

Homosexuality and The American Psychological Association

Dishonesty and Infliction of Harm

It is this author's belief that the American Psychological Association (APA) is and has been intentionally misleading, in its public presentation of the issue of Homosexuality to such an extent as to be materially dishonest,

The American Psychological Association, one needs to keep in mind, is a very prominent professional and self-stated 'scientific' organization, the most prominent of the psychological associations. It is relied upon by the public for non-biased factual information. It is relied upon in the public forum for the purpose of helping to decide important societal issues and by School systems to develop their curriculum. Similarly, of course it is relied upon by individuals and parents in understanding their own and their childrens' psychological development. There would be no reason for the unsuspecting public to believe anything other than that the American Psychological Association, as a Scientific organization with strict bylaws and standards, does anything but present scientific fact to the best of its ability.

Let's take the case of a boy who (tragically, but too commonly) is sexually molested or raped at a young age. Generally these molestations are homosexual in nature, and very often boys who are sexually molested, who have gone through such a traumatic event, question their sexual identity upon and after entering puberty. The assault interferes with their psycho-sexual development. There have been reports of this time and again. I myself have met a number of such men who had been so assaulted as boys. There have been a number of studies that have shown a high correlation of childhood sexual molestation and later homosexual tendencies and orientation. Please see the research of 1) Tomeo, Templer, Anderson and Kotler, 2) Helen Wilson and Cathy Wisdom etc.

Let us assume this young man, now 13 or 14, comes to the American Psychological Association's resources to help him understand the turmoil he finds himself in, or is counseled at school, whereupon a teacher or counselor turned to the American Psychological Association's resources for guidance.

Copied here, then, (directly below) is “Answers to Your Questions About Sexual Orientation and Homosexuality”, as available on the **American Psychological Association**’s website in 2007, reproduced word for word. Since then modifications have been made to what the APA asserts regarding homosexuality, but the politization and material dishonesty regarding the issue has continued. I include the APA’s entire presented section about Sexual Orientation and Homosexuality so there can be no confusion and so as to disabuse others from an assumption that this has been taken out of context.

Answers to Your Questions About Sexual Orientation and Homosexuality

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What Is Sexual Orientation?

Sexual Orientation is an enduring emotional, romantic, sexual or affectional attraction to another person. It is easily distinguished from other components of sexuality including biological sex, gender identity (the psychological sense of being male or female) and the social gender role (adherence to cultural norms for feminine and masculine behavior).

Sexual orientation exists along a continuum that ranges from exclusive homosexuality to exclusive heterosexuality and includes various forms of bisexuality. Bisexual persons can experience sexual, emotional and affectional attraction to both their own sex and the opposite sex. Persons with a homosexual orientation are sometimes referred to as gay (both men and women) or as lesbian (women only).

Sexual orientation is different from sexual behavior because it refers to feelings and self-concept. Persons may or may not express their sexual orientation in their behaviors.

What Causes a Person To Have a Particular Sexual Orientation?

There are numerous theories about the origins of a person's sexual orientation; most scientists today agree that sexual orientation is most likely the result of a complex interaction of environmental, cognitive and biological factors. In most people, sexual orientation is shaped at an early age. There is also considerable recent evidence to suggest that biology, including genetic or inborn hormonal factors, play a significant role in a person's sexuality. In

summary, it is important to recognize that there are probably many reasons for a person's sexual orientation and the reasons may be different for different people.

Is Sexual Orientation a Choice?

No, human beings can not choose to be either gay or straight. Sexual orientation emerges for most people in early adolescence without any prior sexual experience. Although we can choose whether to act on our feelings, psychologists do not consider sexual orientation to be a conscious choice that can be voluntarily changed.

Can Therapy Change Sexual Orientation?

No. Even though most homosexuals live successful, happy lives, some homosexual or bisexual people may seek to change their sexual orientation through therapy, sometimes pressured by the influence of family members or religious groups to try and do so. The reality is that homosexuality is not an illness. It does not require treatment and is not changeable.

However, not all gay, lesbian, and bisexual people who seek assistance from a mental health professional want to change their sexual orientation. Gay, lesbian, and bisexual people may seek psychological help with the coming out process or for strategies to deal with prejudice, but most go into therapy for the same reasons and life issues that bring straight people to mental health professionals.

What About So-Called "Conversion Therapies"?

Some therapists who undertake so-called conversion therapy report that they have been able to change their clients' sexual orientation from homosexual to heterosexual. Close scrutiny of these reports however show several factors that cast doubt on their claims. For example, many of the claims come from organizations with an ideological perspective which condemns homosexuality. Furthermore, their claims are poorly documented. For example, treatment outcome is not followed and reported overtime as would be the standard to test the validity of any mental health intervention.

The American Psychological Association is concerned about such therapies and their potential harm to patients. In 1997, the Association's Council of Representatives passed a resolution reaffirming psychology's opposition to homophobia in treatment and spelling out a client's right to unbiased treatment and self-determination. Any person who enters into therapy to deal with issues of sexual orientation has a right to expect that such therapy would take place in a professionally neutral environment absent of any social bias.

