

A REPLY TO UNFOUNDED ASSERTIONS

REGARDING HOMOSEXUALITY

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by  
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and  
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Homosexuality involves only a small number of Latter-day Saints but is of great concern because it brings suffering to the participant and his family. Like other violations of God's sexual laws, it disrupts the eternal love relationships fundamental to human development and a healthy society.

In recent years a small, but increasingly vocal, minority of Latter-day Saints involved in homosexual conduct have argued that a special exemption from social and religious sanctions should be given to their practices. Claiming the authority of scientific research, they have argued that--

1. They are not responsible for their homosexual behavior because it arises from conditions beyond their own control;
2. The course of homosexuality, once entered, is irreversible and irremediable; and
3. Homosexuality is a harmless and benign alternative lifestyle, the legal and religious proscription of which is a fundamental denial of human rights.

A sufficient response to these claims should be that the inspired counsel of the prophets unequivocally rejects them.



No president of the Church has spoken more clearly on this subject than the living prophet, Spencer W. Kimball. He, and the other prophets before him, have assured us that obedience to the Lord's will would prevent or solve the problem. However, some who are unwilling to repent may question the Lord's counsel. Having become spiritually insensitive, they can be easily misled by distortions of data or even deliberate lies concerning the results of scientific research. For example, many have uncritically accepted the idea that homosexuality is inherent, incurable, or even "normal." Tragically, such misinformation about the nature of the scientific evidence often discourages those who desire to change. Believing homosexuality incurable, they despair and lose the will to repent.

#### Purpose

To evaluate the scientific status of these issues, LDS Social Services has requested the Institute for Studies in Values and Human Behavior, Brigham Young University, to review the literature on the causes and treatment of homosexuality. The results of that review are being prepared for Social Services and are intended as a scientific supplement to present Church documents on the subject, such as:

"Hope for Transgressors"

"New Horizons for Homosexuals"

"Homosexuality: Welfare Services Packet 1."



The present report is a preliminary statement for those who are currently confronted with these issues. While it will deal primarily with male homosexuality, the more comprehensive document will also include an analysis of female homosexuality.

Stated briefly, the conclusion of the review is--  
THERE IS NO SCIENTIFIC EVIDENCE THAT HOMOSEXUAL BEHAVIOR IS THE INEVITABLE PRODUCT OF BIOLOGICAL OR ENVIRONMENTAL INFLUENCES. HOWEVER, THERE IS EVIDENCE THAT AGENCY IS INVOLVED. HOMOSEXUALITY CAN BE CHANGED.

### Definitions

1. A homosexual act characteristically involves physical contact between two or more people of the same gender who construe the contact as being sexual in nature; it is usually accompanied by erotic arousal. Affection and love between members of the same sex (i.e., parental and fraternal love) is not homosexual.
2. The term "homosexual" is applied both to an occasional practitioner of homosexual acts and to someone who has a persistent, obsessive desire for such acts; it is not the name of a special type of person. The term is used only for convenience in communication. People who engage in homosexual practices do not evidence a unitary personality type sufficiently distinct and homogeneous to be described by a single label. The word "homosexual" is actually a misnomer since no single, specific behavior is sufficient to define a person's entire identity.



3. Homosexuality belongs to a group of disorders involving impulse control and the choice between immediate inappropriate gratification vs. later appropriate satisfaction. This group of behaviors is not restricted solely to sexual sins (such as fornication and adultery) but also includes other sins of indulgence (such as drug or alcohol abuse, or violence). Such self-regulatory problems involve similar contests between a righteous choice and a temptation to do wrong. Since homosexuality is not unique in its patterns of causation or cure, it does not deserve privileged status as a special disorder different from other behavior problems or sexual sins.

#### Choice and Responsibility

When attempting to assist the more exclusively homosexual client, counselors frequently encounter the excuse, "I did not choose to be homosexual; therefore I am not responsible for my so-called sins: I am a victim of my biology or my early upbringing or both." Those who voice this complaint often claim that sexual orientation is fixed at an early age by genetic, hormonal, or early childhood experiences and, once fixed, cannot thereafter be modified. This assumption leads them to feel they are victims of nature or nurture, no more responsible for their homosexuality than for the color of their hair or the fact that the first language they learned was English rather than Chinese.



The Institute's review of the literature has shown these beliefs to be scientifically untenable. While it is true that some research reports have claimed to find possibly greater frequencies of homosexuality among certain populations with genetic or hormonal differences, those reports have generally been discredited for methodological reasons or their results have not been reproducible. For those effects that seem reliable after repeated experimentation (i.e., the effect of certain family constellations), the degree of relationship between a given variable and homosexual behavior is typically low, with correlation coefficients generally not exceeding 0.30 and therefore accounting for less than 10% of the total variance in behavior. In other words, although a selective reading of the available scientific literature might justify the conclusion that there are predisposing factors in the development of homosexuality, there is, as yet, no empirical evidence for any factor or combination of factors that will inexorably result in it (Acosta, 1976; Hooker, 1972; Julian, 1977). The principal findings leading to this conclusion are discussed briefly below.

#### Biological Determination of Homosexuality

In answer to the question, "Is the development of homosexuality determined by biological factors?" Perloff (1965) concluded, after surveying the literature, that homosexuality is "a purely psychological phenomenon,



neither dependent on a hormonal pattern for its production nor amenable to change by endocrine substances" (p. 68).

