



DESERT STREAM™
LIVING WATERS
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Power to Change:

Exorcizing 'Conversion Therapy'



By Andrew Comiskey

"No-one is imposing change-friendly therapy on a person who seeks 'gay'-identification."

ON THE STEPS of the federal courthouse in Orange County California, a throng of us gathered to declare our fruitful lives, post 'gay'-identification. We were countering the lies driving Assembly Bill 2943, which sought to outlaw persons seeking—or extending help for—growing beyond LGBT+ selves.

I was the first to speak; my point was simply to honor the earthy, empowered churches in California (mostly Vineyard Christian Fellowships) which dignified my desire to make peace with women and the particular one I married. I could barely hear myself speak as LGBT+ activists chanted loudly: 'It's OK, you are still gay!'

Annoyance aside, I heard loud and clear that day what drives persons seeking to ban clinical and pastoral care for persons seeking sexual identity change: you cannot, you should not, and you will not. 'Change is impossible.' And this from a merry band that invents new gender variants (60 and counting) and cheers persons who slalom between male and female partners and personas, with some deciding not to identify with any gender. Until they do, only to change again.

Psychologist and change activist Dr. Laura Haynes cites a recent study of LGBT+ adults in which the majority experienced a shift in their sexual attractions, sometimes accompanied by a shift in identity. (Katz-Wise, S. and Hyde J., Sexual Fluidity and Related Attitudes and Beliefs among Young Adults with a Same-Gender Orientation. Archives of Sexual Behavior, Nov. 7th 2014.)

Rigorous research has established internationally that same-sex attraction shifts or changes for a majority of men and women, mostly toward exclusive

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opposite-sex attraction, according to a research review by Drs. Lisa Diamond and Rosky who summarized their findings this way: 'Arguments based on the immutability of sexual orientation are unscientific, given that research does not indicate that sexual orientation is uniformly determined at birth or that patterns of attraction remain fixed over the life course.' (Diamond, L. and Rosky, C. (2016). *Journal of Sex Research*, 00 (00), 1-29.)

Yet in the last seven years, fourteen states passed laws that prohibit any change efforts for minors in the area of sexual desire or identity. As AB 2943 and similar bills attest, activists throughout our nation are broadening their anti-change goals to include persons of all ages who aspire to gender clarity and the faith communities which support them.

Why do rainbow advocates who champion exotic change oppose persons who journey toward more traditional goals? Two faulty beliefs come to play.

The first belief: people cannot change. It is impossible. Matthew Shurka, a 'gay'-identified activist who testifies in legislatures around the country against change, believes that all LGBT+ rights are sourced in the impossibility of sexual identity change. He recently expressed to a New York Time's reporter: 'It's still the same question: "Can someone change?"' (NYT, January 22, 2019). Therapist Dr. Julie Hamilton, a family therapist who now testifies to the unconstitutional nature of banning change efforts, agrees with the question but has a different answer: 'The LGBT+ rights movement seems to have been built on the foundation of two myths, that homosexuality is biologically based and that change of sexual orientation is not possible. Therapy aimed at change undermines both of these myths. Activists are typically opposed to the idea that people can and do change in the area of identity, behavior, and/or attractions.'

The belief that sexual identity is immutable and probably sourced in genetics persists but has been disproved. According to Dr. Haynes, 'The American Psychological Association's Handbook of Sexuality and Psychology (2014) says there is no gay gene, sexual attraction and dis-identifying with one's sex are not simply biologically determined, and that there are always psychological causes.' Along with psychoanalytic factors in the development of same-sex inclinations, Haynes points out the APA Handbook says, 'childhood sexual abuse has associative and potentially causal links to having a same-sex partner.'

Maybe frustration and disillusionment drives some anti-change witnesses who claim to have sought change with no success. To be sure, change is a challenge for most persons: marked by fits and starts and a kind of sober vulnerability that requires more support than one typically finds in either the Christian or the LGBT+ communities. It is easy to perceive of oneself as a failure along the way. And to alter the truth as a way of managing this dour perception.

