CALIFORNIAN WAR ON DISSIDENT VIEWS, PART 8: "THE APA REPORT SCAM"





A way to counteract bans in other states, is to do close-reading and fact-checking on the text of the bill draft itself. This creates a non-partisan angle. Instead of focusing on the morals of the ban, you scrutinize the text itself. In this article, we will demonstrate how the totalitarian proposals are based on scams and twists of truth. Deceit undermines sensible legislation.

The draft of the bill is based on a report, called *"Therapeutic Response"* written in 2009 by a gay Task Force of the American Psychological Association, Division 44. We read,

> "*The APA task force concluded that sexual orientation change efforts can pose critical health risks to lesbian, gay, and bisexual people, including confusion, depression, etc."*

Saying that the report gives rise to conclusions about *"critical health risks"* is simply not true. Although the remark is to be found in the *conclusion* of the 2009 document, it is contradicted by the content of the *actual research* in the very same document. The findings have been twisted. The real and correct conclusions can be found on page 42, but only if you delve deeply enough into the thick document, which the activists hope you do not do.

1. How much reliable search is there?

On page 42, we read on the subject of the amount of reliable research,

> "*We conclude that there is a dearth (lack or scarcity, ed.) of scientifically sound research on the safety of Sexual Orientation Change Efforts."*

This means that the APA gay-activist team admits that there is not enough scientifically sound research available on the so-called harm issue. In our view, it is then scientifically inappropriate to publish alarmist conclusions proclaiming a certainty to the extent that the law should step in. If this report claims to be science, then we are facing what is called junk science.

2. How much harm is there?

In the bill, the activists write:

> "*The potential risks of reparative therapy are great.*"

But you are not allowed to say this, since on page 42 of the APA report, we read about the alleged *"harm"* issue,

> *"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 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".*

Here, we read: "we cannot conclude how likely it is that harm will occur".

Yet in their opening pages and in the executive summary of the 2009 APA report, they write that *"The Task Force concluded"* the existence of *"critical health risks"*, thereby implying harm.

These unsubstantiated claims constitute the core of the whole legal proposal. But this core is another example of deception and fraud. The readers are deliberately misled. There is no uncontested indication of 'harm'. Not even considering the amount of articles that the gay activists have ploughed through.

3. Does therapy lead to harm?

To make matters worse, in the proposed bill, they proceed to list 22 mental issues, all of which would be attributable to therapy, scaring the wits out of any legislator.

This alarmist list does indeed stem from the document on page 42, but *the first sentence of the paragraph has been omitted*. And this missing sentence puts everything into perspective:

> *"Although the recent studies do not provide valid causal evidence of the efficacy of SOCE or of its harm, some recent studies document that there are people who perceive that they have been harmed through SOCE."*



What are they saying? They say that recent studies do not provide valid evidence that harm is caused by therapy. The link between harm and therapy ("*causal evidence*"), is not valid, so

the document says. Biased as they are, they then proceed to spell out studies, based on some clients negative personal perceptions. But the causal relationship between the two, so they assure us, is not valid.

It only has to do with some client perception, but not all client perception, so they write. And to make matters worse, the latter who think positively about therapeutic experiences, ought to bite the dust, so we are informed in the rest of the bill.

4. Spelling out negative studies

On page 42, the activists then spell out negative stories about therapy, one of which contains 22 alleged harmful results. This array of results is then copied and pasted into the draft.

But what the activists do not paste into the draft, *is the last sentence*, which, once again, puts things into perspective:

> "*Although the nature of these studies precludes causal attributions for harm or benefit to SOCE, these studies underscore the diversity of and range in participants' perceptions and evaluations of their SOCE experiences.*"

What are they saying? They say that these studies (from which they have quoted in the proposed bill) precludes causal attributions for harm to therapy. *'Precludes'* means: to prohibit, to make impossible. So, these studies make it impossible to attribute (to link) harm to therapy.

There! They say it themselves on page 42. You are not allowed, according to page 42, to link any of the harm as mentioned in one of the named articles to the therapy involved. But at the same time, in the draft of the bill, they do it anyway. This is fraudulent and deceptive.

Therefore, the 2009 APA document provides no solid evidence for harm. In doing so, it provides no solid basis for legislation. It can only be viewed as being alarmist. The debate belongs in an open society, and nowhere else.

5. The social construct of 'LGBT community' leads to social apartheid

Homosexual feelings do not mean you are a separate kind of person, a mutant of sorts, or an alien with own hormones/genes/bodily traits. You are not different. Anybody can have homosexual feelings, given a certain psycho-sexual development, and anyone can have heterosexual feelings. No exceptions have ever been identified. A gay guy? It could have been YOU. Therefore, discrimination against people exhibiting homosexual feelings is ultimately discriminating against yourself. I repeat: it could have been YOU.

Therefore, discriminating is never justified. But you do not need the *'born that way'* narrative to achieve that stance. The paradigm that everyone has a full sexual potential (although you accomplish it to various degrees) can also lead to that same activist goal, and is acceptable and unoffensive. There is no need to be defensive about therapy. And the law does not need to step in.

At all times, an open society is called for, giving room for debate, not giving room for court-rooms, lawyers, punitive measures and ultimately prison as in Malta. A victim-less crime is no crime, it is a thought-crime. And there is no need for it. Not in a free society.

6. You do not need to call yourself 'gay' for ever more

Numerous articles demonstrate that psychotherapy can broaden horizons. The APA Task Force has omitted all articles showing that sexual fluidity exists. To make matters worse, the subject of bisexuality has not been addressed in the 2009 document. In doing so, millions of people are being deprived from their right to recognition and protection. Therefore, the document is fraudulent as a source for appropriate health care. In the reference section of this article (see below), there is an overview of articles, which report in a positive way about psychotherapy for those who willfully seek it.

To be continued.

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References:

– "McConaghy (1976) found that roughly half of the men who received one of four treatment regimens reported less intense sexual interest in men at 6 months. A majority of participants showed decreases in same-sex sexual arousal immediately following treatment."

-"McConaghy and Barr (1973) found that about half of men reported that their same-sex sexual attractions were reduced."

– "Tanner (1975) found that therapy could lessen erectile response to male stimuli".

– "Birk et al. (1971) found that 62% of men in the therapy reported decreased sexual feelings following therapy".

-“McConaghy and colleagues (1981) found that 50% of respondents reported decreased sexual feelings at 1 year.”

– “In their review, H. E. Adams and Sturgis (1977) found that 50% of the 124 participants in what they called uncontrolled group studies reported reduced sexual arousal, and 42% reported less frequent same-sex sexual behavior.

– (page 37) “In another study, H.E. Adams and Sturgis (1977) reported that 68% of 47 participants reduced their same-sex sexual arousal.”

– “McConaghy (1976) found that 50% of men had reduced the frequency of their same-sex behavior, 25% had not changed their same-sex behavior, and 25% reported no same-sex behavior at 1 year.”

– “In another study, McConaghy and Barr (1973) reported that 25% of men had reduced their same-sex sexual behavior at 1-year.”

– “Tanner (1975) reported a significant decline in same-sex behavior across treatments.”