persuade people to choose homosexuality.

"What you see helps create who you are," Mrs. Reisman said.

She will present to tomorrow's conference her study of "in search of" ads in the Advocate, the nation's upscale gay magazine, compared with Washingtonian magazine ads for the same years, 1988-1992.

"The data on the Advocate confirms what its reader will accept what they will tolerate," she said.

She found that while 86 percent of white males in Washingtonian ads used language seeking a long-term heterosexual relationship, only 2 percent of Advocate ads for same-sex relations implied a long-term commitment.

"It disproves the argument that homosexuals are no different than heterosexuals," she said.

AMA stops backing efforts to 'straighten out' gays

ASSOCIATED PRESS

The American Medical Association, reversing a 13-year-old policy, has stopped recommending efforts to turn unhappy homosexuals into heterosexuals.

In a report adopted by the AMA's governing House of Delegates earlier this month, the association calls for a "nonjudgmental recognition of sexual orientation by physicians."

"All patients, regardless of their sexual orientation, have a right to respect and concern for their lives and values," says the report, titled "Health Care Needs of Gay Men and Lesbians in the U.S." "However, gay men and lesbians face ostracism and discrimination from some health professionals."

The policy paper, adopted at a meeting Dec. 6, replaces a 1981 paper titled "Health Care Needs of the Homosexual Population." The 1981 paper supported treatments

aimed at changing the sexual orientation of homosexuals. The notion that homosexuals could not be turned into heterosexuals, it said, was a myth.

"There are some homosexuals who would like to and probably could change their sexual orientation," the old policy read. "Because some homosexual groups maintain, contrary to the bulk of scientific evidence, that preferential or exclusive homosexuality can never be changed, these people may be discouraged from seeking adequate psychiatric consultation. What is more important is that this myth may also be accepted by homosexuals."

In its new policy paper, the AMA notes that homosexuals may have "some unique mental health concerns" related to negative social attitudes regarding homosexuality. However, it says, most of the emotional disturbance homo-

sexuals may feel about their orientation "is due more to a sense of alienation in an unaccepting environment."

For this reason, it says, "aversion therapy" — such as showing a homosexual man nude pictures of men and then administering electric shocks or a substance to induce vomiting — "is no longer recommended for gay men and lesbians."

"Through psychotherapy, gay men and lesbians can become comfortable with their sexual orientation and understand the social responses to it," the new policy says.

Dr. M. Roy Schwarz, the AMA's vice president, said yesterday that the report is an attempt to educate physicians about the unique health care needs of the homosexuals.

"Our thrust here was what kind of diseases do these people with these lifestyles get, not do you

have the right lifestyle and do you try to change it if you don't," he said.

Dr. Schwarz also expressed surprise that the policy paper was adopted without dissent.

"There were physicians who announced from the floor [of the meeting] that they were gay," he said. "That wouldn't have happened five years ago."

The new policy paper was drafted after a meeting last year between AMA leaders and officials from the Gay and Lesbian Medical Association, a group that has pressed the AMA for years to change its policies toward both homosexual physicians and patients.

"I really believe that the truth won out more than politics," said Benjamin Schatz, GLMA executive director. "But I don't think we would have made the progress that we made if we hadn't been pro-

gressively promoting our perspective."

Mr. Schatz called the new policy paper "a very powerful document to get health departments and government agencies to pay adequate attention and resources to gay and lesbian health concerns."

The paper also acknowledges the discomfort some doctors feel around homosexuals. It cites a 1989 survey of general practitioners that found only one-third felt comfortable with homosexual men and 11 percent felt homosexuality was an illness.

The American Psychiatric Association removed homosexuality from its list of mental illnesses in 1973.

The AMA policy paper also cites a 1994 study by Mr. Schatz's organization that found 64 percent of its members believed that homosexual patients risked receiving substandard care.