That drives the belief that LGBT+ selves are not sourced in psychological damage but in biological destiny. No brokenness, no need for a cure. One may even spiritualize this, as in the disturbing witness of Apple CEO Tim Cook: 'Being gay is God's greatest gift to me' (CNN Interview, October 26th, 2018).

Corresponding to the belief that one cannot change is the second faulty premise. One shouldn't be given opportunity to change. Progressives claim that anti-change efforts are in the best interests of fragile people who might get hurt aspiring to more than their LGBT+ destiny. Adding shame and insult to prospective injury are trumped up horror stories of 'conversion' therapy. Though I know no therapist who has ever used that language to describe the work they do (see 'Language Matters'), we as a culture have pretty much bought the perception that therapeutic 'change' agents are heavy-handed and ineffective. Rather than healing, the 'conversion-ist' is framed as abusive: diagnosing wounds that don't exist and employing techniques that inflict new wounds.

Activists trump up exaggerated, outdated claims to demonize caregivers who accompany persons seeking change. To be fair, a fraction of therapists in the now distant past may have engaged in what psychologist Dr. Timothy Lock describes as 'bad therapy': this includes any 'aversive therapeutic techniques' (e.g., electrically shocking clients when aroused by same-sex images, a practice that ceased in the 1960's) or any less dramatic way in which a therapist contributes to a client's bad shame by heaping more on him or her. This is not good therapy and no therapist claiming professional status could get away with this today.

A shift is occurring due to the hard work of reasonable people like Drs. Haynes and Hamilton. Tales of coercive, punitive 'interventions' are falling away, as they are discerned for what they are: anecdotes distorted by now 'gay'-identified men with political axes to grind.

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Dr. Haynes reported that in a recent legislative battle in Utah, the aforementioned Clifford Rosky admitted that ‘aversive methods have not been used in 40-50 years’; the bill was amended to validate ‘talk therapy’, which is the client-driven model that therapists employ as they come alongside persons seeking help. The anti-change bill lost its punch and was thrown out altogether.

We can assert the truth-in-love of what good therapists do: they come alongside of persons who for reasons of conscience, in accord with scientific reason, want to grow beyond same-sex attraction or gender dis-identification. Dr. Joe Nicolosi is especially mindful of the non-negotiable need for the client, not the therapist, to direct where he or she wants to go in therapy. Son of the late Joseph Nicolosi who was the chief architect and proponent of Reparative Therapy for men which posits same-sex attraction as a symptom of a profound drive to repair wounds and emotional deficits, Dr. Joe says: ‘Like my father, I’ve an iron-clad conviction that a client has a right to choose his own direction in therapy. One should be able to explore the pursuit of his or her values as (s)he sees fit... persons have the right to align their sexuality with their values.’

This value-clash over whether or not persons should be able to pursue help for achieving their sexual and relational goals is what is really at stake in the battle over ‘conversion therapy’. Let’s be clear: this fight involves the faulty belief that persons shouldn’t be free to align their sexual identifications with their values. Shouldn’t be free to do so...Who is doing the moralizing here? No-one is imposing change-friendly therapy on a person who seeks ‘gay’-identification. But activists, driven by faulty assumptions about what is best for others, are seeking to eradicate what for some persons is the only way they desire to work out their sexuality. These are at once

philosophical, moral and spiritual values. And they will not be taken away from persons who hold them most dear. These values govern one’s concept of what it means to be a whole human being.

To be specific, I am referring to persons with a Judeo-Christian mindset who believe that there is a God who designed all of creation, themselves included. That design involves the capacity of humans to create, which involves the psychological ‘stuff’ required to relate lovingly and faithfully to the opposite gender. Any barrier to doing so, including same-sex attraction, childhood trauma, rejection of one’s own body, fear of the other gender, or sexual addiction, becomes good ground for therapy. In other words, Judeo-Christian values direct one to honor God, His order, and to engage in a therapeutic process in order to surmount these barriers and proceed onto fruitful relationships.

Why? For the sake of happiness, for human dignity. For the believer, well-being involves realizing what it means to be made in His image, according to His design. Knowing the truth is one thing; realizing it requires helpers who know these values, respect them, and help one realize their design: one disclosure, one wound, one misperception, one encouragement at a time. To deny persons that assistance is to deny them their pursuit of happiness.

