DAVID PICKUP SPEAKS UP AGAINST BANS ON THERAPEUTIC COUNSELLING OF QUESTIONING YOUTHS

In the New Mexico legislative counsel in 2017, therapist David Pickup spoke up. The LGBT lobby in the USA, led by the extremely wealthy radical gay-feminist law firm NLCR from California, is trying to outlaw (SB121) all forms of professional counselling of youngsters who have questions about their homo-erotic desires. They only endorse counselling by homosexual activists who insist youngsters adopt the gay label from an early age as possible, preferably age 10. David confronted them with the facts.

Adopting the “gay” label ultimately means denouncing any form of heterosexual desire or aspirations for ever more. It is based on the belief that you would be “born that way”. Thinking or talking of the opposite sex is considered harmful by the activists. And in this fashion they so inform lay people with no apparent opposition. The activists know for sure, and this certainty is to be engraved in legal stone for ever more by use of slanderous stories procured by the NCLR. It is part of a deliberate nationwide disinformation campaign of fake facts, coming from this small extremist faction of gay-lib. Heterosexual therapists are demonized. At a hearing for legislators, this is what therapist David Pickup from Texas had to say about it.

We present David’s short version for the legislators, and his extended version for those who wish to review his statements in more depth.

————————–

Short version (3 minutes)

Thank you for allowing me to speak today. My name is David Pickup and I am a licensed psychotherapist in Texas and California. I urge you to vote NO on SB 121.

1. “Harm” does not exist

With all due respect, this bill stands or falls on the “harm” argument.

There has not been *ONE* ethical complaint in New Mexico for this therapy, and there hasn’t been *ANY* in *ANY* state for the past 35-40 years.

I know most authentic Reparative Therapists in this country, and I don’t know any in New Mexico.

So why is Rep. Candelaria up in arms about LGBT kids being harmed? The latest extensive report on these therapies from the American Psychological Association states on pg 82-83 that

> “*there is no proof of harm of these therapies”.*

And they have also said that

> “*evidently some people benefit by these therapies”*.

So why does New Mexico have this law up for approval? The APA states on their website that there is no gay gene. Also, other epigenetic and hormonal studies are inconclusive. This means that you cannot draw any scientific conclusion on this subject.

So why doesn’t this bill consider professional, safe ethical, and compassionate therapy for children with unwanted same-sex attraction, especially since many children experience unwanted sexual feelings in puberty because of being sexually abused by older teens or pedophiles?

Just a few months ago, newspapers right here revealed that a male employee of the Albuquerque Boy and Girls Club sexually molested two boys and one of the directors of that club who many of you know quite well was unjustifiably sued because it happened in that club. If those boys seek counselling for unwanted homosexual attractions, it will be illegal and their

anxiety, depression and confusion will certainly follow. The proponents have expressed no care at all about the children who suffer like this.

The proponents have gone to great length to only present some kind of shame-based horror stories that they say are therapies, then the stories we hear are coming from some kind of unlicensed quackery or shame-based “spiritual” boot camps. The existence of “camps” is undocumented, meaning rumours.

2. Therapy works

I can tell you that authentic Reparative Therapy really works and I can give you strong evidence at any time. Why then is this committee being asked to interfere with the sacrosanct confidentiality between a client and his therapist in his private office?

Also, other proponents of this bill who are represented from California and other states are not telling you that in the last few years the 3rd Federal Circuit Court stated that these kinds of bills are a violation of free speech.

3. 20 out of 25 states approve of Reparative Therapy

The proponents are also not telling you that 20 out of 25 state therapy ban attempts have been defeated within the last 4 years. So why is New Mexico invested in SB 121?

When you consider the real evidence, this bill doesn’t make sense. So why is it being shoved through the legislature? Because the proponents are trying to convince you that it’s all about harm and all about saving children.

4. Merely pushing a radical agenda

But the real evidence points to a philosophical political agenda being forced onto you by people who will stop at nothing to get this through. This is the real agenda, and no one is talking about it. If they really cared about children and harm, they would at the very least amend this bill to take care of the children I’ve just been speaking for. And by the way, one of those sexually abused little boys was me. As an adult, authentic Reparative Therapy helped save my life.