Is Homosexuality a Mental Illness or Emotional Problem?

No. Psychologists, psychiatrists and other mental health professionals agree that homosexuality is not an illness, mental disorder or an emotional problem. Over 35 years of objective, well-designed scientific research has shown that homosexuality, in and itself, is not associated with mental disorders or emotional or social problems. Homosexuality was once thought to be a mental illness because mental health professionals and society had biased information. In the past the studies of gay, lesbian and bisexual people involved only those in therapy, thus biasing the resulting conclusions. When researchers examined data about these people who were not in therapy, the idea that homosexuality was a mental illness was quickly found to be untrue.

In 1973 the American Psychiatric Association confirmed the importance of the new, better designed research and removed homosexuality from the official manual that lists mental and emotional disorders. Two years later, the American Psychological Association passed a resolution supporting the removal. For more than 25 years, both associations have urged all mental health professionals to help dispel the stigma of mental illness that some people still associate with homosexual orientation.

Can Lesbians, Gay Men, and Bisexuals Be Good Parents?

Yes. Studies comparing groups of children raised by homosexual and by heterosexual parents find no developmental differences between the two groups of children in four critical areas: their intelligence, psychological adjustment, social adjustment, and popularity with friends. It is also important to realize that a parent's sexual orientation does not dictate his or her children's.

Another myth about homosexuality is the mistaken belief that gay men have more of a tendency than heterosexual men to sexually molest children. There is no evidence to suggest that homosexuals are more likely than heterosexuals to molest children.

Why Do Some Gay Men, Lesbians and Bisexuals Tell People About Their Sexual Orientation?

Because sharing that aspect of themselves with others is important to their mental health. In fact, the process of identity development for lesbians, gay men and bisexuals called "coming out", has been found to be strongly related to psychological adjustment—the more positive the gay, lesbian, or bisexual identity, the better one's mental health and the higher one's self-esteem.

Why Is the "Coming Out" Process Difficult for Some Gay, Lesbian and Bisexual People?

For some gay and bisexual people the coming out process is difficult, for others it is not. Often lesbian, gay and bisexual people feel afraid, different, and alone when they first realize that their sexual orientation is different from the community norm. This is particularly true for people becoming aware of their gay, lesbian, or bisexual orientation as a child or adolescent, which is not uncommon. And, depending on their families and where they live, they may have to struggle against prejudice and misinformation about homosexuality. Children and adolescents may be particularly vulnerable to the deleterious effects of bias and stereotypes. They may also fear being rejected by family, friends, co-workers, and religious institutions. Some gay people have to worry about losing their jobs or being harassed at school if their sexual orientation became well known. Unfortunately, gay, lesbian and bisexual people are at a higher risk for physical assault and violence than are heterosexuals. Studies done in California in the mid 1990s showed that nearly one-fifth of all lesbians who took part in the study and more than one-fourth of all gay men who participated had been the victim of a hate crime based on their sexual orientation. In another California study of approximately 500 young adults, half of all the young men participating in the study admitted to some form of anti-gay aggression from name-calling to physical violence.

What Can Be Done to Overcome the Prejudice and Discrimination the Gay Men, Lesbians, and Bisexuals Experience?

Research has found that the people who have the most positive attitudes toward gay men, lesbians and bisexuals are those who say they know one or more gay, lesbian or bisexual person well—often as a friend or co-worker. For this reason, psychologists believe negative attitudes toward gay people as a group are prejudices that are not grounded in actual experiences but are based on stereotypes and prejudice.

Furthermore, protection against violence and discrimination is very important, just as it is for other minority groups. Some states include violence against an individual on the basis of his or her sexual orientation as a "hate crime" and 10 U.S. states have laws against discrimination on the basis of sexual orientation.

Why is it Important for Society to be Better Educated About Homosexuality?

Educating all people about sexual orientation and homosexuality is likely to diminish anti-gay prejudice. Accurate information about homosexuality is especially important to young people who are first discovering and seeking to understand their sexuality—whether homosexual, bisexual, or heterosexual. Fears that access to such information will make more people gay have no validity—information about homosexuality does not make someone gay or straight.

Are All Gay and Bisexual Men HIV Infected?

No. This is a commonly held myth. In reality, the risk of exposure to HIV is related to a person's behavior, not their sexual orientation. What's important to remember about HIV/AIDS is it is a preventable disease through the use of safe sex practices and by not using drugs.

Where Can I Find More Information About Homosexuality?