Is this then a spiritual battle? Certainly the drive to destroy change-friendly therapies has an irrational edge. For example, the National Association of Social Workers references some change efforts as ‘therapeutic rape’. What motivates persons to demonize others who want to make peace with their biological gender or to grow beyond the domination of same-sex desires? Why cannot one group allow another to secure happiness as they define it?

Perhaps some LGBT+ warriors are actually uncertain of their position; knowing the strength of the Judeo-Christian view and conflicted by guilt over it, they must work that much harder to destroy the source of their conflict. So rather than give someone a choice to live that truth, they remove that choice and make it a lie: ‘It’s OK, you’re still gay...’ And this from the very group that champions ‘sexual fluidity’! J. Budziszewski writes: ‘To relieve the sting of guilt, we entomb it in nacre [mother-of-pearl] until it seems beautiful to us...every movement to excuse a moral wrong becomes a movement to condone it, and every movement to condone a moral wrong

“we as a culture have pretty much bought the perception that therapeutic ‘change’ agents are heavy-handed and ineffective... the ‘conversion-ist’ is framed as abusive: diagnosing wounds that don’t exist and employing techniques that inflict new wounds.”



becomes a movement to extend it' (What We Can't Not Know; Dallas: Spence 2003, p. 198.) Finally, every move to assert intrinsic LGBT+ 'selves' is a move to annihilate those who claim change is possible.

The truth: no matter how strong our feelings to the contrary and regardless of our efforts to erase it, the law is still written on our hearts and in our bodies (Romans 2:15). We did not design ourselves. The Designer's Spirit and voice persists in us. Budziszewski again: 'We are put together in such a way that although we can be pushed and pulled and drowsied by flickering images, we can't be satisfied by them; we know too much, even in oblivion. Fallen knowledge troubles our sleep. We lie under a prickling enchantment of the image carved in our hearts, which is stronger than the counter spell and can never be quite scratched out' (What We Can't...p. 172.)

But we can try to dull that truth by expending herculean amounts of time, energy, and money fashioning a self in the image that seems right to us. Anyone who disagrees becomes a threat to that image. Fragile selves require thick defenses to survive and sharp swords to slay opposing views.

We who commit to a change process hold up a mirror to those who refuse that process; in that reflection they may see their own disappointments, guilt and shame, or the threat of non-being. Activist Shurka's comment that all LGBT+ rights are based on the truth that people cannot change means that if some people actually do change then he and his peers lose their power base, their reason-to-be.

Doubtless, we must exercise care and sensitivity in upholding our right to change and to secure the help we need to change. We must consider that activists were once children who in their gender disintegration most likely suffered abuse, if not from adults then by peers who tend to be merciless to strugglers. Therapist Robert Vazzo makes this link between how bullied ones have become political bullies today. LGBT+ activists 'are doing to others what was done to them: marginalizing, ostracizing, bullying and rejecting. We are destined to project onto others behaviors and feelings that we have not dealt with.'

So we who advocate for change—and who need advocates to change—must approach our own goals with quiet compassion. Change is real, change is good, change takes time. Change is hard. For that reason we do well

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to combine unflagging conviction with utter humility. Dr. Julie Hamilton urges 'therapists to not overstate the potential for change' in any specified area so that clients have a realistic view of a process with built-in limits.

Beware of any source of help that guarantees moral or psychological perfection (see 'Marching Orders')! Rather, on the foundation of the apostles and prophets we stand on the unchanging nature of His love and explore our restoration amid pain, weakness and failure. New life springs from the Crucified. We who draw upon divine help in becoming the men and women of His design do well to honor mercy more than a therapist or our own uneven efforts.


Mercy frees us to grow into the truth. And to convey truth-in-love, respecting another's right to refuse it. Yet truth is truth. It cannot be extinguished. We can know this in the battle over 'conversion' therapy. We do well to champion the right to secure the help we need to live out that truth.

