

THE AMERICAN PROSPECT

My So-Called Ex-Gay Life

GABRIEL ARANA APRIL 11, 2012

A deep look at the fringe movement that just lost its only shred of scientific support.

Early in my freshman year of high school, I came home to find my mom sitting on her bed, crying. She had snooped through my e-mail and discovered a message in which I confessed to having a crush on a male classmate.

“Are you gay?” she asked. I blurted out that I was.

“I knew it, ever since you were a little boy.”

Her resignation didn’t last long. My mom is a problem solver, and the next day she handed me a stack of papers she had printed out from the Internet about reorientation, or “ex-gay,” therapy. I threw them away. I said I didn’t see how talking about myself in a therapist’s office was going to make me stop liking guys. My mother responded by asking whether I wanted a family, then posed a hypothetical: “If there were a pill you could take that would make you straight, would you take it?”

I admitted that life would be easier if such a pill existed. I hadn’t thought about how my infatuation with boys would play out over the course of my life. In fact, I had always imagined myself middle-aged, married to a woman, and having a son and daughter—didn’t everyone want some version of that?

“The gay lifestyle is very lonely,” she said.

She told me about Dr. Joseph Nicolosi, a clinical psychologist in California who was then president of the National Association for Research and Therapy of Homosexuality (NARTH), the country’s largest organization for practitioners of ex-gay therapy. She said Nicolosi had treated hundreds of people who were now able to live “normal” lives.

I read through the papers my mom had salvaged from the trash. They were interviews with Nicolosi’s patients, who talked about how therapy helped them overcome depression and feel “comfortable in their masculinity.” The testimonials seemed genuine, and the patients, grateful. I agreed to fly with my father to Los Angeles from our small town on the Arizona-Mexico border for an initial consultation.

When my father and I first sat down, Nicolosi explained what he meant by “cure.” Although I might never feel a spark of excitement when I saw a woman walking down the street, as I progressed in therapy, my homosexual attractions would diminish.

The Thomas Aquinas Psychological Clinic was on the 13th floor of a modern building on Ventura Boulevard, one of the San Fernando Valley's main thoroughfares. Nicolosi's corner office had emerald-green carpet and mahogany bookshelves lined with titles like *Homosexuality: A Freedom Too Far* and *Homosexuality and the Politics of Truth*. Middle-aged with thick, graying black hair, Nicolosi grew up in New York City and spoke with a faint Bronx accent. Brusque but affable, he put me at ease. When my father and I first sat down, Nicolosi explained what he meant by "cure." Although I might never feel a spark of excitement when I saw a woman walking down the street, as I progressed in therapy, my homosexual attractions would diminish. I might have lingering thoughts about men, but they would no longer control me.

Nicolosi's acknowledgment that change wouldn't be absolute made the theory seem reasonable. His confidence in the outcome made me hopeful. Until I had spoken with Nicolosi, I had resigned myself to the idea that, desirable or not, my life would have to accommodate the fact that I was gay. But maybe this was something I had power over.

For the last half of the session, I talked with Nicolosi alone. "Tell me about your friends at school," he said. I said I had two close female friends. "Male friends?" I admitted that I had always had trouble relating to boys my age. When I was in grade school, I preferred helping the teacher clean the classroom during breaks instead of playing sports.

"Are you open to therapy?" Nicolosi asked. "If you don't think this is working, you can stop anytime."

I agreed to start weekly sessions by phone. After our one-on-one meeting ended, I joined some of his other patients for group therapy. I was by far the youngest person there. The other men—four or five altogether—were in their forties and fifties and talked about their years in the "gay lifestyle," which had yielded only unhappiness. They wanted normal, fulfilling lives. They were tired of the club scene, the drug use, the promiscuity; their relationships didn't last; they complained that gay culture was youth-obsessed. If that was what being gay meant—and with 30-plus years on me, they would know—then I wanted to be normal, too.