APA Lesbian, Gay, and Bisexual Concerns Program
750 First Street, NE. Washington, DC 20002
Email: [LGBC](mailto:LGBC@apa.org)

National Gay and Lesbian Task Force

2320 17th St. Washington, DC 20009 (202) 332-6483

Email: NGLTF

Parents, Families and Friends of Lesbians and Gays

1726 M Street, NW, Suite 400, Washington, DC 20036 (202) 467-8180

Email: PFLAG

Sexuality Information and Education Council of the United States

130 W 42nd St., Ste. 350 New York, NY 10036 (212)-819-9770

Email: SIECUS

The first question the APA poses is "What is Sexual Orientation?" I have copied the APA's Questions and answers first, italicized here, and then commented myself on what I think most people will have to conclude is the dishonest and misleading information that the American Psychological Association provides.

APA: What Is Sexual Orientation?

Sexual Orientation is an enduring emotional, romantic, sexual or affectional attraction to another person. It is easily distinguished from other components of sexuality including biological sex, gender identity (the psychological sense of being male or female) and the social gender role (adherence to cultural norms for feminine and masculine behavior).

Sexual orientation exists along a continuum that ranges from exclusive homosexuality to exclusive heterosexuality and includes various forms of bisexuality. Bisexual persons can experience sexual, emotional and affectional attraction to both their own sex and the opposite sex. Persons with a homosexual orientation are sometimes referred to as gay (both men and women) or as lesbian (women only).

Sexual orientation is different from sexual behavior because it refers to feelings and self-concept. Persons may or may not express their sexual orientation in their behaviors.

The first question one may have, regarding these definitive scientific statements, is fairly obvious. The American Psychological Association states that:

"Sexual Orientation is an enduring emotional, romantic, sexual or affectional attraction to another person."

The APA is asserting, as one specific definition, that sexual orientation is an enduring emotional attraction to another person. I would like to know if the APA agrees with this statement, which directly flows from their statement above: I have an enduring emotional attraction to my father. Does that define my Sexual Orientation? I have enduring emotional and affectional attractions to childhood and current friends. Is that my Sexual Orientation? If a boy has enduring emotional attractions to his friends, does that define his sexual orientation? A boy to his mother? To his father? A little girl to her (girl) friend?

Again. APA: "Sexual Orientation is an enduring emotional, romantic, sexual or affectional attraction to another person."

To another person? A person? The APA certainly goes on to correlate sexual orientation to one's relation to gender, not a person, but one has to ask why the APA is phrasing this in such a way; ie what is going on here. The APA, a professional organization with then 148,000 members, on its official website defines sexual orientation, in its leadoff paragraph, in a way that on the surface is patently nonsensical. This is from the same prestigious organization that devotes great resources to covering this topic. Aside from being nonsensical, the statement is also confusing and vague. And I believe that is purposely the case.

It gives a definition of this crucial term – Sexual Orientation - as so broad as to be almost meaningless. One might speculate that the statement is so patently false, that perhaps it was just a gross mistake. But the definition of Sexual Orientation for the APA as a professional organization carries legal ramifications and Sexual Orientation is and has been the subject of a great amount of published papers and I would say 'advocacy' on the APA's part. Likely the reason the APA here is defining Sexual Orientation in this way is to try to deflect critics through obfuscation as much as anything else, and also potentially to attempt to reduce legal exposure. One can assume that the APA does not wish to define the term accurately, for which and on which it will go on to assert so much, because if it did so its later assertions (statements of Science according to the APA) would not follow or make sense.

But the APA does go on to assert a tremendous amount about Sexual Orientation itself, with strikingly definitive statements.

To reiterate, this is a topic about which the APA is professionally obligated to treat scientifically. It asserts that it is a scientific organization and it is assumed by the public to be just that.

The APA's next sentence, on examination, makes more clear how misleading the first one is. The APA goes on to state that:

"It (Sexual Orientation, parentheses mine) is easily distinguished from other components of sexuality including biological sex, gender identity (the psychological sense of being male or female) and the social gender role (adherence to cultural norms for feminine and masculine behavior)."

That sounds scientifically precise, and the APA is supremely authoritative (is *easily* distinguished) but the APA had defined Sexual Orientation, the proper noun, as "emotional, romantic, sexual, or affectional". Here the APA, in the very next sentence, clearly defines it as sexual. (*"It is easily distinguished from other components of sexuality"*).

That does not follow at all.

Though the APA uses scientific wording, the vagueness, and it would almost seem absurdity, continues. It proceeds to state that:

APA: "Sexual orientation exists along a continuum that ranges from exclusive homosexuality to exclusive heterosexuality and includes various forms of bisexuality." That is a very safe statement. This "Sexual Orientation", (an enduring emotional, romantic, sexual or affectional attraction to another person – the APA's definition) exists along a continuum. It ranges, according to the APA, from "exclusive homosexuality to exclusive heterosexuality and includes various forms of bisexuality" it is important to note at this point that the APA has neither defined "Homosexuality" nor "Heterosexuality" For that matter neither has "Bisexuality" been defined.

Step back and look at that. Read it again. That is bizarre.

