THE ATTACK ON PCC, PART 5: TURNING THE TABLES AROUND





In this last installment to the defense of People Can Change, we will look into the document with which the complainants hope to silence the bisexual community and their therapists for once and for all, in order to replace them with Gay Affirmative Therapists only. There will be no more talk of heterosexuality for bisexuals, once radical gay-lib has brought its campaign to an end. Bisexuals and homosexuals are henceforth to be considered one and the same.

This time we will not defend PCC but turn the tables around. What if you indeed joined the chorus of the gay-lib extremists and copied and published all their stories and attacks on other people, would that be in accordance with the law? We will demonstrate that THEN you would be harming consumer and business interests like they have never been harmed before.

Let us look at the complaint page by page.

5.1 Page 1: The complainants allege that

> "*The practice is based on the false premise that being lesbian, gay, bisexual, or transgender ("LGBT") is a mental illness or disorder caused by a developmental deficiency, trauma, and/or unmet emotional needs.*"

The words "mental illness" and "disorder" are never used by PCC. They are put into the mouths of PCC and licensed therapists by the complainants. Within the realm of psychiatry they have a neutral connotation, but a negative one if used by lay people outside that context.

Although not a mental disorder per se, homosexuality is still rightfully seen as a condition, a set of behaviors, longings, attractions and urges meriting much research, some of which is carried out by gay activist groups themselves. If homosexuality were totally neither here nor there, then this does not explain why gay activists groups themselves insist on research on the subject.

Ideas about homosexuality are based on a century of psychotherapeutical knowledge, experi-

ence, literature and research on the subject of psychosexual development, trauma and the way in which emotional needs have been dealt with during childhood. This subject is the core of developmental psychology, a heavily researched subject. The idea that specific constellations during childhood are to be found in many people, later identifying as gay, has not been disproven by any sound research into gender identity or sexual identity.

There is no research denying that specifically trauma's, developmental gender issues and unmet emotional needs are present. Despite forty years of gay-lib, the central theme of personal development issues has not been falsified, although the activists have had time enough to prove their negation of all realities named in the developmental approach of psychology and psychiatry.

->Were PCC to reiterate the stance that no trauma's, gender development issues or unmet emotional needs, more than average, are to be found in people identifying as gay, then it would be breaking the law. It would be spreading false and deceitful information to consumers.

Pathology in the homosexual condition

Researchers have shown that homosexuals—notably homosexual men, but in some areas homosexual women—have greater prevalence of pathology than the general population. This is supported by studies that demonstrate the suicidal risk-taking of unprotected sex (van Kesteren et al., 2007), violence (Owen & Burke, 2004), antisocial behavior (Fergusson et al., 1999), higher levels of substance abuse (Sandfort et al., 2001), general suicidality (de Graaf et al., 2006), higher levels of promiscuity and of nonmonogamous primary relationships (Laumann et al., 1994), higher levels of paraphilias (such as fisting) (Crosby & Mettey, 2004), sexual addiction (Dodge et al., 2004), personality disorders (Zubenko, George, Soloff, & Schulz, 1987), and overall pathology (Cochran & Mays, 2007; Sandfort et al., 2001).

As a rule of thumb, many of these problematic behaviors and psychological dysfunctions are experienced among homosexuals at about three times the prevalence found in the general population—and sometimes much more. The preceding material shows that many different pathological traits are more prevalent in homosexual than in heterosexual groups. No other group of comparable size in society experiences such intense and widespread pathology.

No sound psychiatrist can see how a rejecting society, as complainants claim, can create for example personality disorders, paraphilias, sexual addictions, high risk harmful risk-taking sexual acts, and overall pathology. There is no sound scientific evidence either. Even in tolerant societies like Denmark and the Netherlands, where discrimination is non-existent, the statistics on psychological problems are almost as high as in the USA.

->Were PCC to reiterate to the general public that all problems are solely linked to society in the absence of research to prove this, then it will be breaking the law. It would be offering deceptive and false information to consumers, barring them from seeking much needed help at a personal, non-societal professional level.

The only alternative would be gay activism directed at changing the environment. But this doesn't make sense in tolerant cities or societies. There is great risk of neglecting the client at hand, and that is against the law. PCC would do harm to the interests of consumers by looking the other way, as do complainants.

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5.2 Complaint page 1:

> *"there is substantial competent and reliable scientific evidence that conversion therapy, including the methods employed by PCC, is ineffective."*

There is no such thing. The American Psychological Association has stated in its extensive review in 2009 that there is no such certainty. The review states:

> *"We found that nonaversive and modern approaches to SOCE since 1978 have not been rigorously evaluated. Given the limited amount of methodologically sound research, we cannot draw a conclusion regarding whether recent forms of SOCE are or are not effective."*

If the APA cannot draw the conclusion that it is ineffective, then how can complainants do so?

->Were PCC to comply to complainants and reiterate that substantial and reliable scientific evidence including the methods employed by PCC are ineffective, then it would be breaking the law by offering unsubstantiated, wild and deceptive information, which would limit and discourage consumer choices, especially bisexuals, in seeking help in their personal identity issues. PCC would be acting against the law.

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5.3 Complaint page 1:

> *"can and often does result in significant health and safety risks to consumers of those services,"*

These words are not to be found in any document issued by any researcher on the issue. It is

true that everywhere the help you get in mental and general health can result in risks of side effects. According to research 5-20% of all psychotherapeutical interventions, regardless of the issue or type of therapy offered, render side-effects. But there is no evidence whatsoever that it always “DOES result”and even “OFTEN” so in inappropriate risks or hazards. These are wild fabrications, with no research to substantiate it.