More recently, the National Institute of Mental Health (NIMH) task force published a report on homosexuality (Livingood, 1972). In that report, Money, after reviewing investigations on genetic, hormonal, and central nervous system factors, concluded:

The origin of these three different conditions [homosexuality, bisexuality and heterosexuality] is still without a definite explanation. The new science of cytogenetics [cell genetics] gives no answer, for the majority of homosexuals and bisexuals have the same number of chromosomes as obligatively heterosexual people. Whether there may be not a chromosomal but a genic difference between the three psychosexual types is an open question for which no answer is available at the present stage of the history of genetic science. The science of endocrinology gives no clear clue as to the origin of the three psychosexual types . . . (p. 74).

While the conclusions of Perloff and Money are typical of assessments by experts in the field, some homosexuals have ignored this consensus and have chosen to selectively cite a few studies that can be construed as consistent with their views. For example, Doerr (1976) is cited to show different sex hormone levels in the blood plasma of homosexuals and heterosexuals. However, Doerr reports his work as only a pilot study and admits there have been a number of failures to duplicate his findings. Other studies (Ehrhardt and Money, 1967; Ehrhardt, Epstein and Money, 1968; Yalom, Green and Fisk, 1973) which have investigated the effects on offspring of treating pregnant women with male or female hormones are also cited as supporting a



biological causation. In these studies, when pregnant women were given hormones of the sex opposite to that of the fetus, a number of their children tended to develop some of the bodily and behavioral characteristics of the opposite sex. However, effects were found only for secondary sex characteristics, and not for sexual orientation. In fact, in the Yalom et. al. study, there were no differences in rated heterosexuality between treated and untreated groups, and the only homosexuality discovered was found in the untreated group!

Finally, some writers have been fond of claiming that the results of twin studies reveal a significant genetic factor in homosexuality. Citing Kallman (1952), Heston (1968), and others, they argue as though the results of these studies were clear and unequivocal. However, they are not. Kallman's study (1952), which makes the strongest claims, is routinely discredited for methodological faults (Acosta, 1975). Heston, who is more cautious, leaves much room for the influence of other nonbiological factors when he concludes that the development of homosexuality is based upon an interaction of genetic and other factors. Broad reviews, such as the one done by David Rosenthal at the National Institute of Mental Health (1970), conclude that there is no substantial evidence of genetic influence in homosexuality. Thus, contrary to interpretations of the biological literature by the "gay" community, few, if any, authoritative experts in this field agree with their point of view.



### Early Childhood and Family Factors

In comparison to the evidence for biological factors in the development of homosexuality, the evidence for early childhood and family influences in homosexual etiology is stronger. Unlike the case of biology, the question here is not do early childhood experiences and family dynamics have an influence upon the development of homosexuality, but rather how much influence do they have? A review of the literature suggests the appropriate answer may be that while early social learning is extremely important, it is not all-important.

Recently, a number of developmental studies have appeared which do not support the notion of a critical period of early learning during which personality is inexorably set (cf. Clark and Clark, 1976, for a review of studies). While it is true that one should train up a child in the way he should go, such training influence, under the appropriate conditions, may later be neutralized.

What is true of child development in general is also true of homosexuality, namely, that while childhood experiences are important, they are not the inevitable, undeviating determiners of adult personality. For example, the conclusion of Clark and Clark's wide-scale review states:

. . . it appears that there is virtually no psychosocial adversity to which some children have not been subjected, yet later recovered, granted a radical change of circumstances (p. 268).



Whether the behavior in question is normal or abnormal, there is considerable evidence that a great deal of latitude remains for self-determination. In fact, the incomplete determination by early circumstances may be seen in the results of almost all studies of early childhood influences on the development of homosexuality (Bieber, 1962; Bene, 1965a, 1965b; Westwood, 1960; Gundlach and Riess, 1968; West, 1959; Evans, 1969; Siegelman, 1974).

Bieber's (1962) classic comparison of the family relationships of heterosexuals and homosexuals aptly illustrates the above point. He found, when studying the relationship of homosexual sons to their fathers and mothers, that an unusually high percentage of them had certain relationship combinations in common (i.e., 57% had a detached father and a close-binding, intimate mother). However, even for the same combinations, there were substantial percentages of heterosexual sons who had the same relationships (i.e., 21% also had a detached father and a close-binding, intimate mother)! Thus, although certain family combinations may increase the probability of the son's homosexual behavior, they do not inevitably determine it.

A careful reading of the literature thus reveals that while early learning is extremely important, it is not inevitably determining and therefore later modification of sexual orientation is still possible. Although certain family or early learning contexts may increase the probability



of an individual's selecting a homosexual orientation, there is still sufficient latitude and capacity for him to change. Intentional processes are involved in learning from the very beginnings, and these processes assume greater importance as the child matures. The successful reversal of sexual orientation by some formerly exclusive homosexuals and radical conversion phenomena among young people attest to the powerful influence of volitional (self-determining) factors.

#### Limitations of Current Scientific Methods

The relative weakness of the empirical evidence for the biological determination of homosexuality when compared to the corresponding evidence for early socializing influences (see Mischel, 1970, for more detail) should not be surprising to Latter-day Saints who are familiar with prophetic counsel regarding the importance of child-rearing practices. Even less surprising is the finding that the combined contribution of constitutional and early learning factors leaves ample room for later learning and volitional influences in the determination of behavior.