The APA does go on however, to next assert that *"Bisexual persons can experience sexual, emotional and affectional attraction to both their own sex and the opposite sex."* Again, "sexual, emotional and affectional". If a man can have emotional and affectional attractions to both other men (such as his friends, his father, his grandfather, or his son), and women, that would seemingly make him, under this APA Scientific explanation, 'bisexual'. That is patently absurd.

As well, there is a subtle but very important change here in the APA's language. While in the first sentence, defining Sexual Orientation in total, the APA states that it is an enduring emotional, romantic, sexual, **or** affectional attraction to another person. The operative word the APA uses in its opening definition here is "or". Just three sentences later, the APA changes that and uses "and" in its definition of bisexuality. . Again, **"Bisexual persons can experience sexual, emotional and affectional attraction to both their own sex and the opposite sex."** So now, in defining Bisexuality, the APA is stating that someone who is Bisexual can experience sexual attraction to both their own sex and that of the opposite sex.

If the APA had been consistent it would have stated Bisexual persons can experience sexual, emotional or affectional attraction to both their own sex and the opposite sex." That definition would necessarily have to have followed from their definition of the broader category of "Sexual Orientation". This again though would have been obviously absurd and wrong. Laughable. All normal people can feel at least one of these things to just about anyone given the right circumstances, and that need have nothing to do with their particular sexual attractions.

Why did the American Psychological Association do this? As you will see it seems clearly that the APA did this to go on to later assert what they wish to about *Homosexuality*. This is crucial, because the APA shortly thereafter uses its definition of Bisexuality to come up with their definitions of Homosexuality and Heterosexuality.

One could go on taking these statements apart for some time. A very important question to ask is why would such a prestigious, national professional organization seek or allow itself to present such an important issue in such an inane way? Is it intentionally being misleading? Again, it is very important to note that this organization that is putting forward such apparent illogical nonsense, spends a great deal of time on the issues of homosexuality; this is not an incidental issue to the APA. So their official statements as copied here are all the more striking.

Next the APA states that "Persons with a homosexual orientation are sometimes referred to as gay (both men and women) or as lesbian (women only)."

The American Psychological Association defined "Sexual Orientation" "an enduring emotional, romantic, sexual or affectional attraction to another person." But here they define Bisexuality as necessarily including sexual attraction (the use of the word "and"). Why? It would seem clearly upon analysis that the APA does this so they can later define homosexuality as necessitating a component of sexual attraction (which they will then go on to assert is essentially immutable). While the APA defines "Sexual Orientation" as "enduring emotional, romantic, sexual or affectional attraction to another person" what becomes quite clear in successive statements is that the APA would like to define it as "sexual" attraction, and not to an individual person, but to persons defined by gender

. For now though seemingly, as the APA so defines it, someone who is "gay" may refer to someone who can experience emotional and affectional attraction to their own sex. The young man who goes to the APA's site and admits to himself, that indeed he does have emotional and affectional attractions to his own sex, would likely conclude that he may then be, or is likely to be, "gay".

These emotional and affectional attractions to members of one's own sex have often been termed by society as, well, "friends". They are friends.

The American Psychological Association's definitions and assertions are obviously not true. More importantly, the APA cannot itself believe them, if taken at face value. Either, the authors of the APA's site are relative idiots, or something else is going on here, and I do not believe the authors of the APA's professional website to which they devote so much effort, are relative idiots.

To get back to our example, to this young man who has been molested and is, a number of years later, having questions and is confused about his sexual thoughts and impulses. These definitions are very important to him. He does not know what is going on with himself and has come to the APA's site for professional, scientific advice. Or his parents or a counselor have. This boy may kill himself, G-d forbid, and yet the APA's official site seems quite clearly to be intentionally misleading.

The APA next asks the question: ***"What Causes a Person To Have a Particular Sexual Orientation?"***

The APA answers:

"There are numerous theories about the origins of a person's sexual orientation; most scientists today agree that sexual orientation is most likely the result of a complex interaction of environmental, cognitive and biological factors. In most people, sexual orientation is shaped at an early age. There is also considerable recent evidence to suggest that biology, including genetic or inborn hormonal factors, play a significant role in a person's sexuality. In summary, it is important to recognize that there are probably many reasons for a person's sexual orientation and the reasons may be different for different people."

"Most", "most", "most", "considerable", "probably", "may be different for different people". Can't get much safer than this wording.

Contrast though this vagueness and lack of definitiveness, as regards the causes of "Sexual Orientation", with just several brief paragraphs later, the APA's very definitive statements on the impossibility of modifying said sexual orientation

This is all the more striking, I would say astounding, considering what the APA later goes on to say (later, below).

At the risk of some repetition, the APA has defined sexual orientation (immediate previous paragraph with no alternative stated definition, certainly not controlling) as *an enduring emotional, romantic, sexual or affectional attraction to another person.*" The APA then asks what causes a person to land somewhere on a continuum of enduring emotional, romantic, sexual or affectional attraction to another person (inserting here their definition for Sexual Orientation), ostensibly to either their own or the other gender, or both if as the APA says, they are "bisexual". The APA states that most scientists today agree that this (one's place on this defined continuum) is "most likely the result of a complex interaction of environmental, cognitive and biological factors" etc. for which there are numerous theories and many reasons, and which may vary for different people.