I left the office with a copy of Nicolosi's most recent book, *Healing Homosexuality*, and a worksheet that categorized different emotions under the rubrics of "true self" and "false self." The true self felt masculine, was "adequate, on par," "secure, confident, capable," and "at home in [his] body." The false self did not feel masculine, was inadequate and insecure, and felt alienated from his body. This rang true. I had been teased throughout my childhood for being effeminate, and as a lanky, awkward teen with bad skin, I certainly was not at home in my body.

Another sheet illustrated the "triadic relationship" that led to homosexuality: a passive, distant father, an overinvolved mother, and a sensitive child. I was closer with my mother than my father. I was shy. The story seemed to fit, which was comforting: It gave me confidence that I could be cured.

According to Nicolosi, identification with a parent of the other gender is out of step with our biological and evolutionary "design." Because of this, it was impossible to ever become whole through gay relationships. I wanted to be whole.

On July 13, 1998—the same year I started therapy—a full-page ad appeared in *The New York Times* featuring a beaming woman with a diamond engagement ring and wedding band. "I'm proof that the truth can set you free," she proclaimed. The woman, Anne Paulk, said that molestation during adolescence led her to homosexuality, but that she had been healed through the power of Jesus Christ. The \$600,000 ad campaign—sponsored by 15 religious-right organizations, including the Christian

Coalition, the Family Research Council, and the American Family Association—ran for several weeks in such publications as *The Washington Post*, *USA Today*, and the *Los Angeles Times*. Robert Knight of the Family Research Council called it “the Normandy landing in the culture war.”

With few voices to challenge the testimonials, reporters transmitted them as revelation. *Newsweek* ran a sympathetic cover story on change therapy, and national and regional papers published ex-gays’ accounts. My mother might not have so easily found information about ex-gay therapy had the Christian right not planted this stake in the culture war.

The ad appeared 23 years after the American Psychiatric Association (APA) declassified homosexuality as a mental illness. As a consequence of that decision, extreme forms of reorientation therapy—aversion therapy involving electrocution or nausea-inducing drugs, for instance—had stopped being used. A small group of therapists continued to practice talk therapy that encouraged patients to see homosexuality as a developmental disorder, but they remained on the fringe until the Christian right took up their cause. This was a calculated political move. Instead of fire-and-brimstone denunciations from the pulpit, the ex-gay movement allowed the Christian right to couch its condemnation of homosexuality in a way that seemed compassionate. Focus on the Family called its new ex-gay ministry Love Won Out and talked about healing and caring for homosexuals.

The ex-gay movement turned the rhetoric of gay rights against itself: Shouldn’t ex-gays be able to pursue therapy and live the lives they want without facing discrimination?

The two largest groups that provide ex-gay counseling are Exodus International, a nondenominational Christian organization, and NARTH, its secular counterpart. If Exodus is the spirit of the ex-gay movement, NARTH is the brain. The organizations share many members, and Exodus parrots the developmental theories about same-sex attractions espoused by NARTH. Together with the late Charles Socarides, a psychiatrist who led the opposition to declassifying homosexuality as a mental illness, Nicolosi formed NARTH in 1992 as a “scientific organization that offers hope to those who struggle with unwanted homosexuality.” By 1998, the group was holding an annual conference, publishing its own journal, and training hundreds of psychiatrists, psychologists, and counselors. Nicolosi remains NARTH’s most visible advocate.

There are no reliable statistics for how many patients have received ex-gay treatment or how many therapists practice it, but in the late 1990s and early 2000s, ex-gay therapy enjoyed a legitimacy it hadn’t since the APA removed homosexuality from its diagnostic manual. Exodus had 83 chapters in 34 states. Its president, Alan Chambers, claimed in 2004 that he knew “tens of thousands of people who have successfully changed their sexual orientation.” Nicolosi appeared often on programs like *Oprah*, *20/20*, and *Larry King Live*. Whether or not the Christian right’s alliance with the ex-gay movement had constituted a D-Day in the culture wars, it had successfully challenged the prevailing idea that the best choice for gay people was to accept themselves.