We should never insist that another seek the therapeutic help we desire; that is coercive, ineffective, and justifies the charge that Christians impose their values on others. However, we as Christians must awaken to this real threat of discrimination—legislation that wants to dissolve the truth that change in sexual desire and identity is possible and good for those who seek it. We must witness to this truth in whatever realm of influence we possess. We cannot ensure a person's agreement with our truth but can guarantee its fair representation in the public square. **DSM**



Marching Orders

I. SPEAK UP when you hear persons disparaging ‘conversion therapy.’ Politely and firmly say: ‘Though no worthy therapist would every use that language, I am appalled at the propaganda employed by the LGBT+ community to make change efforts sound ridiculous and dangerous. I am grateful for clinicians who use their skill to help clients achieve their goals of overcoming same-sex attraction or making peace with their biological gender.’ If you do not speak up, lies surrounding ‘conversion therapy’ circulate without resistance.



*We help
mobilize you
to provide a
truthful, Spirit-
empowered
track protected
by good
boundaries
for your faith
community.*

2. DISCOVER AND SUPPORT God-fearing therapists in your world who have the guts to accompany clients in these goals. They exist, and they are gold. Many therapists risk diminished counseling loads by clinical associations who scrutinize and scorn them. Especially vulnerable are therapists skilled in working with youth and their families. Though all helpers should be extremely wise and sensitive in working with pre-adults, clinicians can lose their license for helping a child sort out his or her feelings, needs, and possibilities in the sexual arena. Support these saints! They are persecuted professionals and need our prayers, advocacy, and referrals. If you are hurting, secure a good therapist for yourself. I am a believer!

Find out more on therapeuticchoice.com.

3. PASTORS AND CHURCH LEADERS, you have a unique responsibility. Strugglers and family members look to you for the truth about change and how to secure it. I see many young church leaders holding a line when it comes to biblical truth but waffling at the prospect of 'change' due to 'conversion therapy' myths. Be bold! Discover the counselors in your midst, vet them, and refer to them. That requires humility: you cannot do it all. Employ the best of psychological help through persons who can serve your charges and help train your teams. Draw upon the counselors and resources of Restored Hope Network (restoredhopenetwork.org) or check out Dr. Joe Nicolosi's training opportunities at reintegrativetherapy.com.

4. LET'S NOT QUIBBLE about the difference between supernatural transformation and the process of psycho-therapy. A wise faith-filled person who seeks medical help for physical symptoms also enlists spiritual intercessors for healing. We need natural and supernatural help: healing presence and a process that involves corrective emotional experiences. A well-equipped counselor may well have the freedom to accompany you with greater skill, constancy and focus than well-intentioned friends and spiritual leaders.

5. DRAW UPON the whole healing community. Any wise counselor knows the limits of a weekly (at best) 50-minute session with a hurting person. Anyone seeking

integration in his or her identity needs a village! Find that village by realizing the different needs that different streams provide: body life, a culture of worshipping the living God, cultivating spiritual disciplines and friends/mentors who get you and love you enough to call you into more. This is where groups like **Living Waters** are essential. We help mobilize you to provide a truthful, Spirit-empowered track protected by good boundaries for your faith community. I don't think there is a better way for an assortment of disintegrated persons seeking Jesus' best to work out sexual and relational issues together. Check us out at desertstream.org. Get trained to do your part to ensure your community is actually a healing one.

6. SOME OF US NEED to step out in faith and say 'yes' to testifying in courtrooms and legislatures around this country as to how Jesus and His people (including trained therapists) set us free from LGBT+ alternatives. Few know this simple fact, a truth we should wave strategically before policy makers in our country. No better way to grow: standing for the truth in the public square and learning to express concisely and wisely the whole healing plan that we value and want to see available for any who want it! God may just bring a huge increase as He did for my friends Ken Williams and Elizabeth Woning who took up the AB 2943 battle courageously and mobilized mighty Bethel Church in Redding to fight for freedom of choice. Check them out at Changed.org. In no small part to their efforts, AB 2943 was shelved.