"Environmental, cognitive, and biological" Safe again.

The APA continues: **“In most people, sexual orientation is shaped at an early age.”** Most people, but not all.

“There is also considerable recent evidence to suggest that biology, including genetic or inborn hormonal factors, play a significant role in a person's sexuality” In parallel to my other questions I would like to ask the APA, what specific recent (reliable and scientifically replicable) studies suggested this genetic or inborn hormonal factors? Which studies did the APA have in mind when it wrote this in 2007? Provide them. It should readily be able to provide both as a scientific organization and of course because many people have made life altering changes based on these specific assertions. The directions of millions of lives have been changed based on this organizations' assertions. Again, many have given up hope of marrying someone of the opposite sex and many have contracted diseases such as AIDS as a result, at least in substantial part, of not believing that there was a point in addressing underlying psychological issues that contribute to compulsive and dangerous sexual behavior.

The APA continues:

“In summary, it is important to recognize that there are probably many reasons for a person's sexual orientation and the reasons may be different for different people.” Very safe, but again, read in conjunction with the APA's definition of sexual orientation, essentially unusable and worthless.

Next, and very importantly given both today's societal debates and the impact this has on individuals trying to understand their own development, the APA asks:

“Is Sexual Orientation a Choice?”

The APA answers, now, strikingly, **very definitely**:

“No, human beings can not choose to be either gay or straight. Sexual orientation emerges for most people in early adolescence without any prior sexual experience. Although we can choose whether to act on our feelings, psychologists do not consider sexual orientation to be a conscious choice that can be voluntarily changed.”

How many times has this, the APA's definitive professional statement, been cited in court cases? How many individuals have considered its professional and scientific conclusions in evaluating their own thoughts and feelings? How many therapists have relied on it in treating patients, school counselors guiding children? How many have acted on the subsequent conclusions? How many have given up hope of marriage (yes, to someone of the opposite gender), concluded their feelings and impulses were inborn, acted on them and then gotten infected with HIV/AIDS?

How often have these, the APA's assertions, been used to defame therapists that know this is not true, that seek to help people who do not wish to be stuck in homosexual thought patterns, who wish to get married as they've hoped for? What value, would one put on these therapists' suffering? Their social and professional marginalization? Their lack of livelihood that comes with the latter?

If I have professional obligations and I mislead someone in that capacity, and in so doing contribute to their getting sick, what is my liability? And If I do it, as a professional organization, to thousands? In tort law a jury can approximate proportional responsibility and award compensatory damages, not to mention punitive damages because of intentional deception.

I'll move back to the American Psychological Association's specific, authoritative text:

“Human beings can not choose to be either gay or straight”. No ambiguity there. That is as definitive as one could imagine. One would hope the APA could back up such a claim.

“Gay, straight”? The APA has noticeably not defined either term it now makes such a strong and conclusive statement about.

For clarity: The APA attempted to define “gay” in passing, but only through referencing terms “sexual orientation” and “homosexual orientation”, that are themselves defined in only a nonsensical manner. The APA did not define “straight”. “Gay” the APA defined as someone with a homosexual orientation. Again “Homosexual Orientation” the APA implicitly defined as apparently a specific variation of its definition of “Sexual Orientation”, which the APA defined, (once again for clarity) as “enduring emotional, romantic, sexual or affectional attraction to another person”.

Again, the APA states, in response to a question it poses: “**Is Sexual Orientation a Choice?**”

“No, human beings can not choose to be either gay or straight. Sexual orientation emerges for most people in early adolescence without any prior sexual experience.”

(Another definitive statement from the APA. No qualifiers here, as compared to all its many qualifications earlier regarding central terms and definitions.)

Further:

In the APA's definition of “Sexual Orientation” the APA stated that “Sexual orientation exists along a continuum that ranges from exclusive homosexuality to exclusive heterosexuality and includes various forms of bisexuality.” What then is the APA so definitively asserting here? By deduction it is that an individual's specific position, on a continuum “that ranges from exclusive homosexuality to exclusive heterosexuality and includes various forms of bisexuality” is fixed and immutable. Actually though, and importantly as you may have noticed, the APA limits its definitive statement of immutability to “homosexuality”. In the spectrum that the APA scientifically and confidently lays out this “exclusive homosexuality” would only be one extreme point or segment, the most extreme segment on the majority ‘homosexual’ side of the spectrum. Again these are the American Psychological Association's professional assertions. As well, when the APA states “*And includes various forms of bisexuality*”, *this seems to intentionally mislead* as well. This spectrum would seem to imply that the vast majority of people are bisexual, mixed between homosexual and heterosexual, in varying relative degrees. Would it not? It seems everyone not on the far heterosexual or homosexual side of the continuum would be Bisexual. The APA though states that these “various forms of bisexuality” are **also** there. “Also there” would imply a sporadic occurrence, not what is implied by the APA's earlier statements.