After our initial meeting, I spoke with Nicolosi weekly by phone for more than three years, from the time I was 14 until I graduated high school. Like a rabbi instructing his student in understanding the Torah, Nicolosi encouraged me to interpret my daily life through the lens of his theories. I read in one of Nicolosi’s books, *Reparative Therapy of Male Homosexuality*, that he tries to position himself as a supportive father figure, typifying the sort of relationship that he believes his patients never had with their own father. I indeed came to see him this way.

We mostly talked about how my damaged masculine identity manifested itself in my attractions to other

boys. Nicolosi would ask me about my crushes at school and what I liked about them. Whether the trait was someone's build, good looks, popularity, or confidence, these conversations always ended with a redirect: Did I wish I had these traits? What might it feel like to be hugged by one of these guys? Did I want them to like and accept me?

Of course, I wanted to be as attractive as the classmates I admired; of course, I wanted to be accepted and liked by them. The line of questioning made me feel worse. Nicolosi explained, session after session, that I felt inadequate because I had not had sufficient male affirmation in childhood. I came to believe that my attraction to men was the result of the failure to connect with my father. Whenever I felt slighted by my male friends—for failing to call when they said they would, for neglecting to invite me to a party—I was re-experiencing a seminal rejection from my father. Most guys, I was told, let things like that roll off their back—an expression of their masculine confidence—but I was hurt by these things because it recalled prior trauma.

My parents were surprised at how the therapy blamed them for my condition. Initially, Nicolosi had told them they were one of the cases that did not fit the mold of the “triadic relationship”—in other words, that my sexual orientation was not their fault. Once it became clear that Nicolosi held them responsible, they disengaged. They continued paying for therapy but no longer checked in with Nicolosi regularly or asked what he and I talked about. I was happy to defy my parents. Whether the grievance was that my curfew wasn't late enough or that my parents didn't give me enough money, I had a trusted authority figure validating every perceived injustice. Any complaint became evidence of how my parents had failed me.

As I progressed in therapy, I felt that I was gaining insight into the source and causes of my sexual attractions.

As I progressed in therapy, I felt that I was gaining insight into the source and causes of my sexual attractions. The problem was, they didn't go away. At Nicolosi's urging, I told my best friend that I had to distance myself from her. Instead, Nicolosi encouraged me to form “genuine nonsexual bonds” with other men. He paired me with another one of his patients, Ryan Kendall, who was my age and lived in Colorado. We spoke by phone every few days.

Most of our conversations were mundane. We talked about our friends and people we didn't like, recounting every high-school travail and triumph. But we frequently deviated from the therapist-approved, buddy-buddy talk that was supposed to repair us. We flirted, a novel experience for me; there were no openly gay people at my high school. Ryan and I described what we looked like to each other. He said he had brown hair and eyes and was short but cute; I said I was tall and skinny (but left out my bad skin). We promised to send each other pictures, though we never did.

“What would Nicolosi say?” we'd ask. It became a regular refrain, an acknowledgment that we were misbehaving. Part of the bond we developed was in our shared rebellion against our therapist. For me, it had less to do with opposing ex-gay therapy than with the giddy thrill of defying authority. Ryan was convinced that change was impossible—“Nicolosi's a quack,” he once said. Despite my transgressions, I still believed in Nicolosi's theory. But my relationship with Ryan evinced a larger problem: While I was uncovering how my relationship with my parents continued to shape my inner life, I was still attracted to men. I chatted with older guys on the Internet and on a few occasions met them.

I felt guilty about this but trusted Nicolosi enough to admit I had been “experimenting.” He told me to be careful of meeting men off the Internet but that I shouldn't dwell on it or feel guilty. He said my sexual behavior was of secondary importance. If I understood myself and worked on my relationships with men,

the attractions would take care of themselves. I just had to be patient.

Late into my last year of high school, Nicolosi had a final conversation with my parents and told them that the treatment had been a success. “Your son will never enter the gay lifestyle,” he assured them.