The failure of science to demonstrate a causal connection between homosexuality and exclusively mechanistic determinants not only allows for the role of personal choice, but also points to a fundamental weakness in exclusively empirical methods. Such methods may not be fully appropriate for investigating spiritual and value issues because these



variables are difficult to objectify. Like the entomologist who found a bug he couldn't classify and therefore stepped on it, some scientists (and laymen) have been unwilling to accept the spiritual nature of man, simply because it could not easily be measured. To the extent that the spirit of man is the determiner of his behavior, the influence of other determinants would appear to be relatively weak.

### Nonuniqueness of Homosexuality

Homosexuality is one of a class of impulse disorders and is not the result of a unique set of psychological processes. The processes involved in its development are similar to those involved in heterosexuality, as well as in the development of other normal or abnormal personality characteristics. While biological, social, and volitional causes are present in all of these, after the individual knows right from wrong, the predominating cause of his behavior is his own intentions.

This discussion of choice and responsibility leads immediately to the issue of the curability of homosexuality within a treatment or helping context.

### Is it Possible to Change?

The question "Is it possible to change?" has been answered in part by the report of the NIMH task force on homosexuality in which Dr. Jerome Frank (1972) summarizes 10 therapy outcomes



studies. His summary of results is reproduced in Table 1 (pp. 67-68).

Table 1.—Summary of Results of Ten Reports of Therapy of Homosexuals

Study	N Source of patients	Type & dur. of Rx.	Percent improvement		Duration	Followup
			Lenient* criterion	Stringent* criterion		Percent improvement
Bieber (1)	106 Analysts	Analysis Av. 250, 1/3 350+	40	—	Up to 8 years	27
Ellis (6)	28 Own practice	Analysis 5-220 hours	60	39	—	—
Hatterer (14)	75 Own Practice	Average 47 hours	57	25	3 mos.-7 years	30 least "at bisexual"
Mayerson & Lief (20)	19 Screened Clinic Pts.	"Analysis" by trainees 13-420 sess. 0.2-2.2 years	74	16	Average 4.5 years	47
Woodward (26)	113 Court: Total 98 "Recommended for Rx"	Psychotherapy, 1-169 hours	53 61	6 7	—	—
Hadden (11)	32 Own Practice	Group Ther. 20 or more sessions	40	—	Up to 5 years	38
Mintz (21)	10 Own Practice	Group Ther., over 2 years + Individ.	60	—	Up to 8 years	30
Freund (10)	67 Courts + Own Practice: Total	Aversion, "classical" (Nausea) daily, max. 24 days	28	18	4-7 years	12, all with per- sisting homo- sexual manifest- ations
Maculloch & Feldman (17)	31 Selfreferred 41 Courts + Own Practice	Aversion, "instrumental" (shock) avg. 20 sess. + boosters	58	—	At least a year	46

As the two columns under "percent improvement" indicate, significant numbers of treated homosexuals improved.

The larger numbers under "lenient criterion" represent the percentage of individuals manifesting any detectable improvement in sexual orientation or behavior for any length of time, including statements about the patients



still in treatment. The smaller numbers under the stringent criterion represent the percentage of individuals who, at the end of therapy, were judged to enjoy and be effective in heterosexual activity with no, or only minimal, residual interest in homosexual fantasies or activities. However, not all studies reported results based upon this criterion.

While there are many interesting facets of the table, one finding seems to warrant special mention. The importance of the client's desire to change can be seen by comparing the relatively small percentage of improvement made by those referred by mandate of the courts (6 or 7% in Woodward) to the much larger percentage of improvement found in the other studies where patients presumably chose to be involved.

#### Changes in Exclusive Homosexuality

While Table 1 reports therapeutic outcome, it does not specify the patients' initial position. It is not clear whether those that improved were bisexual or more exclusively homosexual. Can those who have been exclusively homosexual still be cured? To investigate this question, members of the Institute reexamined several of the studies upon which Frank's review was based, including, where available, more recent, detailed reports. Their findings with respect to change in the exclusive homosexual are outlined below.

Hatterer (1970), in a book extending the article reviewed by Frank, reported that 12 (or approximately 12%) of 102 exclusive or nearly exclusive homosexuals had



Bieber (1962) reported that 14 (or approximately 19%) of 72 exclusive homosexuals had become exclusively heterosexual. Ellis (1956), using a slightly more lenient criterion, reported that 18 (or approximately 70%) of 26 exclusive, or nearly exclusive, homosexuals had significantly improved, i.e., had begun to lose fear of the opposite sex, to enjoy heterosexual relations, to be effective partners, and to lose their obsessive thoughts or compulsive actions. Follow-up durations for these studies varied widely, ranging from 3 months to more than 7 years.

In an additional study of exclusive homosexuals, not reviewed by Frank, Birk (1971) reported that 3 out of 6 subjects having Kinsey ratings of "5" or "6" (nearly exclusive or exclusive homosexuals) had achieved exclusive or nearly exclusive heterosexuality following approximately one year of group and six weeks of behavior therapy.

These studies reveal a reform in sexual orientation for approximately 20% of the most difficult cases and 50% of the more moderate cases. A review of an additional 80 studies by members of the Values Institute and BYU Comprehensive Clinic staffs shows qualitatively similar results. While percentages may vary from study to study, it is clear that even exclusive homosexuals can become exclusively heterosexual with suitable help.