Rather than myself or any other person speculating on this spectrum, could the APA, rather, just post this spectrum online for the public – t Post the diagrams, and the charts and studies that establish this Spectrum and which they relied on here? The sources... It sounds like I am being facetious. Why? Because I do not believe these definitive sources, charts etc that would be the basis of these assertions, exist. Is that the case, American Psychological Association?

Regardless, for the benefit of millions of people, and whole societies please print your sources .

The APA again then is asserting that this place on this spectrum, at least on the majority or extreme Homosexual side, is fixed.

Is it as well fixed on the majority Heterosexual side? If not, why the difference? The APA must know, again, of all the cases of heterosexual men having homosexual relations when they are away from women for long periods of time. Again, the APA must know of heterosexual men being raped in prison, tragically and horribly. In prison and when many of these men come out of prison they often have homosexual thoughts and impulses, or do not feel as comfortably heterosexual as they did prior to such experiences, and have conflicting thoughts and feelings - the more so if the trauma had been repeated and they were made to take on feminine roles.

Their heterosexuality was not immutable. But then, neither was their homosexuality for usually in these circumstances they went into prison heterosexual.

And if these men address their traumas, and attempt to regain their attraction to women? Is that impossible for them to do?

The APA would have you conclude here that yes, it is impossible.

Stopping here, do these statements make any sense? Again, at the risk of repeating myself, the statements by this organization, often paraphrased, have had tremendous consequences for individuals and our society. And for societies and cultures across our connected world. Individuals, young people to whom this society has an obligation to be honest with,

have made momentous life changing decisions based on this organizations' statements, whether this supposedly scientific non-biased information was transmitted to them through their schools, various media, unsuspecting parents etc.

The American Psychological Association continues:

“Can Therapy Change Sexual Orientation?”

In now established form The American Psychological Association answers its own question definitively:

“No. Even though most homosexuals live successful, happy lives, some homosexual or bisexual people may seek to change their sexual orientation through therapy, sometimes pressured by the influence of family members or religious groups to try and do so. The reality is that homosexuality is not an illness. It does not require treatment and is not changeable.”

A very definitive statement from the APA. No qualifications, again as compared to all its torturous and 'pretzel - like' qualifications earlier in introducing and developing this subject matter. The APA again then is asserting that this place on this spectrum, at least on the majority or extreme Homosexual side, is fixed.

Is it as well fixed on the majority Heterosexual side? If not, why the difference? The APA must know, again, of all the cases of heterosexual men having homosexual relations when they are away from women for long periods of time. Again, the APA must know as referenced earlier of heterosexual men being raped in prison, tragically and horribly. In prison and Wwhen many of these men come out of prison they often have homosexual thoughts and impulses, or do not feel as comfortably heterosexual as they did prior to such experiences, and have conflicting thoughts and feelings, - the more so if the trauma had been repeated and they were made to take on feminine roles.

Their heterosexuality was not immutable. But then, neither was their homosexuality, for usually if they went into prison heterosexual! When they were raped and developed homosexual arousal patterns this homosexuality had not been immutable.

And if these men address their traumas, and attempt to regain their attraction to women? Is that impossible for them to do?

The APA would have you conclude here that yes, it is impossible.

Of note as well here is the APA throwing in statements and comments that have nothing to do with their own self directed question. ***“Even though most homosexuals live successful, happy lives, some homosexual or bisexual people may seek to change their sexual orientation through therapy, sometimes pressured by the influence of family members or religious groups to try and do so.”*** This has nothing to do with the question. This is not science. This is advocacy for a group.

Well, concerning this young man that was sexually molested, he then has a definitive answer. An answer that may influence his whole life. And shorten it. No girlfriends, no marriage then. His feelings are all immutable. Too bad.

The APA continues:

“However, not all gay, lesbian, and bisexual people who seek assistance from a mental health professional want to change their sexual orientation. Gay, lesbian, and bisexual people may seek psychological help with the coming out process or for strategies to deal with prejudice, but most go into therapy for the same reasons and life issues that bring straight people to mental health professionals”

(As a note, the APA has not defined what a “straight person” is, though they reference it above. Again, would that not have to be someone on the extreme heterosexual side of the sexual orientation continuum that the APA asserts? One would conclude from what the APA has previously said just several paragraphs before that such individuals would be relatively rare, yet the APA here references them seemingly as the norm, or the majority.)

Again, the APA answered with definitive “No’s”, as opposed to all the qualified statements that it used before, as to whether sexual orientation was a choice and as to whether “Therapy Can Change Sexual Orientation”.

Several paragraphs earlier the APA stated that sexual orientation is most likely the result of a complex interaction of environmental, cognitive and biological factors. So if the APA does not know what causes sexual orientation (“it is ‘most likely’ caused by”), how does it know therapy cannot modify it? Especially if sexual orientation is on a continuum as the APA asserts? Are not cognitive therapies used to help people ‘change’?