7. STAY HUMBLE, ever attuned to the deepening work of integration Jesus invites us to realize. This is a lifetime process that should keep us in awe of both the mystery of God's redemptive hand and of our own depths; just when we think we're done, God and His provocative members exposes a new divide in us He wants to bridge. What an adventure! The more integrated we are in our skin, the more convincingly we live the truth-in-love. Secure-in-love, we lay down smug defenses and invite others into healing without demonizing those who refuse that process. The point is: people of faith deserve a choice, the right to find skilled accompaniment that aligns with our values. We must live and speak our truth before that right is taken away from us and from those who will come after us. **DSM**

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Conversion Therapy Language Matters

No-one I know uses the term 'conversion therapy'; I have never heard it used by any therapist who accompanies persons seeking to overcome same-sex attraction or gender self-rejection. However, the term has been defined by lawmakers as any counseling, practice or treatment performed with the goal of changing an individual's sexual attractions, behavior, or identity.' In the public square, this term functions as propaganda intended to vilify a fraudulent performer—the counselor who imposes a treatment—rather than a caregiver who respects the client's right to determine a course of action that lines up with his or her values.

Executive Director of the Restored Hope Network Anne Paulk further explains: 'Conversion therapy is

an ideological term used by the LGBT+ activist community and their supporters who seek to link compassionate spiritual care and talk therapy with disreputable practices.' Dr. Laura Haynes describes conversion therapy as 'a catch-all term that serves as a kitchen sink into which they [opponents of change] can throw anything they want...the term permits grotesque mischaracterization of what licensed, professional therapists do in change-allowing therapy... 'Conversion' is a term intended to accuse professionals of doing religious counseling rather than professional psychotherapy, with the intent of denigrating both. So I would never identify with the term.'

What then do we call therapeutic help for persons seeking help for gender identity issues? Hamilton

is happy with inclusive 'therapy', Haynes prefers the term 'change-allowing therapy', Robert Vazzo and the Alliance for Therapeutic Choice and Scientific Integrity (formerly NARTH) officially uses 'SAFE-T' (Sexual Attraction Fluidity Exploration in Therapy), therapist Robert Brennan 'transformational therapy', while Dr. Tim Lock describes his work as 'trauma therapy'. The late Dr. Joseph Nicolosi's son Joe refers to now copyrighted 'Reintegrative Therapy'; he differentiates this from his dad's work as a broader term that includes but is not limited to gender identity issues. He describes his work as 'a process which helps the client identify split-off parts of self that drive disruptive behaviors; as the client integrates these parts, disruptive behaviors and desires lessen.'

Language matters. What all of these therapists share is an open-ended universe in which the client determines to not live under the low ceiling of same-sex attraction or gender self-rejection. The words employed by these healers suggest hope: the person possesses resources to change.

These therapists help clients identify non-sexual sources of distress that contributed to same-gender desires or self-rejection. Here language matters as well. None of these healers refer to an LGBT+ nature or even the language of 'sexual orientation' as if one's sexual destiny is determined and static. Rather, they tend to refer to LGBT+ selves as symptoms of underlying issues; these good therapists are adept at working within the unique world of each soul in order to discover keys that unlock barriers to healthy self-acceptance and to walk together into new ways of relating.

These helpers are inclined to look at early emotional needs and the impact of trauma—the different ways persons stop becoming who they are. Trusting, respectful therapeutic bonds make all the difference in exploring painful conflictual relationships as well as new ways of forming bonds that line up with the client's values: how they want to love and be loved.

While these therapists are happy to encourage persons in their change process, they are quick not to use language like 'I will ensure your sexual orientation changes.' They do not work directly on changing desires but on bolstering or healing broken areas of the soul that surround sexual identity. In truth, none of them major solely

Language matters in the good fight to ensure fair and effective help for persons who want to align their sexuality with their values.

on gender identity problems but rather on a range of issues that may impact interpersonal development. Dr. Julie Hamilton represents well the practices represented by the professionals who contributed to this newsletter. 'What I provide is therapy, talk therapy for many different issues. Gender identity confusion and homosexual attraction are no different than many of the other issues I help address.'

I love the language of 'integration' in the therapeutic process: to me it means the goal of uniting with the deepest, truest, essentially masculine 'me', resulting in an enlarged capacity to offer myself to others. For example, I knew intuitively that my desires toward a certain type of male had everything to do with masculine qualities I wanted to embrace in myself but could not. Therapy assisted me in this process of integration; masculine confidence and opposite sex attraction increased as homosexual desire lessened. No small goal, but I am made for it. And it requires excellent therapists!