The evidence for changeability is further buttressed by the early interview data of Kinsey (1948). He showed that an accumulative incidence of homosexual experiences revealed



a 37% rate; whereas, at any given time, those considered to be predominantly homosexual constitute a smaller 4%. The difference between the accumulative and current percentages implies that homosexual behavior is usually abandoned and therefore changeable. Very few of those that experiment with it remain involved.

Further evidence for changeability is found in the attitudes of mental health professionals who have worked with the problem. Fort (1971) found that of 163 therapists, 72% believed that therapeutic change was possible. Of these professionals, 42% of those replying to a question about their personal experience with homosexuals stated that some of their patients had achieved a change of sexual orientation. Bieber's report (1968) also supports the belief that complete change is feasible.

In the studies cited above, the meaning of the terms "change" or "cure" varied; therefore the significance of the percentages reported also varied. The question of how change is measured and how various definitions can lead to differing and sometimes erroneous conclusions is discussed below.

Curability vs. Incurability

Use of the term "cure" is misleading when discussing behavioral disorders because we are dealing not with diseases but with problems in living that are subject to change and fluctuation by the will of the person. Medical terms like "cure" imply the existence of a disease or sickness for which



the patient is not responsible. While neither such language nor the theories underlying it is acceptable, an analysis of criteria of change, including "cure," is provided here for the sake of comparison with other writings.

Some define cure as only a complete change from the category "homosexual" to a distinct classification termed "heterosexual." However, the literature clearly supports the notion that homosexuality and heterosexuality, defined in terms of behavior as well as urges and thoughts, are on a continuum. Therefore, change in the direction of heterosexuality, whether to a small or great extent, needs to be recognized. Such modifications can range from modest gains, such as a decrease in the intensity of homosexuality, to complete recoveries, such as the achievement of heterosexuality. In this context, however, the exaggerated masculinity of "macho" behavior should not be seen as the attainment of "health." It may be an error in the opposite direction.

Some homosexual writers' criterion for "cure" is so high, involving the elimination of every homosexual thought, that such a degree of change is highly improbable. If a similarly strict definition of "cure" were applied to biological disorder, to alcoholism, or to the "cure" of heterosexual problems such as adultery or fornication, there would be few "cures." Someone who has been involved in a heterosexual affair and has then fully repented is not exempted from the possibility of future temptation. A person who has



entertained, but not acted upon, adulterous or homosexual thoughts may still be susceptible to similar temptations during a later period in his life. In essence, to be "cured" does not guarantee that the thought will not reappear. However, action need not follow, for choice is still involved.

In summary, Jerome Frank's review in the NIMH task force on homosexuality (1972) and additional reviews reveal that the question of incurability is not, in fact, a question. The truth is that individuals at any point on the homosexual continuum can move in the direction of normal heterosexuality.

Even though evidence shows cure to be possible, the exclusive homosexual has a long and difficult road to follow. The combination of dispositions from early experience and habitual indulgence is not easy to transcend. The low cure rates for this type of homosexual are understandable.

However, for the Latter-day Saint, the likelihood of profound change is much greater than that which can be achieved by professional methods alone, for he has access to the spiritual powers and blessings of the gospel. Such changes are referred to in Appendix A.

### False Cures

Those writers who believe homosexuality to be incurable often dismiss the positive results of therapeutic outcome research by claiming personal knowledge of allegedly cured individuals who have relapsed or who reported improvement only to please their therapist or Church officer. These writers generalize from a few cases, impugning the sincerity



of all who profess to have changed and undermining the motivation of those sincerely seeking to change. No one who understands the nature of repentance needs be concerned about the controversy surrounding so-called counterfeit cures; for, since therapeutic cures are fundamentally experiences of repentance, like repentance, there are differences in the quality of those cures. They may be full or partial, sincere or insincere, actual or fake. Also, the possibility of genuine self-deception is present here, for it is easy to see how someone may sincerely think he has been cured but later relapse into transgression. The existence of false cures does not mean that all are false; whereas, the existence of only a few genuine cures is enough to demonstrate their possibility.

There is consensus among mental health professionals that reports of therapeutic outcome are not generally tainted by fraud. There are a number of external, objective evidences from which probable recovery can be inferred, such as successful heterosexual and family activity, and continued avoidance of homosexual involvement. Reports of spiritual growth also indicate recovery. The argument about false cures may serve some of the psychological needs of the members of the gay community, but their nonempirical generalization seems rather implausible.

In one instance, a writer recently claimed that members of the Institute for Sex Research at Indiana University issued a public challenge asking for a single case of a cured homosexual. The writer claimed that this challenge has never



been accepted, that there were no documented cases. However, the Institute (1977), in a letter from their public information officer, declared that they knew of no such challenge being offered. To the contrary, many clients and therapists are willing to testify either that they themselves are cured homosexuals or that they have treated a person to the point of full recovery. These accounts are described in Appendix A.

Even one cure would be sufficient to dispose of this argument. That there are many refutes it completely. This is not to say that change is easy nor that relapses or difficult periods are unlikely; but it does classify homosexuality with other problems of indulgence or appetite where a virtually addictive behavior pattern develops, but can be reversed.

#### Anxiety, Guilt, and Defense

In view of the scarcity of scientific evidence that the homosexual response is inevitable or, once entered into, irreversible, why are homosexuals so adamant about the inevitability and incurability of their condition? The answer may lie in the psychology of anxiety, guilt, and defense. If a given reality is unpleasant enough, people may try to escape, distort, or somehow transform that reality. Perhaps, these defensive responses underlie the homosexual's insistence on his victimization.