Even if most sexual orientations are formed at an early age, are not cognitive and other therapies used to help modify thoughts and feelings formed at an early age all the time? Of course they are. Can it be very difficult? Yes. But for a professional organization with professional responsibilities, looked at as an impartial font of scientific knowledge, to assert something that is not true is both horribly irresponsible and destructive.

As well, what about those human beings whose sexual orientation did **not** emerge without any prior sexual experience, as in the all too often case of molestations and other examples we have given? On what does the American Psychological Association base its assertion that for these human beings change along this continuum is impossible?

Again, there have been studies showing that a great many homosexual men were molested as boys. Why is the APA, as in my previous example, saying to these young men that they are stuck, that there is no hope for them if they do not want to be homosexual? Further, again for emphasis, in the view of the APA, why would different therapies not be able to help an individual modify or change his or her thoughts and impulses on such a continuum between homosexual and heterosexual thoughts, impulses and feelings? Differing forms of therapy, through understanding the underpinnings of one’s thoughts and feelings, are successful in treating and addressing many issues that manifest themselves sexually but are not in and of themselves rooted fundamentally in sexual issues. They are rooted deeper, in fears and angers etc. Sexual perversions, aggressions etc are treated by looking at and addressing the underlying issues. Understanding a man’s anger and or fear of women, and frustration with healthy sexual interactions with women can help to modify his feelings and urges to rape. It is similarly the case with other issues that manifest themselves in sexual and other forms. Are fetishes such as sexual attractions to shoes, also immutable? Why would it be any different here, in the case of a spectrum of homosexuality to heterosexuality?

It is my belief, and I would say studied conclusion that the APA, and organizations like it, are “sacrificing” these boys, girls, men and women for another purpose, whether that purpose be to abate the stigmatization of homosexuality or to placate a vocal group within their own organization. They are sacrificing, in this way, human beings, quite really, children, adolescents, young adults to whom we as a society have tremendous responsibilities and to whom we owe complete honesty.

Who would like their children to be lied to, with tremendous negative consequence? To be so sacrificed? How would one feel themselves when they discover they had been lied to to very often horrible consequences? They never got married, they never fulfilled their dreams, they never had the family they hoped for. They may or may not have contracted HIV/AIDS through compulsive behaviors. They never found proper counsel to address the healing from childhood assaults and their sexual manifestations. And so much of this suffering is in significant part a result of the actions of Professional Scientific groups. If not the direct cause of such suffering, I think it can be shown the American Psychological Association is and has been a party to such suffering in many cases, and has certainly aided and abetted it substantially in many ways both directly and indirectly. As an example if one denies the link between childhood homosexual molestation and later homosexuality then less resources are employed to understand the link and help those that have suffered.

The APA later asks if homosexuality is a Mental Illness or an Emotional Problem (see above).

Again it answers definitively “no”. But for the man who was raped, and is now acting out homosexually so as not to face those horrible thoughts and feelings of his being attacked and ‘invaded’, are his actions not part and parcel of an emotional problem? Isn’t acting out to avoid painful feelings and thoughts “disordered”, in that the acting out is a way not to address the painful feelings?

The boy who was molested and who feels unable to handle those horrific feelings of the assault and “invasion” and whom instead acts out homosexually so he feels in control. Can not his actions, without judgment, be seen as disordered in that the feelings and thoughts are in his mind, and he is acting out so as not to come to grips with them, to “face them”, to use a term in common parlance?

He may or may not be able to face them, but the acting out homosexually to avoid these feelings can certainly be seen to be that of an emotional problem, that of a disorder, and one that I may add deserves our compassionate help and support, not our denial, dismissal and dishonesty.

Of important note here is that the APA's dishonesty regarding this subject, as well as those of similar organizations, has discouraged therapies for treating those in need. How many individuals could have been helped, could currently be helped? How many killed themselves for lack of help?

What other societal problems are made worse by this dishonesty? Many boys who have been molested became violent out of a sense of rage and helplessness. They often hurt others as well as themselves, and in so doing undermine their own lives and those of others, men women and children. By lying to these kids about homosexual issues arising out of this sexual molestation, we are not giving them the avenues to work out many of their specific issues. We are in fact making it worse – we are lying to them about who they are, often fueling rage and violence. Do not many of these kids have a sense of the origins of their subsequent problems? What do you think the effect is of then having society, and “professionals” representing society, lie to them about it? Common sense would dictate that their anger, their fury, their sense of estrangement and injustice would increase?

Many of those sexually molested go on to molest or rape others, of both sexes, again often propelled by feelings of rage and helplessness at having suffered what they did. Almost all of these are men. Not providing the facilities to help them deal with the common homosexual feelings that arise from such experiences blocks off pathways to their ability to heal.

One can assume if they are told they are just “gay”, and that is that it will cause them not to seek help. But the problems will, again, likely remain and manifest itself in very destructive forms, to themselves and others.