Language matters in the good fight to ensure fair and effective help for persons who want to align their sexuality with their values.

Each of these therapists should be commended for clearing the healing path and inviting us onto it. **DSM**

Contributing Therapists:

Dr. Julie Hamilton is a licensed marriage and family therapist in private practice in south Florida. Dr. Hamilton speaks on topics related to homosexuality and gender confusion, including steps parents can take to help prevent gender identity confusion in the lives of their children. (julie@drjuliehamilton.com)

Joseph Nicolosi Jr., Ph.D. is a licensed clinical psychologist and founder of the Reintegrative Therapy Association in Southern California. He was recently featured in the film **Free to Love** which features the stories of men with same-sex attractions who went through Reintegrative Therapy. (reintegrativetherapy.com)

Dr. Tim Lock is a licensed psychologist in Connecticut who founded the *Goretti Center for Healing and Forgiveness*, and is an Associate Professor at Divine Mercy University. His general practice includes treatment of clergy and religious, and of trauma, anxiety disorders and sexual issues. (timothylock@sbcglobal.net)

Robert Brennan is a licensed marriage and family therapist in Anaheim California who treat men and women who desire a healthy gender identity, and parents of children with same-sex attraction. His focus is on the transforming presence of God. (www.apokata.com)

Dr. Laura Haynes, a retired clinical psychologist in Orange County, CA, is a political activist for change allowing therapy and one of its preeminent voices in our nation. (Laurahaynesphd3333@gmail.com)

Robert Vazzo, MFT, is a licensed clinical counselor with practices in Los Angeles and Las Vegas who assists men, largely religious, who are struggling with unwanted same-sex attraction, pedophilia, or fetishes. (Healingtherapy1@yahoo.com)

Freedom of Choice

By Annette Comiskey

I DON'T FEEL I have much to add to this newsletter. Andy and these therapists have far more expertise than I do. I do have decades of experience walking alongside of persons with same-sex attraction.

My brother was many years older than me. He was smart, funny, kindhearted and extremely broken. I never knew with whom I was interacting: the kind brother, or the one who was cruel and selfish.

My brother "came out" in his early 20's when I was in elementary school. His moral choices were heartbreaking to my parents. Though they disagreed with him, they never rejected nor judged him.

There were circumstances that helped shape my brother's sexuality. My dad was overseas in WWII when my brother was young. He had some health issues as a boy that would have been treated differently today. Also, he was extremely smart and tall—6'4" as a 15-year-old senior in high school. He avoided male peer friendships and most girls saw him as a towering neutered pal.

My brother's 'gay' declaration corresponded with the sexual revolution of the 1960's. We lived in the San Francisco area; there, in the burgeoning LGBT Castro mecca, my brother lived his new life. In truth, he lived in conflict, never able to integrate his sexual choices with his faith.

I longed for him to find a church that offered him the care and acceptance that he wanted but also confirmed who he was as God's son. When he was in college, he tried a few Christian gatherings but they 'didn't know what to do with him'. The gay community was an easy refuge, sensational in its lures. Relationships were sexually charged more than emotionally deep, and he immersed himself in chemicals to help quiet his confusion. Church required a 'whole person' investment that he did not want to give and then lost the capacity to give. He was also unable to forge long-term 'love' with an exclusive friend.

I wonder how his life would have been different had he been able to trust a caring professional. A solid Christian therapist might have given him the space to talk about how his personality and hard life impacted his sexuality and life choices. He needed a 'father' he could trust to be objective and to advocate for healing his fractured heart and self-perceptions. His experience with uncaring pastors and rejecting peer groups required a relational solution that may have started with a counselor. I shudder to think that counselors could be prohibited in the future from offering a whole picture of one's life and options rather than blessing a person's 'gay' nature.

My brother passed away a few years ago. His last few years were difficult; he unraveled on many fronts and had no true community except for Andy, myself and my sister. He never gave up on loving Jesus though he would never submit himself to His care. I grieve over my brother's life to this day and want only to ensure that persons have real guides as to how to sort out their hard lives. That must involve licensed professionals who can at least highlight freedom of choice for persons who have all the LGBT+ liberties they want but who are still broken and suffering.



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