Defensive maneuvering is especially intensified when a person experiences shame or guilt. A Latter-day Saint who knows good from evil and acts contrary to that knowledge may



experience the pangs of conscience. If he repeatedly defends himself against the natural and healing guilt that accompanies sin, he may find himself unable to tell right from wrong, having resisted the Spirit for so long that he has become past feeling. While these mechanisms of defense have been given modern names like rationalization, projection, distortion, and denial, they will be discussed under their older scriptural descriptions. For thousands of years, the prophets have spoken about these flights from guilt.

### Rationalization

"Woe unto them that call evil good, and good evil; that put darkness for light, and light for darkness; that put bitter for sweet, and sweet for bitter!" (Isaiah 5:20)

Examples of rationalization are found in the "gay is beautiful" syndrome, where the behavior condemned in the Bible as a mortal sin is promoted as a harmless and benign lifestyle. Calling the homosexual life "gay," promoting the image of the "happy homosexual," advising other homosexuals to uncloset themselves and take "pride" in their gayness, and rationalizing that homosexual relations are "good" because they are based upon "love" are attempts to replace the stigma associated with sin by noble qualities usually associated with virtue.

To expose "gay pride" as defensive does not deny positive qualities to homosexuals, rather it asserts that constructive aspects of their lives exist in spite of,



their sexual lifestyle. That the "joy of homosexuality" is only temporary and illusory is especially apparent after studying the case histories of older homosexuals. In the later years of life, the defense of calling the bitter sweet and the sweet bitter often collapses, resulting in profound depression. It is not surprising that surveys of homosexuals reveal that although many have resigned themselves to a homosexual lifestyle none would wish their sons to become like them. In old age, the "joy of homosexuality" is the joy that no one prefers.

#### False Accusation

Another defensive maneuver was described by Paul (2 Timothy 3:1-6), who warned that in the last days those "without natural affection" and "incontinent" would also be "false accusers" and "despisers of those that are good." Paul's description aptly applies to those homosexuals who project or attribute to others the weaknesses they see, often unconsciously, in themselves. Objects of defensive accusation may vary widely, ranging from close family members and acquaintances to local and general Church authorities. While the target may vary with occasion, the general technique does not; it invariably points the finger of blame away from the self toward some threatening other. Since the representatives of the Lord, living and dead, are the greatest threat to the homosexuals' neurotic security,



some try to rationalize away their guilt by accusing the prophets. For example, Paul is seen as struggling against latent homosexuality. Others reject President Kimball's invitation to repent and find complete forgiveness, imputing to him and the other General Authorities ignorance of the "truth" about homosexuality, as well as a lack of compassion and love.

Defense mechanisms seldom manifest themselves singly. Hostility, for example, is a frequent and sometimes dangerous accompaniment of accusatory projection. It is the process of transforming self-disgust into hatred of others. The angry accusation and the pointing finger are defenses against realistic self-appraisal. Ironically, they are often aimed at those who, more than others, love enough to speak the truth.

### Denial and Lying

Throughout the scriptures, there is counsel against lying or telling untruths with intent to deceive (Exodus 20:16; 2 Nephi 9:34). However, the telling and believing of lies is a common problem encountered by those attempting to defend themselves against massive guilt. Like a person in a dark room, they have lost their ability to discriminate the true from the untrue and are therefore unable to differentiate things which were discernible before their spiritual lights went out. For example, a homosexual writer recently cited Fort's survey (1971) as supporting the idea



that most psychotherapists believed they were powerless to effect changes in sexual orientation. Fort's conclusion, described in a previous section of this report, was just the opposite: 72% of therapists reported a belief that change is possible! Similarly, studies have been cited as supporting a biological basis for homosexuality (Money and Erhardt, 1972; Barlow, 1973, 1974; Yalom et. al., 1973; Doerr, 1976) although any impartial reading of them would not lead to that conclusion. Distortions, like these, may arise through carelessness, biased interpretation, or deliberate lying. In each case, their unfortunate discouraging effect on the homosexual desiring to repent is still the same.

#### Statistical Inflation

Another common distortion is statistical inflation. Here homosexuals try to give the impression that the number of homosexuals is larger than it is. Presumably (they believe) the more homosexuals there are, the less deviant and morally reproachable their behavior will be. Members of the gay community often use Kinsey's 37% estimate of the accumulative incidence of homosexuality (an estimate which Kinsey's collaborators later repudiated as being excessively high [Gebhard, 1972, p. 28]) as a basis for the conclusion that "one out of three males you see on the street is homosexual." This is a flagrant misuse of the accumulative incidence statistic, for by the same logic it could be argued that because the corresponding accumulative



incidence of heterosexuality is nearly 100%, almost all American males are heterosexual. Actually, the best estimate of the incidence of homosexuality (see Gebhard, 1972, for details) is approximately 4%. Exclusive homosexuals are thought to constitute slightly over half of the figure. Highly religious groups, like the Latter-day Saints, have been found to have significantly lower incidence rates. Of course, even if there were great numbers of homosexuals, the appeal to large numbers and the accompanying "bandwagon" argument would not justify homosexual behavior. Something is not right just because many people do it.

#### False Dilemma

Another group of more complex maneuvers designed to avoid guilt is composed of several simpler elements. Here, as with previous examples of rationalization, good is called evil and evil is called good, but elements of denial, self-pity, and threats to others are also combined. In these maneuvers, homosexuals pose for themselves false moral dilemmas in which they, purportedly, must choose between disobeying God's commandments on one hand and certain negative consequences on the other. A few of the consequences mentioned by homosexual writers are listed below. Notice that they have, at once, both a self-pitying and a menacing quality; i.e., "Unless you let us (the persecuted) do our homosexual thing, then . . ."