——————————–

EXTENDED VERSION

Thank you for allowing me to speak today. My name is David Pickup and I am a licensed psychotherapist in Texas and California. I urge you to vote NO on SB 121. With all due respect, this bill has gone too far very fast because you have not been given the truth about professional therapy for unwanted homosexual attractions. I'm sure you are all good and honorable people, so evidently the proponents of this bill have kept from you the untold story, until now.

I'm sure you would not vote yes for this bill today if you knew that children in New Mexico who have been sexually abused by older teens and adults, and whose homosexual feelings arise because of this abuse will be no longer legally allowed to resolve these issues. Evidently, you're not aware that the American Psychological association in its most detailed Task Force report on this therapy stated on page 82-83 of their conclusions that there is no proof of harm of these therapies, and they also wrote that some people evidently benefit from this therapy.

You didn't know that when you outlaw professional therapy from children with unwanted same-sex attraction that they experience anxiety, depression and sometimes suicide ideation because they have no where to turn, except unlicensed "spiritual" programs to deal with these feelings that they know are not occurring genetically.

Evidently you didn't know that there is no Gay gene, the other hormonal and epigenetic studies are inconclusive, and that even the APA freely admits this on their official website. I'm sure you did not know that there has not been one ethical complaint in any state within the last 35-40 years about this therapy.

You aren't hearing horror stories from clients who actually received professional therapy because the stories you've heard are coming from some kind of unlicensed or religious shaming based experiences that have nothing, nothing to do with sound professional therapy.

I'm certain you have not been told that authentic Reparative Therapy is about love and a deep respect for the rise of the authentic self, that it's about resolving the deep wounds that cause homosexual feelings for some New Mexico children, that children and adults state that therapy results in authentic and emotional change because they were not born LGBT, that they report resolution of depression and anxiety, and that their dissipation of homosexual feelings occurs spontaneously and automatically over time just like other issues that are resolved in a therapist's office.

Evidently you have not considered that you make government overstep its bounds by violating the sacrosanct principle of confidentiality that must continue between therapist and

client. I don't think anyone has informed you that these kinds of bills violate the constitutional right to free speech, which the 3rd Federal District Court agreed with in 2014, or that 20 out of 25 state therapy bans have been defeated within the last 4 years because legislators have seen the damage that this bill can do.

I don't think you know that this bill is not really about children. If it was, then all the proponents of this bill here today, including Representative Candelaria would care about ALL children, including the ones who will certainly be damaged because if this bill is passed.

Given all this, how could you not at least cause this bill to be reconsidered and revamped. Do you not remember one of your most esteemed activists for New Mexico who ran for state representative last year who was sued by the parents of a boy who was sexually molested in the Boys and Girls Clubs in Albuquerque.

If this boy experiences homosexual feelings further in puberty that are distressing to him, this bill will make it illegal for him to lessen or dissipate those feelings and his confusion and depression will go up because you voted today that there's something wrong with him, his parents and his counselor for wanting simple therapy that works.

I am also speaking to you because I was a child who experienced sexual abuse by a young man when I was 5 years old. I know the horrific experiences of this first hand. One of the abuses that I experienced was the rise of homosexual feelings as a result of what this man did to me. I am a heterosexual, but when I reached puberty around 13, I was severely repressed and confused concerning my gender and sexuality. I didn't have a therapist to help me deal with these issues. My sense of masculinity was severely shamed and underdeveloped. I suffered greatly for many years.

Thankfully, later in life, I experienced the transformative power of *authentic* Reparative Therapy. I am now a Reparative Therapist who is helping children and adults from all over the country deal successfully with these issues. I was trained under the direction of Dr. Joseph Nicolosi, the creator of *real* Reparative Therapy. Please know that every detail of the harmful things this bill calls Sexual Orientation Change Efforts (SOCE) is certainly *not* authentic Reparative Therapy.