A few weeks later, our housekeeper caught me with a boy in our backyard. This marked the end of therapy for me. My parents were convinced it had failed because Nicolosi had blamed things on them rather than on my being teased by my male peers as a child. They sent me to another therapist. I had one session but refused to continue. While I still accepted Nicolosi’s underlying theory about why people were gay, I believed that all the talking in the world couldn’t change me. When I left for Yale, my mother sent me off with a warning: Were she to discover that I had “entered the gay lifestyle,” my parents would no longer pay for my education. “I love you enough to stop you from hurting yourself,” she said.

In 2001, the year I started college, the ex-gay movement’s claims received a significant boost. In 1973, Columbia professor and prominent psychiatrist Robert Spitzer had led the effort to declassify homosexuality as a mental illness. Four years after Stonewall, it was a landmark event for the gay-rights movement. But 28 years later, Spitzer released a study that asserted change in one’s sexual orientation was possible. Based on 200 interviews with ex-gay patients—the largest sample amassed—the study did not make any claims about the success rate of ex-gay therapy. But Spitzer concluded that, at least for a highly select group of motivated individuals, it worked. What translated into the larger culture was: The father of the 1973 revolution in the classification and treatment of homosexuality, who could not be seen as just another biased ex-gay crusader with an agenda, had validated ex-gay therapy.

An Associated Press story called it “explosive.” In the words of one of Spitzer’s gay colleagues, it was like “throwing a grenade into the gay community.” For the ex-gay movement, it was a godsend. Whereas previous accounts of success had appeared in non-peer-reviewed, vanity, pay-to-publish journals like *Psychological Reports*, Spitzer’s study was published in the prestigious *Archives of Sexual Behavior*.

Spitzer’s study is still cited by ex-gay organizations as evidence that ex-gay therapy works. The study infuriated gay-rights supporters and many psychiatrists, who condemned its methodology and design. Participants had been referred to Spitzer by ex-gay groups like NARTH and Exodus, which had an interest in recommending clients who would validate their work. The claims of change were self-reports, and Spitzer had not compared them with a control group that would help him judge their credibility.

This spring, I visited Spitzer at his home in Princeton. He ambled toward the door in a walker. Frail but sharp-witted, Spitzer suffers from Parkinson’s disease. “It’s a bummer,” he said. I told Spitzer that Nicolosi had asked me to participate in the 2001 study and recount my success in therapy, but that I never called him. “I actually had great difficulty finding participants,” Spitzer said. “In all the years of doing ex-gay therapy, you’d think Nicolosi would have been able to provide more success stories. He only sent me nine patients.”

“How’d it turn out for you?” he asked. I said that while I stayed in the closet for a few years more than I might have, I ended up accepting my sexuality. At the end of college, I began to have steady boyfriends, and in February of last year—ten years after my last session with Dr. Nicolosi—I married my partner.

Spitzer was drawn to the topic of ex-gay therapy because it was controversial—“I was always attracted to controversy”—but was troubled by how the study was received. He did not want to suggest that gay people should pursue ex-gay therapy. His goal was to determine whether the counterfactual—the claim that no one had ever changed his or her sexual orientation through therapy—was true.

I asked about the criticisms leveled at him. “In retrospect, I have to admit I think the critiques are largely correct,” he said. “The findings can be considered evidence for what those who have undergone ex-gay therapy say about it, but nothing more.” He said he spoke with the editor of the *Archives of Sexual Behavior* about writing a retraction, but the editor declined. (Repeated attempts to contact the journal went unanswered.)

Spitzer said that he was proud of having been instrumental in removing homosexuality from the list of mental disorders. Now 80 and retired, he was afraid that the 2001 study would tarnish his legacy and perhaps hurt others. He said that failed attempts to rid oneself of homosexual attractions “can be quite harmful.” He has, though, no doubts about the 1973 fight over the classification of homosexuality.

“Had there been no Bob Spitzer, homosexuality would still have eventually been removed from the list of psychiatric disorders,” he said. “But it wouldn’t have happened in 1973.”

Spitzer was growing tired and asked how many more questions I had. Nothing, I responded, unless you have something to add.

