



## Are Sexual Orientation Change Efforts (SOCE) Effective? Are They Harmful? What the Evidence Shows

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### EXECUTIVE SUMMARY\*

“Sexual orientation change efforts” (or SOCE) are efforts to help people with *unwanted* same-sex sexual attractions overcome those attractions and/or abstain from homosexual behavior. SOCE may include professional therapy or less formal (often religious) counseling.

At the urging of LGBT activists, some states have enacted or are considering legal restrictions upon the practice of SOCE. Critics of SOCE make two claims—that it is *ineffective*, and that it is *harmful*. This paper examines evidence for those claims, but first we must define terms.

“**Sexual orientation**” is an umbrella term which may refer to one or a combination of three components—sexual attractions, sexual behavior, or sexual self-identification.

“**Effective**” SOCE is therapy or counseling that results in any significant reduction in homosexual attractions or behaviors, or increase in heterosexual attractions.

“**Harm**” as a general consequence of SOCE can only be proven if harms exceed benefits, and negative indicators after SOCE exceed negative indicators without therapy, after “gay-affirming” therapy, or after other therapies.

Recent studies and surveys are summarized here, in reverse chronological order.

#### **July 23, 2018 – Santero, Whitehead, and Ballesteros, *The Linacre Quarterly*<sup>1</sup>**

In a survey of 125 men who had undergone SOCE, “68 percent self-reported some to much reduction in their same-sex attraction and behavior and also an increase in their opposite-sex attraction and behavior.” Clients experienced *positive* impacts in the areas of self-esteem, social functioning, self-harm, suicidality, and substance abuse. “The hypothesis of ineffectiveness of SOCE is rejected” and “the hypothesis that harm predominates is rejected strongly.”

#### **2017 – Black, *First Stone Ministries Effectiveness Survey*<sup>2</sup>**

This Christian ministry, focused on “overcoming all forms of sexual brokenness including homosexuality,” surveyed 185 former clients. Of those with same-sex attractions, 23 percent saw them eliminated completely. Of those who reported that they had a “sexual addiction” before coming to First Stone, 93 percent no longer considered themselves “addicted.” Of 98 concluding comments by respondents, 85 were positive in tone, and only seven negative.

### **2011 – Jones and Yarhouse, *Journal of Sex and Marital Therapy*<sup>3</sup>**

This “quasi-experimental longitudinal study spanning 6-7 years” began with a sample of 98 men and women, and 61 were tracked to the end of the study. They found that 53 percent of the final sample categorized the result of SOCE as “Success: Conversion (23%) or Success: Chastity (30%).” Measures of “psychological distress” indicated “improving psychological symptoms.”

### **2010 – Karten and Wade, *The Journal of Men’s Studies*<sup>4</sup>**

This study of 117 men found that after SOCE there were increases in “heterosexual self-identity” and in “reported heterosexual feelings and behavior,” along with a “decrease in reported homosexual feelings and behavior.” Subjects also reported a “positive change in their psychological functioning.”

### **2003 – Spitzer, *Archives of Sexual Behavior*<sup>5</sup>**

Spitzer interviewed 200 men and women who reported sexual orientation change. After SOCE, he found that 66 percent of males and 44 percent of females “satisfied criteria for Good Heterosexual Functioning.” He added, “Even participants who only made a limited change nevertheless regarded the therapy as extremely beneficial.” Spitzer listed six reasons why the “self-reports in this study are by-and-large credible” (and another LGBT-affirming scholar agreed).

In 2012, after years of abuse and harassment by LGBT activists, Spitzer reversed himself on this point, apologizing for the study because “there was no way to determine if the participants’ accounts of change were valid.” The editor of the *Archives of Sexual Behavior* refused to “retract” it, however, and the *evidence* contained in the article – the testimonies of the subjects themselves – remains unchanged.

### **2000 – Nicolosi, Byrd, and Potts, *Psychological Reports*<sup>6</sup>**

In this study, a large sample of 882 men and women completed a survey about their experiences with SOCE. The percentage of participants who identified themselves as “exclusively homosexual or almost entirely homosexual” declined from 67 percent to 12.8 percent, while the percentage who identified as “exclusively or almost entirely heterosexual” rose from 2.2 percent to 34.3 percent. The authors also reported that “45.4% of the exclusively homosexual participants retrospectively reported having made major shifts in their sexual orientation.” Only 7.1 percent of participants “reported that they were doing worse on three or more” (out of 17) measures of well-being.