I do not believe that Gay persons should be demeaned, discriminated against, or mistreated. In fact, it might surprise you to know that I have Gay clients who are minors and adults, and I do not coerce them or treat them in any other way but with unconditional positive regard. They know what I do, and they trust me as we work on other issues besides sexuality. I help to insure their safety as a matter of fact.

SOCE practitioners do NOT use aversive treatments such as shame, electric shock or nausea inducing drugs.

Aversive treatments were seen for some psychological conditions in the 1960s and 1970s. But they have not been used since, and none of the many SOCE therapists I know would ever think of using these methods. And if by some incredible chance they do, they should be prosecuted. But there is no proof of it. The American Psychological Association's 2009 Task Force Report on Appropriate Therapeutic Responses to SOCE will confirm this.

The linking of SOCE practitioners with aversive and shock treatments is a favorite smear of SOCE opponents, but it has not had any basis in fact for well over 30 years. That this factual inaccuracy is highlighted so prominently in HB2451 certainly lends credence to the suspicion that the primary aim of the bill's sponsors is to demonize SOCE, licensed clinicians, and parents whose children need and ask for therapy that truly works.

HB2451 states that SOCE can be harmful or carry some risk of harm and that SOCE practitioners supposedly deny this. SOCE, as is the case with all forms of psychological care, carries some risk of harm. No professional therapist engaged in SOCE would deny this.

But the question is whether SOCE carries an exceptionally greater risk than all other forms of psychological intervention, and the answer is that no studies exist that can truly speak to this issue.

The studies cited by the APA *Task Force* (2009) concerning harm are unable to be generalized beyond their specific samples, and the Task Force concluded,

> "*Thus, we cannot conclude how likely it is that harm will occur from SOCE" (p. 42).*

Therefore, for the sponsors of AB2451 to use the APA as a means of casting aspersions on all SOCE is an act of scientific dishonesty.

HB2451 claims this bill will protect minors from the potential, harmful effects associated with SOCE, including severe mental or emotional problems including suicide.

In fact, there is reason to believe that this bill will likely *increase* harms to minors through its unintended consequences. Here's how.

It would appear quite likely that the majority of parents who bring their children to therapists for SOCE are conservatively religious. HB2451 sponsors assume that with SOCE prohibited among licensed mental-health professionals, these parents would then bring their children to clinicians who would only provide care aimed at encouraging their children to embrace GLB identity and behavior. I think the more likely scenario is that these parents, many of whom are already suspicious of the mental health professions, will simply pursue SOCE for their children with unlicensed, unregulated, and unaccountable religious counselors that do not fall under the jurisdiction of this bill.

The vast majority of anecdotal accounts of harm to minors from SOCE seem attributable to these types of counselors and to religiously oriented programs. Parents who receive professional care by SOCE clinicians whom they sense are understanding of and sympathetic to their worldview will be receptive to their guidance, especially when their child is not interested in SOCE. It is highly unlikely that the average unlicensed conservatively religious counselor will be as sensitive to the contextual and motivational considerations licensed therapists must assess when determining if change-oriented intervention is appropriate for a minor client.

This is a prescription for an increased risk of harm. It would indeed be a tragic but foreseeable irony if the sponsor's zeal to ban SOCE for minors via SB 1172 ends up actually increasing the harm these youths experience.

One wonders what the sponsors of HB2451 would say about a widespread intervention for minors that carries the following warning: *[This intervention] "… increased the risk of suicidal thinking and behavior (suicidality) in short-term studies in children, adolescents, and young adults with major depressive disorder (MDD) and other psychiatric disorders."* This is the warning for the antidepressant Prozac. You can check out the potential side effects for other medications at www.pdf.net.

Former APA President Dr. Nicholas Cummings observed that while unsuccessful attempts have been made in the APA to ban SOCE, the APA refused to take a stand on "rebirthing therapy," which resulted in the suffocation death of one child when the birth process was simulated with tight blankets (Cummings, 2008). Cummings then concluded,

> "*If the APA rushes to judgment in the matter of sexual reorientation therapy while remaining derelict in its silence toward proven harmful techniques, therapists will be intimidated and patients will lose their right to choose their own treatment objectives. The APA, not the consumer, will become the de facto determiner of therapeutic goals" (p. 208).*

This sentiment is equally valid for HB2451, only in this case Washington politicians, not the California consumer, will dictate which goals for psychological care are acceptable.

