

Article

Sexual Orientation Change Efforts, Conservative Christianity and Resistance to Sexual Justice

Rob Clucas

School of Law and Politics, University of Hull, Hull HU6 7RX, UK; r.j.clucas@hull.ac.uk; Tel.: +44-1482-466-323

Academic Editors: Christine M. Robinson and Sue Spivey

Received: 1 January 2017; Accepted: 18 May 2017; Published: 27 May 2017

Abstract: In this article, I situate the practice of sexual orientation conversion efforts (SOCE), sometimes known as conversion or reparative therapy, within historical, cultural, religious and political attitudes to non-heterosexuality. Using documentary analysis, I investigate the contemporary resistance of two socially conservative organizations: National Association for Research and Therapy of Homosexuality (NARTH) (US) and Core Issues Trust (UK), to legal and professional regulation of the sexual orientation change efforts (SOCE) which they advocate. A number of themes emerged from the various documentation. The most convincing of these themes is a claim that to provide SOCE is to respect client's autonomy rights to diminish unwanted sexual attraction, and to live in accordance with the moral principles that they value. I demonstrate that neither NARTH nor Core Issues Trust are consistent in their regard for client autonomy. I suggest that the most plausible reason for these organizations' emphasis on autonomy and other secular tropes, such as scientific proof and progressive language, is that they provide a smokescreen for conservative Christian values. If we value a world of LGBT (Lesbian, Gay, Bisexual and Trans) rights and recognition, we must counter this backlash against sexual and social justice.

Keywords: sexual orientation change efforts (SOCE); conversion therapy; homosexuality; LGBT; autonomy; science; Christianity; NARTH; Core Issues Trust; *Pickup v Brown*

1. Introduction¹

For much of the twentieth century, the increasing recognition of same-sex sexual orientation was mirrored by efforts to change a gay person to a straight one. Following the declassification of homosexuality as a mental disorder in 1973 by the American Psychiatric Association (for the latest Position Statement see (Scasta et al. 2013)), and the removal of homosexuality from the Diagnostic and Statistical Manual of Mental Disorders (American Psychiatric Association 2016), research into sexual orientation change efforts (SOCE)² diminished noticeably. Therapeutic approaches that discouraged non-heterosexuality were subjected to intensified examination (APA 2009), and multicultural competence and affirming practice became the therapeutic standard set by psychological and therapeutic regulatory bodies in the US and UK. These bodies similarly have denounced SOCE (American Psychiatric Association 2000; Association of Gay and Lesbian Psychiatrists n.d.; NHS England et al. 2015). Legal regulation has also reflected concerns about the harm done by SOCE,

¹ I would like to thank all of the colleagues who contributed to my writing and thinking in various ways, especially Tony Ward, Noel O'Sullivan, Karen Harrison, Chris Cook, Jack Drescher, and Sophie Law-Clucas. Errors and omissions are my own.

² The terms *conversion therapy* and *reparative therapy* are also used in the literature. I follow (APA 2009, p. 2) terminology of *sexual orientation change efforts* (SOCE) as a term that encompasses various psychological techniques, and medical and religious approaches directed at changing sexual orientation away from same-sex attraction, whether involving mental health professionals or otherwise.

with legislation in California and six other US jurisdictions currently prohibiting the administration of SOCE to a minor ([SB-1172 Sexual Orientation Change Efforts 2012](#); [Drescher et al. 2016](#)), and a Private Member's Bill to regulate counsellors and psychotherapists put before the UK Parliament ([Davies 2013](#); [Davies 2014](#)). Nonetheless, the practice of and advocacy for SOCE continues ([Drescher 2003](#); [Bartlett et al. 2009](#)).