1. "Religious and social pressure to change may increase our frustration to the point of suicide."
2. "Pressure to become heterosexual will force us to marry your innocent daughters and cause them and their children a lifetime of misery."
3. "Prolonged abstinence from genital gratification will cause us to shrivel up and become unproductive, uncreative, and unloving."
4. "The inhibition of our sexual urges will cause those urges to grow stronger, eventually to the point of (possibly violent) explosion."

One cannot read such statements without feeling sympathy for the confused and desperate thinking that generated them, for it always assumes that repentance and remediation of homosexuality is not a real alternative. Instead, the writers profess to see themselves in a genuine dilemma, having opted for the better, although indulgent, choice.

Fortunately, the dilemma is a false one. Through the atonement of Christ and the first principles and ordinances of the gospel, a way has been prepared to cure homosexuality. Therefore, the negative consequences listed previously need not occur. Even in the interim, before change is complete and heterosexual thought and feelings fully established, abstinence from sexual relations need not result in the evils mentioned. Even if change were not complete, the four consequences listed above are not obligatory in any rational sense:



1. Many cured homosexuals testify that although the process of therapeutic change was extremely difficult and arduous, the endowment of the Lord's spirit buoyed them, helping them to cope successfully with thoughts of self-pity, despair, and suicide.
2. Though eventual obedience to the marriage commandment is expected, no one should feel pressure to foolishly, and precipitously, marry. One need not marry anyone that he does not genuinely love, respect, and think that the Lord would approve.
3. The lives of thousands upon thousands of single adults in the Church testify that sexual inactivity need not result in the crippling of productive and creative abilities, or in a decrease in the power to love. Many thousands of missionaries, who have no active sexual life, will testify that their ability to love and give service is continually growing.
4. The work of Bandura (1969) has revealed that impulses are strengthened by expression, not by inhibition; and the experimental case studies of Bergin (1969) have shown that when clients resist their homosexual impulses, the strength of those impulses declines.

While the previous considerations should dissolve the logical dilemmas claimed by certain homosexuals, an individual



may tenaciously cling to the "incurability assumption" which creates them, even knowing that the assumption is false. This seemingly irrational behavior becomes more understandable when it is understood that he does not want to be saved from his sins, but rather desires the impossibility of being saved in his sins. The posing of dilemmas yielding dire consequences for sexual abstinence is a defensive maneuver, used to justify personal misbehavior on the ground that it will avoid other evils.

Such rationalizations are attempts to liberalize sexual norms by blurring standards and replacing divinely designed means of finding fulfilling love relationships with promiscuous alternatives. In so doing, a way of life is promoted that can only bring the opposite of fulfilling love.

#### Special Exemption from Moral Law

It should be mentioned in this context that the persistent claim of the hardened homosexual to the right of sexual gratification outside of marriage is a right claimed by no other segment of the LDS population. The widowed, the divorced, and the never married who remain chaste in order to later experience a fulness of love have not asked for a special exemption from moral law. They remain subject to the same rules of abstinence and chastity that the homosexual decries.

In sum, the homosexual's puzzling insistence in the face of contrary evidence that he is totally the victim of



biological and early environmental factors may have its origin in the psychology of anxiety, guilt, and defense. Using techniques identified by the prophets of old, modern homosexuals are attempting to reduce guilt about their behavior by using widely recognized defense mechanisms. Some of the maneuvers include: rationalization ("gay is beautiful"), projection and accusation ("President Kimball and the General Authorities have weaknesses"), statistical inflation ("There are large numbers of homosexuals"), simple denial or prevarication ("The majority of mental health professionals believe change is impossible"), threat ("If you continue to pressure us, we'll . . ."), and appeals to sympathy ("If I don't indulge in homosexual relationship, my personality will wither").

An examination of these defensive maneuvers reveals them to be just that, maneuvers without substance. As such, they are primarily attempts to justify replacing the Lord's authorized and approved manner of developing love relationships with an alternative, destructive one--homosexuality. Like no other group in the Church, homosexuals are claiming the right to a special exemption from moral law, but the lives of other sexually abstinent members is a witness that such an exemption is not necessary for the achievement of full, happy, and productive lives.



### Conclusion

This preliminary report was prepared from materials submitted by the Institute for Studies in Values and Human Behavior, Brigham Young University, and from the files of LDS Social Services. It includes a summary of some of the principal findings of a larger more comprehensive document being prepared both for use by Social Services and the broader scientific community.

In recent years, a small, but increasingly vocal, number of homosexuals still alleging adherence to Latter-day Saint beliefs has claimed that--

1. They are not responsible for their homosexual behavior because it arises from conditions beyond their own control;
2. The course of homosexuality, once entered, is irreversible and irremediable; and
3. Homosexuality is a harmless and benign alternative lifestyle, the legal and religious proscription of which is a fundamental denial of human rights.

An examination of the relevant scientific information shows that there is no evidence to suggest that any of these claims are true. On the contrary, while sympathetic understanding must be extended to those whose backgrounds have predisposed them to the problem, there is evidence to suggest that a large volitional element in the selection of sexual orientation exists, that homosexuality is not obligative because it can be and has been cured, and that



claims that homosexuality is harmless and benign may be deeply rooted in the psychology of anxiety, guilt, and defense.