It is clear that this legislation is playing fast and loose with its assertions about SOCE. It would be a travesty of immense proportions if the Washington legislature allows these falsehoods and inaccuracies to be enshrined into law. It would also constitute a manipulation of the political process by activists that certainly would invite a legal challenge as it has in four other states.

I would further note that, to their credit, the Task Force also acknowledged that the gay affirmative therapeutic approach " has not been evaluated for safety and efficacy" (p. 91). Additionally in the same APA Task Force Report that HB2451 that sponsors claim proves SOCE causes harm and suicide, is the same document that states there is no proof that SOCE causes harm on pg. 82-83.

Considering the egregious errors of AB2451, this bill would restrict the rights of parents to determine the appropriate psychological care for their minor children and hinder adults' ability to make informed choices regarding their childrens therapeutic approach.

HB2451 represents a usurping of the role of mental health organizations and licensing boards to provide oversight in psychological care. HB2451 transfers the oversight of proper psychological care from mental health professionals and licensing boards into the hands of politicians. In short, the state licensing board already has ethical and legal recourse to suspend or revoke any clinician who dares to coerce a minor into any kind of therapy. Also, consider this, did you know there has not been one complaint to the state board in decades of anyone who stated they were harmed by SOCE? Additionally, did you know that there are websites in existence that you can see for yourself the good that Reparative Therapy does? www.voices-of-change.org and www.narth.com.

It needs to be pointed out that an unmistakable implication of HB2451 is that the Washington licensing agencies and mental health associations are so derelict in their protection of LGBT youth that politicians must step in and do their work for them. How else should we understand the complete absence of licensure revocations among therapists who provide SOCE when suicides and severe mental anguish are so presumably widespread among LGBT youth and attributable to this form of psychological care?

Honorable legislators, with all due respect, you will become unintentionally complicit in the furtherance of sexual abuse of children, especially if abused heterosexual minors cannot receive sound, science-based, effective therapy for unwanted homosexual feelings that have arisen because of their same-sex sexual abuse. I am certain that the name Jerry Sandusky will familiar to all of you. I am certain that you will recall the many cases of sexual abuse of boys by religious clergy that have come to the nation's attention in the past few years. God help these boys if they ever move to the state of Washington.

Can you imagine a wonderful little boy or adolescent coming into a therapist's office in tears and expressing he is hurt and confused because of the homosexual feelings he's experiencing because of his sexual abuse? Can you imagine that all anyone can tell him is, "I can't help you reduce or eliminate your homosexual feelings because it's against the law, and you'll just have to try your best in life." Can you imagine? I'm certain that many of you have children. What if this situation came to your family, to your little girl, to your little boy?

In my opinion, based on my years of experience, there will be no question that if you let this bill pass into law by trying to help one group of children, another group of children will be irreparably harmed if they are not allowed the kind of SOCE that helps this particular population.

I can tell you first hand that I greatly benefited from authentic Reparative Therapy. RT helped save my life. This is what authentic RT really does:

It eliminates any and all shame for having homosexual feelings no matter how they arose. It allows boys and men to experience a decrease in depression and anxiety. It allows them to grow into great self-confidence in their own genders. It raises self-esteem. It demonstrates how boys and men can get their emotional need for affirmation, approval and affection from other males; needs that they simply didn't experience in their early lives. And…this results in a spontaneous, automatic lessening or dissipation of their homosexual feelings. In short, they maximize their heterosexual potential.

Please look at www.narth.com and www.voices-of-change.org for testimonials of authentic, therapeutic change that the media, the APA and Gay therapists are trying to keep from you at all costs. This is not really about helping children, especially when you consider there has not been one ethical complaint taken before any licensing board in the past few decades about Reparative Therapy. I'm sure there have been individual incidents of wrongdoing just like there has been in all other forms of therapy. However, this is a problem that is not germane to Reparative Therapy.

