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# The Politics of Changing Sexual Orientation

Editor

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**Abstract.** This article identifies cognitions of value that permeate political discourse on the scientific validity of intentionally changing sexual orientation via clinical methods.

A psychiatrist recently has publicized a study suggesting that close to 2/3 of male and 1/2 of female homosexuals who sought clinical help to become heterosexual were able to achieve "good heterosexual functioning." Two psychologists recently have publicized a study suggesting that 90% of homosexuals seeking to change their sexual orientation through clinical methods failed in the quest, while about 5% achieved a "heterosexual shift." Much of the controversy over these and similar studies covers important concepts of reliability, validity, subject selection, and clinical intervention. However, the controversy often glosses over, discounts, or ignores other issues that may set anchoring points in any debate--even if these points are implicit and out of awareness of the debaters.

First is the very construct of sexual orientation. Public discourse largely treats the construct as conceptually and statistically discrete with a very small number of categories: viz., heterosexual, homosexual, and bisexual. Here the construct seems to be largely dependent on the gender of one's preferred human sexual partner. Yet the construct actually may be conceptually and statistically continuous. Boundaries between categories may be quite permeable. Exemplars or prototypes of categories may be difficult to aggregate so that members of category classes may vary in a number of significant ways. Here the construct is dependent on the gender identity and intrapsychic and behavioral means of sexual gratification of all human sexual participants. And another series of characteristics apply if some of the sexual subjects and objects are not human or inanimate. Moreover, sexual orientation may be ever-changing in some or all of its many constituents. The question should then become not if sexual orientation can change or be changed but how.

Second is what acceptably constitutes clinical intervention that can foster change of sexual orientation above and beyond how a given orientation may already be changing. Most often, time-limited combinations of shock therapy, cognitive therapy, and behavioral therapy have been employed in the quest for change. Occasionally, interventions employing more time--e.g., psychoanalysis or analytic therapy--have been employed. More extreme interventions featuring a 24-hour-per-day control of a subject's environment for very extended periods of time and including all possible combinations of reinforcement, omission training, and punishment have not been reported in the clinical literature. Of course, there are very sound ethical and moral arguments for not applying the more extreme interventions. But the fact remains--advocating that sexual orientation can be changed intentionally beyond how it already may be changing without external change attempts is dependent and contingent on what constitutes acceptable clinical change strategies.

Third is the nature of the political world and the various groupings of social and cultural warriors who are contesting for the available spoils. The agendas of pro-change and anti-change advocates may more robustly involve strengthening the privileged status of specific ways of life much more than a so-called objective appraisal of clinical intervention. The rubric of "scientific method" too easily becomes no more than a sword and shield of group entitlement.

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In conclusion, one might argue that the study of changing sexual orientation masquerades as a noumenal enterprise, can be unmasked as a phenomenal enterprise, and will continue as a political enterprise. (See Daskalos, C.T. (1998). Changes in the sexual orientation of six heterosexual male-to-female transsexuals. *Archives of Sexual Behavior*, 27, 605-614; Goode, E. (May 9, 2001). Scientist says study shows gay change is possible. *The New York Times*, <http://www.nytimes.com>; Kemena, B. (2000). Changing homosexual orientation? Considering the evolving activities of change programs in the United States. *Journal of the Gay and Lesbian Medical Association*, 4, 85-93; Klein, F., Sepekoff, B., & Wolf, T.J. (1985). Sexual orientation: A multi-variable dynamic process. *Journal of Homosexuality*, 11, 35-49; Schaeffer, K.W., Hyde, R.A., Kroencke, T., McCormick, B., & Nottebaum, L. (2000). Religiously-motivated sexual orientation change. *Journal of Psychology and Christianity*, 19, 61-70; Segal, L. (1997). Sexualities. In K. Woodward (Ed.). *Culture, media, and identities*. (pp. 183-238.) The Open University.)(Keywords: Gender Identity, Sexual Orientation.)