### **Older Reports of Successful SOCE**

In 2009, the *Journal of Human Sexuality* reported on “600 reports of clinicians, researchers, and former clients – primarily from professional and peer-reviewed scientific journals” documenting that change is possible, including five “meta-analyses” (studies of the studies) conducted between 1974 and 2002.<sup>7</sup> Nicholas A. Cummings, former president of the American Psychological Association and chief psychologist for Kaiser Permanente, wrote in 2013 that “of the patients I oversaw who sought to change their orientation, hundreds were successful.”<sup>8</sup>

### **Reports of Harm from SOCE**

In the most widely-cited article on SOCE harm, researchers Shidlo and Schroeder interviewed 202 respondents recruited for a study labeled, “Homophobic Therapies: Documenting the Damage” (*Professional Psychology: Research and Practice*, 2002). They oddly stated, “We do not report here on the frequency of responses to these items” on a checklist of symptoms, instead merely recounting anecdotes. The one number cited, suicide attempts, was actually *lower* after SOCE than before.<sup>9</sup>

## Conclusion

In 2009, the American Psychological Association asserted that “the recent studies do not provide valid causal evidence of the efficacy of SOCE or of its harm.”<sup>10</sup> The words “valid” and “causal” are qualifiers due to the methodological limitations of the available studies – they do not indicate there is no evidence at all. The “recent studies” make clear that the evidence for the effectiveness of SOCE far outweighs the evidence of its harm.

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**\*For the full version of this paper, please visit [frc.org/soce](http://frc.org/soce)**

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<sup>1</sup> Paul L. Santero, Neil E. Whitehead, and Dolores Ballesteros, “Effects of Therapy on Religious Men Who Have Unwanted Same-Sex Attraction,” *The Linacre Quarterly*, July 23, 2018, accessed September 5, 2018, <http://journals.sagepub.com/doi/abs/10.1177/0024363918788559>.

<sup>2</sup> Stephen H. Black, *The Complete First Stone Ministries Effectiveness Survey Report* (Enumclaw, Wash.: Redemption Press, 2017).

<sup>3</sup> Stanton L. Jones and Mark A. Yarhouse, “A Longitudinal Study of Attempted Religiously Mediated Sexual Orientation Change,” *Journal of Sex and Marital Therapy* 37:5 (2011), accessed September 5, 2018, <https://www.tandfonline.com/doi/abs/10.1080/0092623X.2011.607052>.

<sup>4</sup> Elan Y. Karten and Jay C. Wade, “Sexual Orientation Change Efforts in Men: A Client Perspective,” *The Journal of Men’s Studies* 18:1 (2010): 84-102, accessed September 5, 2018, <http://journals.sagepub.com/doi/abs/10.3149/jms.1801.84>.

<sup>5</sup> Robert L. Spitzer, “Can Some Gay Men and Lesbians Change Their Sexual Orientation? 200 Participants Reporting a Change from Homosexual to Heterosexual Orientation,” *Archives of Sexual Behavior* 32:5 (2003): 403-417, accessed September 5, 2018, <http://www.jpsych.com/pdfs/Spitzer,%202003.pdf>.

<sup>6</sup> Joseph Nicolosi, A. Dean Byrd, and Richard W. Potts, “Retrospective Self-Reports of Changes in Homosexual Orientation: A Consumer Survey of Conversion Therapy Clients,” *Psychological Reports* 86 (2000): 1071-1088, accessed September 5, 2018, <http://journals.sagepub.com/doi/abs/10.2466/pr0.2000.86.3c.1071>.

<sup>7</sup> James E. Phelan, Neil Whitehead, Philip M. Sutton, “What Research Shows: NARTH’s Response to the APA Claims on Homosexuality (A Report of the Scientific Advisory Committee of the National Association for Research and Therapy of Homosexuality),” *Journal of Human Sexuality*, Vol. 1, 9-39. Online at: [http://factsaboutyouth.com/wp-content/uploads/What-research-shows-homosexuality.NARTH\\_.pdf](http://factsaboutyouth.com/wp-content/uploads/What-research-shows-homosexuality.NARTH_.pdf).

<sup>8</sup> Nicholas A. Cummings, “Sexual reorientation therapy not unethical: Column,” *USA Today*, July 30, 2013, accessed August 31, 2018, <https://www.usatoday.com/story/opinion/2013/07/30/sexual-reorientation-therapy-not-unethical-column/2601159/>.

<sup>9</sup> Ariel Shidlo and Michael Schroeder, “Changing Sexual Orientation: A Consumers’ Report,” *Professional Psychology: Research and Practice* 33:3 (2002): 249-259, accessed August 31, 2018, <https://pdfs.semanticscholar.org/a8fa/f008ed1c74f105da2ddaf5d20172033e2d4a.pdf>.

<sup>10</sup> “Report of the American Psychological Association Task Force on Appropriate Therapeutic Responses to Sexual Orientation,” American Psychological Association, August 2009, <https://www.apa.org/pi/lgbt/resources/therapeutic-response.pdf>, 42.