Thank you for your consideration. Please stop this irresponsible bill that is trying to appear as though it saves little children. I humbly ask you to please regard your own legacy in history when making your decision regarding this bill.

Sincerely,

David H. Pickup

Home

————————

Articles compiled and edited by David H. Pickup, M.A., Licensed Marriage and Family Therapist.

References:

American Psychological Association (2009). *Report of the APA task force on appropriate therapeutic response to sexual orientation*. Retrieved from http://www.apa.org/pi/lgbt/resources/therapeutic-response.pdf

Beckstead, A. L. (2001). Cures versus choice: Agendas in sexual reorientation therapy. *Journal of Gay and Lesbian Psychotherapy, 5*(3/4), 87-115.

Bell, A. P., Weinberg, M. S., & Hammersmith, S. K. (1981). *Sexual preference: Its development in men and women*. Bloomington, IN: Indiana University Press.

Cummings, N. A., & Donohue, W. T. (2008). Eleven blunders that cripple psychotherapy in America: A remedial unblundering. New York: Taylor & Francis Group.

Dreger, A. (2012, April 11). How to ex an "ex-gay" study. [Web log post]. Retrieved fromhttp://psychologytoday.com/blog/fetishes-i-dont-get/201204/how-ex-ex-gay-study

Jones, S. L., Rosik, C. H., Williams, R. N., & Byrd, A. D. (2010). A Scientific, Conceptual, and Ethical Critique of the Report of the APA Task Force on Sexual Orientation. *The General Psychologist, 45*(2), 7-18. Retrieved from http://www.apa.org/divisions/div1/news/fall2010/Fall%202010%20TGP.pdf

NARTH Task Force on Practice Guidelines for the Treatment of Unwanted Same-Sex Attractions and Behavior (2010). Practice Guidelines for the Treatment of Unwanted Same-Sex Attractions and Behavior, *Journal of Human Sexuality, 2,* 5-65. Retrieved from http://narth.com/2011/03/practice-guidelines-for-the-treatment-of-unwanted-same-sex-attractions-and-behaviors/Shidlo, A., & Schroeder, M. (2002). Changing sexual orientation: A consumer's report. *Professional Psychology: Research and Practice, 33*(3), 249-259.

Ryan, C., Huebner, D., Diaz, R. M., & Sanchez, J. (2009). Family rejection as a predictor of negative health outcomes in white and Latino lesbian, gay, and bisexual young adults. *Pediatrics, 123*, 346-352.

Shidlo, A., & Schroeder, M. (2002). Changing sexual orientation: A consumers' report. *Professional Psychology: Research and Practice, 33*, 249-259.

Spitzer, R. L. (2003a). Can some gay men and lesbians change their sexual orientation? 200

participants reporting a change from homosexual to heterosexual orientation. *Archives of Sexual Behavior, 32*(5), 403-417.

Spitzer, R. L. (2003b). Reply: Study results should not be dismissed and justify further research on the efficacy of sexual reorientation therapy. *Archives of Sexual Behavior, 32*(5), 469-472.

Spitzer, R. L. (2012). Spitzer reassesses his 2003 study of reparative therapy of homosexuality [Letter to the editor]. *Archives of Sexual Behavior*. Advance online publication. doi: 10.1007/s10508-012-9966-y

Wakefield, J. C. (2003). Sexual reorientation therapy: Is it ever ethical? Can it ever change sexual orientation? *Archives of Sexual Behavior, 32*(5), p. 457-459.

Vonholdt, C. R. (2001). Interview with Robert L. Spitzer: Homosexuality and the reality of change. *Bulletin of the German Institute for Youth and Society*, 1, 33-36. Retrieved fromhttp://www.dijg.de/english/homosexuality-reality-of-change/

Yarhouse, M. A. (2003). HowSpitzer's study gives a voice to the disenfranchised within a minority group.*Archives of Sexual Behavior*, 32(5), 462-463.

http://www.koat.com/article/priest-accused-of-sexually-abusing-10-year-old-50-80-times/5056566

https://www.abqjournal.com/854804/legislative-candidate-named-in-lawsuit-by-parents-of-sexually-abused-boy.html

Home