To conclude, what is very apparent is the intentionally misleading nature of this, the American Psychological Association's definitive statements regarding sexual orientation and homosexuality . There was a point to the very cautious, misleading and contradictory definitions laid out earlier. It was, I strongly believe, to obfuscate and enable the dishonest and misleading statements that were to come later

If the boy in our previous example went to the APA's web site he would conclude that these homosexual thoughts and impulses were immutable, and could not be changed. One can see this boy, who remembers being molested or raped and how that traumatized him, and is now having significant problems (and who can connect the two, at least to a degree but doesn't understand what is going on - killing himself after being told there is no help for him.) Or he may go and act out these resultant issues and contract HIV/Aids.)

How can a professional organization do that to a child, an adolescent – how can it do that to anyone?

The young man of our example though, hearing the APA's definitive, scientific statements or listening to the confident, informed, scientific pronouncement of his teachers and others that have done their “research”, did not know that this organization was being dishonest.. In his mind, likely, many of his natural dreams and hopes are crushed, no hope for a normal life as he envisioned it not a girlfriend, not a wife. Little hope of working out his depression and sense of isolation he is suffering as a result of his experiences, for the issues of the molestation and the homosexual issues are inexorably linked. What is manifesting for him, while in puberty or later, are these homosexual thoughts and confusions, and the conclusive message he gets from the American Psychological Association is that there is no hope for him.

That this is a lie he doesn't know, and considering how prominent a scientific organization the American Psychological Association is, he shouldn't have reason to expect as much. It is tragic. I am confident thousands have been lost to this.

Further, this is the **American** Psychological Association.

Much of the world follows the United States' lead in academia. For American 'scientific' organizations such as the APA to mislead the international community is similarly horrific.

How often has this message been transmitted through our media, our institutions and our scientific leadership to other cultures, to kids and parents as noted above in Asia, in Africa, in Muslim countries? In Russia for that matter. Is their suffering not important? Hollywood, and other English media has similarly adopted the view of homosexuality as healthy and immutable, and has run with this narrative. It has then exported this to other nations and communities, through movies, television, the web etc.

What has and what will be the effect on these cultures' and these peoples' view of us? Put aside for now that we are undermining their cultural and religious views, telling them their views of an incredibly consequential issue are simply wrong? Does not an adolescent and his parents in Africa, India, Russia, and the Muslim nations (etc) have a right to not be grossly misled? What should they think of this, our American society, that is doing just that? There have been consistent complaints about the effects that our culture is having on other societies – by those very societies. We have generally brushed off those complaints. But here is a specific matter where we are exporting dishonesty about the very development of human beings, of one's own children, and in the process of this export, it is reasonable and logical to conclude that we are creating tremendous suffering.

How many adolescents in these countries, as in our own, after having read these scientific pronouncements or translations of them, conclude from thoughts and feelings common to adolescence and the process of growing up, that they must be homosexual, and have then acted out homosexually, and from doing so had those feelings further ingrained and strengthened, and then contracted HIV/AIDS? Do we expect people in Pakistan and other countries to suspect that this prominent American organization is being intentionally dishonest on such a central issue to their children's development? What value would the APA put on children's resultant suffering from being misled, and that of their parents and families? These young people that have given up on marriage? Mightn't this as well generate anger at us, the United States.

Would not that anger be valid?

Would such people necessarily, in such circumstances, realize that most Americans are just as misled?

This issue is not one of trivial importance to millions of people the world over who are trying to grow up. It is central to their identity and development. And of course the vast majority of these adolescents and others do not have the luxury of going to \$250 an hour Psychoanalysts in Manhattan or Beverly Hills, where top therapists can privately tell their patients that in fact homosexual thoughts are common to adolescence, resultant from a number of issues interwoven with that of normal development, and that "no", homosexual thoughts and impulses do not make one "gay" and are not immutable. Rather parents, adolescents etc in these societies, like most of our own society, watch and read these supposedly scientific pronouncements and assume all too often that what they say must be the case. They believe what they have been told is the "science". It is hard for many to believe that such august, prominent organizations, such as this the American Psychological Association, would be so materially dishonest about something so important.

As of 2014 two states, California and New Jersey, have passed laws that in effect prohibit a young man from working with a therapist to diminish and resolve homosexual thoughts resulting from his being raped or molested.

I implore you to take a minute and think about that. This is our society. A boy is homosexually molested or raped and the state prohibits therapists from helping the young man work out resultant homosexual issues.

So what now? I ask that this 'challenge' be both distributed and posted online. I ask that the American Psychological Association answer these charges, one by one and thoroughly, and I ask that this 'debate' be online and public so that society (and other societies) can have as much clarity as possible as regards this tremendously consequential issue.

I also ask that the APA preserve all its internal records and correspondence regarding the discussions and decisions that have led to their public scientific assertions regarding homosexuality. The damage and suffering has and continues to be tremendous.