He did. Would I print a retraction of his 2001 study, “so I don’t have to worry about it anymore”?

The ex-gay movement has relied on the Spitzer study as the single piece of objective evidence that therapy can work. The need for that evidence became more pressing in the early 2000s, when a cadre of gay-rights bloggers began to scrutinize the movement, ready to expose any hint of hypocrisy. There was plenty of material.

John Paulk, Love Won Out founder, chair of the board of Exodus International, and husband of Anne Paulk, was spotted and photographed at a Washington, D.C., gay bar. Richard Cohen, the founder of PFOX (Parents and Friends of Ex-Gays and Gays)—intended as the ex-gay counterpart to PFLAG (Parents, Families, and Friends of Lesbians and Gays)—was expelled from the American Counseling Association for ethics violations. Michael Johnston, the founder of “National Coming Out of Homosexuality Day,” was revealed to have infected men he’d met on the Internet with HIV through unprotected sex.

A member of NARTH’s scientific advisory board ignited controversy by suggesting that blacks were better off having been enslaved, which allowed them to escape the “savage” continent of Africa. Shortly thereafter, the board of NARTH removed Nicolosi, who was still president. In 2010 it was revealed that NARTH’s executive secretary, Abba Goldberg, was a con man who had served 18 months in prison.

Therapists associated with NARTH and Exodus were accused of sexually assaulting clients or engaging in questionable therapy practices. Among them were Alan Downing, the lead therapist of JONAH (Jews Offering New Alternatives to Homosexuality), who made his patients strip and touch themselves in front of a mirror; NARTH member Christopher Austin, who was convicted of “unlawfully, intentionally and knowingly caus[ing] penetration of” a client; and Exodus-affiliated Mike Jones, who asked a patient to take off his shirt and do push-ups for him.

The movement also suffered several high-profile defections. John Evans, who had founded the first ex-gay ministry outside of San Francisco, renounced change therapy when a friend committed suicide after failing to become heterosexual. Former ex-gay Peterson Toscano, who was involved in the movement for 17 years, founded Beyond Ex-Gay, an online community for “ex-gay survivors.” In 2007, Exodus co-founder Michael Bussee apologized for his role in starting the organization.

In fact, they found that it runs the risk of making patients anxious, depressed, and at times suicidal.

Partly as a response to the resurgence of ex-gay therapy, mainstream professional organizations also took a harder stance. From 2007 to 2009, the American Psychiatric Association conducted a review of all the literature on efforts to change sexual orientation. Judith Glassgold, the chair of the task force that produced the report, said the group found no scientific evidence that ex-gay therapy works. In fact, they found that it runs the risk of making patients anxious, depressed, and at times suicidal. "It provided false hope, which can be devastating," Glassgold said. "It harmed self-esteem and self-regard by focusing on the psychopathology of homosexuality." The APA now tells its members they should not engage in the practice.

In the past few years, even Exodus has begun to show cracks in its support for ex-gay therapy. The organization has softened its rhetoric, encouraging its ministries to promote celibacy rather than change in order to live in concert with their religious values. The group no longer talks about "Freedom from Homosexuality"—its motto—but about the nobility of continuing to struggle against same-sex attractions.

Exodus has also begun to distance itself from NARTH. In September of 2011, Exodus removed references to Nicolosi's books and articles from its website. In January, Exodus president Alan Chambers spoke at a meeting of the Gay Christian Network. When asked about the possibility of gay people changing their sexual orientation, Chambers—who'd once claimed that he knew of thousands of success stories—said "99.9 percent" of those who had attempted to rid themselves of same-sex attractions had failed.

There are other signs of decline. Attendance at Focus on the Family's Love Won Out conference, the movement's largest annual gathering, has dropped. Focus on the Family recently sold Love Won Out to Exodus. Ex-gay activists have less of a presence at religious-right events. Twenty years after NARTH's founding, the movement has lost its luster.