These findings supplement, but do not replace, the testimony of other Church documents on this subject. Indeed, it should be remembered that reviews of scientific evidence, such as this one, are reviews of the work of those who may not share the values and assumptions of The Church of Jesus Christ of Latter-day Saints. While their neutrality, in this case, enhances the credibility of the reported findings, it should be understood that none of the theories of homosexuality or therapeutic techniques for its remediation are completely consonant with the principles of the gospel. Consequently, the comparative power of the gospel to solve problems like homosexuality has yet to be scientifically evaluated.

In conclusion, the evidence of an overall review of the scientific literature on the causes and treatment of homosexuality is consistent with the counsel of Church leaders who have defined acceptable and unacceptable sexual behavior by means of revelation from the Lord. (For a discussion of scriptural references to homosexuality, see Appendix B.)



Appendix A

To the Homosexual Reader

... as a homosexual man is involved in a relationship with a woman...  
... the majority of the population...  
... the majority of the population...

Appendix A

To the Homosexual Reader

... the majority of the population...  
... the majority of the population...

Testimonies

... the majority of the population...  
... the majority of the population...

... the majority of the population...  
... the majority of the population...



Appendix A  
To the Homosexual Reader

Though we identify the behavior of some homosexuals as defensive, we are keenly conscious of the tragedy and anguish that many of them experience. We recall sympathetically the lament of Mormon:

O ye fair ones, how could ye have departed from the ways of the Lord! O ye fair ones, how could ye have rejected that Jesus, who stood with open arms to receive you! (Mormon 6:17)

The General Authorities have set forth the basis on which real change can be achieved. The ideals and procedures outlines in the official Church pamphlets on this subject provide the best framework for implementing the change process.

Good evidence that deep and lasting change can be brought about is in the testimonies of those who have successfully followed the Lord's program.

Testimonies

Over the years we have gathered written testimonies from some of the people who have changed from homosexual to heterosexual behavior. These reports reveal similarities which are most pertinent.

In the testimonies, these people speak, without exception, of their deep sense of having sinned and of their subsequent dependence upon the Lord's love and mercy. They echo Alma



both in his initial despair and subsequent joy (Alma 36:17-20).

They often refer to President Kimball's counsel and writings as the turning point in their lives.

Another regularity is their description of terrible loneliness and isolation, anxiety about parental discovery, and hurt received from unkind people.

They report of shocked, unresponsive Church members, but they also report of the helping power of kind, supportive bishops and branch presidents.

They speak of long, difficult, uphill struggles which take years and of the infinite patience of relatives, friends, and Church leaders.

They do not say that the old thoughts never return. But they testify of growing strength as their thoughts and behavior become righteous. Like all people, they always must be on guard against that which is their personal temptation. In this, are they any different from persons who experience other temptations?

Another common characteristic of these testimonies is their realism. These individuals do not speak of miraculous change, nor do they claim their journey has been easy. On the contrary, they speak of uneven progress, occasional relapse, discouragement, and pain. But, just as consistently, they testify of emerging self-respect, exhilarating power over formerly repulsive activities and, most significant of all, knowledge of a new life formerly unknown, even unsuspected. This life is one of sharing, giving, and a love far different



from the life they had previously known.

Both the repentant sinner and those who counsel succeed only to the extent that the spirit of the Lord is present. There is power here. These people did not seek mild adaptation or merely limited change. They sought and continue to seek complete change, total repentance and acceptance before God. Even though these high objectives are not easy to attain, they will always be the goals of those who follow the Lord's way.

In order to preserve confidentiality, we do not include the verbatim testimonies of these people; but the testimonies are numerous and well documented.

The following excerpts from testimonies illustrate the feelings of two individuals who overcame the most severe kinds of homosexuality.

"My wife and I anxiously are now awaiting the upcoming birth of our first child and this too gives me confidence and strength. My main regret is all the years I wasted, listening to the pap and drivel that the world is so full of in regards to homosexuality and I'm grateful that I found in the Church, a positive, strong and effective way."

"I testify to you of the power of the principle of repentance and the total change it can make of our lives. I hope and pray that you will have the courage to stand fast and work with all your might, for that is what it will take, to overcome this sin and destroyer of life and the Lord's plan. Please come back to our Heavenly Father. Soften your heart and let His Spirit guide you to salvation."



Scriptural References to Homosexuality

Appendix B

Scriptural References to Homosexuality



## Appendix B

### Scriptural References to Homosexuality

Homosexual writers, attempting to undermine the scriptural authority for the condemnation of homosexuality, argue that the low frequency of direct references to homosexual practices in the standard works implies that the prophets did not regard such practices as serious violations of the moral code. They dismiss the direct Old Testament references on the grounds that they are part of the Mosaic Law which was superseded by the gospel of Christ. Since the Savior seems to have made no mention of homosexuality during his earthly ministry, these writers contend that the Mosaic laws against homosexual practices have been invalidated. The New Testament references to homosexuality condemn it as a loathsome sin, but they are found only in the Pauline epistles and homosexuals summarily dismiss these by projecting onto Paul a struggle to repress his own homosexual desire.

These arguments, however, overlook another, more viable reason for the relative scriptural silence on homosexuality; and they also overlook a large number of scriptures which include homosexuality as one of many immoral acts to be condemned.