The statement stems from a general disclaimer issued by the American Psychiatric Association in 1973, stating that there may be “some risk of possible harm”. But this disclaimer was written in another era, when other (now obsolete) forms of therapy were common. The APA also did not specify to which specific form of intervention the disclaimer was directed, making it useless for the practising professional.

The complainant NCLR and its advocate Samantha Ames even dare to state in gay magazines that licensed psychotherapists and psychologists have quote *“blood on their hands”*. These wild and fear-mongering fabrications are not substantiated by any sound research.

->Were PCC to reiterate the wild allegations of the complainants, then it would be spreading alarming messages to consumers, in which psychotherapists are defamed, psychotherapy is portrayed as a very scary and harmful event, and which would make consumers afraid of the heterosexual society outside the gay ghetto into which they have been initiated by Gay Affirmative Therapy. It would diminish their trust in licensed professional therapists and would undermine the necessary confidence in the medical community, including the field of psychiatry. Because PCC can not substantiate the claims, it would be dealing in defiance of the 2009 review of the American Psychological Association, where it says:

> (Page 42): *“Early and recent research studies provide no clear indication of the prevalence of harmful outcomes among people who have undergone efforts to change their sexual orientation or the frequency of occurrence of harm. Why? Because no study to date of adequate scientific rigor has been explicitly designed to do so. Thus, we cannot conclude how likely it is that harm will occur from Sexual Orientation Change Efforts.”*

->Were PCC to comply with the complainants and advise them to seek help from a Gay Affirmative Therapist, then PCC would be breaking the law, because it cannot voucher that GAT is free from harm. No such research has been carried out on GAT, and neither does GAT issue any warnings. Furthermore, GAT does not address the heterosexual side of the bisexual consumer, and sets out to affirm only the gay side, as the word GAT explicitly conveys. Therefore the consumer would be harmed, because his wish for therapy is not adequately addressed from the perspective of the bisexual (meaning the co-existence of two orientations).

-> Were PCC to imply, as do complainants, that sexuality is always under all circumstances and under all age groups a fixed entity and that sexual fluidity is non-existent, then it would

be committing consumer fraud and deceit, because PC has no scientific research or other forms of proof to substantiate its claims. In doing so, it would harm the interests of the millions of consumers who feel, experience, and are living testimony to the opposite. PCC would be acting against the law.

->Were PCC to use, as complainants desire, the phrase 'Sexual Orientation Change Efforts', meaning that all forms of discussion or questioning the subject of sexual orientation are one and the same, and can easily be thrown onto one big heap, then PCC would be committing consumer fraud. After all, PCC would be using a terminology so vague, so generalizing and so unspecific that consumers and providers have no knowledge which exact activity PCC would be denouncing. This would harm consumer choices, making the whole area of one's sexual urges, childhood experiences, trauma's, rape, incest experiences, and family interaction, yet once again a no-go subject to discuss or argue about. PCC would instigate a taboo. And this would ultimately diminish consumer choices, thereby breaking the law.

->Were PCC, as does complainant NCLR, to denounce specifically the works and achievements of professional therapists united in Narth, including dr. Nicolosi, then PCC would be subject to lawsuits imposed on it by Narth for slander and defamation, lawsuits that PCC will obviously lose due to the fact that PCC has no substantiated literature to back up these harmful acts towards the named therapists. PCC will clearly go bankrupt. But the FTC is barred from instituting such actions that would unduely burden the business of the defendant. Then FTC would be taking it one step too far, which is prevented by law.

->Were PCC to reiterate the testimonies of so-called 'harmed' individuals, testimonies which are heavily marketed by the complainants, then PCC would be breaking the law, in view of the fact that the very same complainants insist that testimonies brought forward by individuals who experience no harm and much benefit, are never to be trusted. In the complaint after all, the complainants go to great length to stress that testimonies may very well be due to appeasing the investigator.

They write that

> *"SOCE providers, with their investment in a heterosexual outcome, create a situation where their clients are set up to lie to them if they do not experience this change. Then providers use such reports of change to promote their interventions. Those who do not report change are dismissed, for example, by the claim that they did not work hard enough".*

Denouncing self-report is a tricky business, there where self-report is the primary source of information on therapy and research in almost all of psychiatry and psychology. To discredit the named therapists and to assume that the same does not occur in, say drug abuse or mar-

riage counsellors, who also wish to see their clients change or improve, is a novelty. All this is the private and unsubstantiated opinion, or rather fantasy of one Dr. Beckstead.

Were PCC to comply, then the same can of course also be said of the testimonies of 'harm' that the staunch activists of the NCLR and HRC collect, market and if need be invent on the spot. They have even set a 2019 deadline. They have special websites dedicated to this cause and have an investment in a 'harm' outcome. On their websites and on Youtube they market the rhetoric which they wish to hear. None of the testimonies were collected out of a random and representative sample of the general population by an independent and bisexuality-friendly agency.

Therefore, PCC may safely presume that eliciting a 'harm' outcome is the cornerstone of the NCLR campaign. Was it Tina Turner who sang: "Any old music will do?" Reiterating these negative testimonies is of course as equally deceptive as the positive testimonies on the current PCC website allegedly are.

->Were PCC to comply to the complainants, then it would not be allowed to use any testimony of any sort on 'harm' or other issues, leaving the consumer only the scientifically substantiated literature to go on. But this extremely scarce literature states that there is no scientifically sound evidence of harm being done due to orientation therapy in this day and age (APA review 2009). Therefore PCC would be acting against the law to name and market testimonies of 'harm' done by orientation therapy. It would harrass consumers with deceitful, unfair and fraudulent conduct.

The only way to go for the FTC is to dismiss the complaint, and leave the controversy between homosexuals and bisexuals about feeling attracted to the opposite sex, right where it belongs: in the realm of free speech in a free society.

Home