I've come to know a number of Nicolosi's former patients and others who underwent therapy with NARTH members. Part of an informal alumni network of ex-gay dropouts, we see one another occasionally at conferences and interact in the blogosphere. Perhaps the best known is Daniel Gonzales, who writes for the website Box Turtle Bulletin.

Nicolosi had also asked Daniel to participate in Spitzer's study. When Daniel left therapy, he thought he had gained valuable insight into his condition but eventually gave up trying to resist his same-sex attractions. "I wasted one and a half years of my life on the therapy," he said. "For a long time, the things Nicolosi said about gay relationships continued to haunt me." His relationships with men continually failed because he was convinced, as Nicolosi had told him, that they would fall apart as soon as he began to feel comfortable with them, at peace with his masculine self.

Nicolosi's ideas did more than haunt me. The first two years of college, they were the basis for how I saw myself: a leper with no hope of a cure. I stayed in the closet but had sexual encounters with classmates nonetheless. I became increasingly depressed but didn't go to mental-health counseling for fear that a well-meaning therapist would inform my parents that I was living the "gay lifestyle."

I planned for what I would do if my parents decided to stop paying my tuition. I would stay in New Haven and get a job. I would apply for a scholarship from the Point Foundation, which gives financial aid to gay kids whose parents have disowned them. I would not go back to Arizona. I would not see an ex-gay therapist.

I spent hours in front of the window of my third-story room, wondering whether jumping would kill or merely paralyze me. I had a prescription for Ambien and considered taking the entire bottle and perching myself on the ledge until it kicked in—a sort of insurance.

I am not sure how it all came to a head. Perhaps it was academic pressure combined with the increasing conflict between my ideals and my behavior. But in the spring of my sophomore year, the disparate parts of myself I had managed to hold together—the part of me that thought being gay was wrong, the part that slept with men anyway, the part of myself I let the world see, and the part that suffered in silence—came undone. I slept in 20-minute spurts for two nights, consumed with despair. I eyed the prescription bottles on my dresser with anxious excitement. I had reached a point at which I feared myself more than what would happen if I were gay.

Realizing how close I was to impulsively deciding to kill myself, I went to the college dean's office and said I was suicidal. He walked me over to the Department of Undergraduate Health, and I was admitted to the Yale Psychiatric Hospital. During the intake interview, I had a panic attack and handed the counselor a handwritten note that said, "Whatever happens, please don't take me away from here." I had signed my full name and dated it. More than anything, I feared going home.

It was gray and cold my first night at the hospital. I remember looking out the window of the room I was sharing with a schizophrenic. Snow covered the ground in the enclosed courtyard below. Restless, I gathered a stack of magazines from the common area and flipped through the pages, noticing the men in the fashion advertisements. I tore out the ads and put them in a clear plastic file folder. I lay down in bed and held the folder against my chest. "It's OK, it's OK, it's OK," I murmured.

I indeed had to go home for a year before returning to school. By then my father, who flew to New Haven the day I committed myself, realized that therapy—and the pressure he and my mother had placed on me—was doing more harm than good. "I'd rather have a gay son than a dead son," he said.

The ordeal was a turning point. While it took years of counseling to disabuse myself of the ideas I had learned while undergoing therapy with Nicolosi, it was the first time I encountered professionals who were affirming of my sexuality, and the first time I allowed myself to think it was all right to be gay.

Ryan, my therapy partner, was even more deeply affected. Two years ago, I came across his name in transcripts of the lawsuit against California's ban on same-sex marriage, Proposition 8, in which he testified about the harm therapy with Nicolosi had caused. Afterward, I friended him on Facebook.

We recently met in person for the first time at a restaurant on Manhattan's West Side. It had been 12 years since we'd last spoken on the phone. At 28, Ryan had just moved to New York City from Denver to start his undergraduate studies at Columbia. He looked like he does in his Facebook pictures: solid and short, with a shaved head and large brown eyes.