That frequency of mention is not an accurate index of the seriousness of a sin is seen by considering an analogy to bestiality. Bestiality is described in four different Old Testament verses as a mortal sin, punishable by death, but no other mention of it appears in the Bible. Should one conclude that this relative silence indicates an acceptance of bestiality? It is much more likely that the sin was not a common one in Israel and that the prophets and apostles, therefore, did not find it necessary to continually remind the people to avoid it.

Many scholars regard the following Old Testament scriptures as direct references to homosexuality:

Leviticus 18:22	I Kings 14:22-24
Leviticus 20:13	I Kings 15:12
Genesis 19:4-9	I Kings 22:46
Judges 19:22-28	II Kings 23:7
Deuteronomy 23:17	

An examination of the Greek New Testament shows that its writers repeatedly condemned homosexuality. Despite the low frequency of direct references to the sin, they inveigh against homosexuality, using Greek words which encompass homosexual practices as well as many other sins. Some of these words have lost their homosexual reference in English translation.

The most commonly used word which includes homosexual reference is πορνεία (porneia) which is translated "fornication" in the King James Version. However, the interpretation of the English word "fornication" is much



too narrow to capture the full flavor of the Greek πορνεία. Arndt and Gingrich (1952) give πορνεία as "prostitution, unchastity, fornication, of every kind of unlawful sexual intercourse" (p. 699). Lampe (1901) translates it as "fornication, unchastity, sexual impurity" (p. 1121). Liddell and Scott (1973) corroborate these translations (p. 1450). The International Standard Bible Encyclopedia (1960) in discussing πορνεία states, "Every form of unchastity is included in the term fornication" (v. 2, p. 746). The Theological Dictionary of the New Testament (1964) unequivocally says, "πορνεία can also be 'unnatural vice,' e.g. sodomy" (v. 6, p. 587).

πορνεία may be found in the following scriptures, all of which can be interpreted as injunctions against homosexuality as well as against other immoral deeds.

Matthew 15:19	Galatians 5:19
Mark 7:21	Ephesians 5:3
Acts 15:20	Colossians 3:5
Acts 15:29	I Thessalonians 4:3
Acts 21:25	Jude 7
I Corinthians 6:13	Revelation 9:21
I Corinthians 6:18	Revelation 2:20
II Corinthians 12:21	

Another Greek word, πόρνος (pornos) is used as a noun of personal reference. Related to πορνεία, it appears in the King James Version as "fornicator" in I Corinthians 5:9-11; Hebrews 12:16 and Hebrews 13:4, and as "whoremonger" in Ephesians 5:5; Revelation 21:8 and Revelation 22:15, but neither of these translations adequately conveys the



notion of "male prostitute" which the word literally means (Arndt and Gingrich, p. 700; Liddell and Scott, p. 1450). That male prostitution was largely a homosexual activity in the Hellenistic world is well attested to by classical literature. (For a good summary of the evidence see, for example, Licht, 1963 .) As Licht attests, the censure of fornicators and whoremongers is also the castigation of homosexuals.

The Greek word ἁκαθαρσία (akatharsia), translated as "uncleanness" in the King James version. literally means "impurity" or "dirt"; however, in a moral sense it means "immorality" or "viciousness" (Arndt and Gingrich, p. 28; Liddell and Scott, p. 46). As in the use of the word πορνεία, scriptures containing this word refer to a wide range of immoral sexual acts including homosexuality.

II Corinthians 12:21

Galatians 5:19

Colossians 3:5

Romans 6:19

Ephesians 5:3

Ephesians 4:19 - Could be translated "to the practice of every kind of immorality" (Arndt and Gingrich, p. 28).

The word ἀσελγεία (aselgeia) is variously translated in the New Testament, but it literally means "licentiousness, debauchery, sensuality" (Arndt and Gingrich, p. 114), and, as with the others, could include homosexuality in its meaning. It is found in the following scriptures:

Ephesians 4:19

"lasciviousness"

I Peter 4:3

"

II Corinthians 12:21

"

Galatians 5:19

"

Mark 7:22

"



Romans 13:13

"wantonness" - could be  
"sensuality" (Arndt and  
Gingrich, p. 114).

II Peter 2:2

"pernicious ways" - could be  
"to follow the inclination  
to sensuality" (Arndt and  
Gingrich, p. 114).

Yet another Greek word, ἐπιθυμία (epithumia), meaning literally "a desire for something forbidden" (Arndt and Gingrich, p. 293), may also refer to homosexuality as well as to other unclean acts. It is found in the following verses:

Colossians 3:5	"concupiscence"
I Thessalonians 4:5	"
Galatians 5:24	"lusts"
I Peter 4:3	"
I Timothy 2:22	"
I Peter 1:14	"
II Peter 2:10	"
Ephesians 4:22	"
Jude 16, 18	"
Romans 1:24	"
Romans 6:12	"
Ephesians 2:3	"
I John 2:16	"
II Peter 2:18	"
Titus 2:12	"
Romans 13:14	"
Titus 3:3	"
II Peter 3:3	"
I Peter 2:11	"

As our modern oracles suggest, homosexuality has always been condemned by the Lord's prophets, although the relative infrequency of the sin among the covenant people may have resulted in its infrequent mention. In the years following its direct proscription, references to homosexuality were included within the larger scope of the denunciation of all immoral sexual acts. However, when Paul took the gospel to the Hellenistic culture of the Gentiles, where the practice and acceptance of homosexuality was a more frequent problem, it again received explicit denunciation.



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