Ryan had initiated dependency-and-neglect proceedings against his parents at age 16 to escape ex-gay therapy. That's when we fell out of touch. He dropped out of high school and lived intermittently with friends, then with his brother until his house was foreclosed on. Ryan had been homeless at times. He had a series of short-term jobs and for a period dealt drugs to make money but was broke most of the time. For food, on a few occasions, he filled a shopping cart with items and then ran it out of the grocery store. "I was beyond control," he said. "Something just broke in me. I was trying to destroy myself because I had internalized all the homophobia from therapy."

When did things turn around for him? A few years ago, he said, he landed a job working in an administrative-support position at the Denver Police Department. It was then that he started getting

involved in gay-rights causes. “The Prop. 8 lawsuit was the first time I felt people really believed in me,” he says. “I was surrounded by smart, important people, and they paid attention to me.”

I could relate to that: Being at Yale was the first time I felt validated by smart, important people. I asked Ryan what he would say to Nicolosi if he were at the table.

“I’d ask him why he doesn’t just stop.”

I couldn’t help wondering what Nicolosi would say to me, or Daniel, or Ryan. Does he feel as though he failed us? Does he think we failed him? Has hearing the stories of his former patients posted all over YouTube and the blogosphere changed his thinking? I decide to call him to find out.

I am anxious about talking to Nicolosi again, afraid of what our conversation might bring back. He knew me as an adolescent better than my parents or friends did.

When I first reach Nicolosi on the phone, he says he remembers me well and that he is surprised that I “went in the gay direction. You really seemed to get it.” The conversation is quick. He is between clients, so we arrange to speak a few days later.

I call and tell him I’m recording our conversation. “I’m recording too,” he jokes, “in case you say, ‘Nicolosi said that gays are sick weirdos and they’re perverted and they all should go to hell.’”

I chuckle. He’s just as I remember him—irreverent, warm. He says he’s been thinking about me since I called. I ask why, if he was so sure I had “got it,” I never experienced change in my sexual orientation.

Nicolosi says his techniques have improved—now his patients focus more on the moment of sexual attraction instead of speaking generally about the cause of homosexuality. Therapy, he says, has become more effective. But part of the reason it failed for me, he says, was also that I was stuck: There were not men I could bond with, and my parents did not understand me. It’s the same thing he told me throughout high school.

What about people who don’t fit his model? “After almost 30 years of work, I can say to you that I’ve never met a single homosexual who’s had a loving and respectful relationship with his father,” he says. I had heard it all before.

I’m thinking, as he speaks, that for all his talk about understanding the homosexual condition, what it feels like to be gay is beyond Nicolosi’s experience. For him, changing one’s sexual orientation is a hypothetical proposition. He’s never lived it. Only his patients have had to face the failure of his ideas.

I mention Ryan and tell Nicolosi he blames him for destroying his family. Nicolosi says he doesn’t remember Ryan. But he is defensive about taking any responsibility. “For all this concern about how I damage people, where is the damage? We’re currently treating 137 people. Over 30 years, don’t you think there’d be a busload of people who are damaged?”

I asked him what he remembers about me. “All I can do is visualize a teenager in his room in a hot small town,” he says. “You would talk to me about the loneliness, the kids at school—you really had no friends. You desperately wanted to get out.”

He is trying to draw me out, get me to talk to him openly. He is the therapist, and I am once again his

patient. I am reticent. I tell him I did end up leaving Arizona.

“And I encouraged you, right?” he says. “Quite honestly, Gabriel, I hope you see me as someone who didn’t make you feel worse about yourself, someone who did not force you to do or believe anything about yourself that you didn’t want to.”

It’s true that while in therapy, I did not feel coerced into believing his theories. Like nuclear fallout, the damage came later, when I realized my sexual orientation would not change. I could have told Nicolosi about my thoughts of suicide, my time in the mental institution. I could have told him that my parents still don’t understand me but that I’m grown up now and it has less of a bearing on my life. I could have told him that I married a man. But I realize it wouldn’t be of any use: I’ve changed since I left therapy, but Nicolosi has not. For years I shared my innermost thoughts and feelings with him. Now I want to keep this for myself.

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