Contemporaneously to professional body regulation of SOCE, socially conservative (usually Christian) organisations advocating SOCE as a practice by which to address homosexuality as an illness or unacceptable choice, have established themselves. In the US, the main organization is the National Association for Research and Therapy of Homosexuality (NARTH), billed as 'The Clinical, Research, and Medical divisions of the Alliance for Therapeutic Choice (ACTSI) ([Alliance for Therapeutic Choice, Scientific Integrity 2015c](#)). In the UK, the corresponding organization is the Core Issues Trust ([Core Issues Trust 2015c](#)). In addition to political campaigning and publishing, both have been primary initiators of legal action: NARTH and related pro-SOCE clinicians such as Nicolosi were Plaintiff-Appellants in the case *Pickup v Brown* ([Pickup v Brown \(2014\)](#)) which challenged the Californian Senate Bill's prohibition on mental health providers undertaking SOCE with a person under the age of 18; Core Issues Trust claimed that their human right to freedom of expression had been infringed by the decision by Transport for London not to allow an 'Ex-Gay' advertisement to be displayed on its buses the decision by Transport for London not to allow an 'Ex-Gay' advertisement to be displayed on its buses ([Core Issues Trust v TfL \[2013\]](#)).

Participation in conversion therapy is significantly increased in cases of anticipated or actual negative family reactions, high levels of religious fundamentalism and identifying religion (in this study, mostly Christianity) or spirituality as very important in their lives ([Maccio 2010](#)). There are serious concerns about the harm caused by conversion therapy ([Panozzo 2013](#)), and best affirmative therapeutic practice recommends increased client support, not an attempt to 'cure' the client. Nonetheless, advocates of reparative therapy views couch attempts at reducing same-sex sexual attraction as important for client autonomy, and claim that this is a means of respecting diversity in the form of religious affiliation and values ([Ginicola and Smith 2011](#)).

Historically, religious and societal norms (often effectively the same thing) have rejected same-sex sexual activity and attraction (though according to Boswell ([Boswell 1980](#)), this intolerance did not arise until the middle ages). Although cultural and legal norms have shifted significantly since the middle of the twentieth century, this shift is not universal or complete. In the UK, within a generally progressive legislative framework, the Equality Act 2010 permits significant exceptions for religious organisations ([Clucas 2012](#)). In the US, approximately 20 states are proposing anti-LGBTQ legislation. One example is Arizona SB 1062 ([Yarbrough et al. 2014](#)), a bill limiting state action on the exercise of freedom of religion, which, if not vetoed by the Governor or Arizona, would have allowed businesses to deny services to LGB customers on the grounds of religious belief ([Shoichet and Abdullah 2014](#); [Good and Vega 2014](#); [The Association of LGBTQ Psychiatrists \(AGLP\) et al. 2016](#)). There has been a change in political climate in the US post the presidential elections that does not bode well for LGBT people, as Ken Blackwell, the domestic policy advisor for incoming President Trump at the time of writing, opines that homosexuality is a sin, and gay people, like arsonists, can be reformed ([Nutt 2016](#)). Prejudice continues to impact on the lives of non-heterosexual people in the form of discrimination, minority or marginalization stress ([Meyer 2003](#)), and microaggressions ([Sue 2010](#); [Shelton and Delgado-Romero 2011](#)). Conservative Christian organisations in the US and UK campaign and take legal action against what they view as restrictions on their right to discriminate on religious grounds ([Pickup v Brown \(2014\)](#); [Core Issues Trust v TfL \[2013\]](#)).

In this study, using documentary analysis, I investigate the contemporary resistance of NARTH and Core Issues Trust to increasing regulation, professional and legal, of the SOCE which they advocate. Parallel to this is their opposition to an environment in which social and sexual justice demands that same-sex attraction be treated as equal to different-sex attraction, and in which sexual minority rights are human rights. I analyse the means they employ to further their claims and discredit those of the

major therapy professional bodies and providers, and the ways in which they assume the language of rights and diversity. This is important because professional and legal regulation, and the concept of (human) rights, is intended to protect vulnerable persons and groups—here sexual minorities—in an environment that historically (and currently still) favours a different norm, that is heterosexuality. It is vital to recognise and understand these conservative claims, both to review society's current conception of social justice (are conservative voices/needs being unjustly excluded?) and to be alert to any attempt to subvert social justice by the misapplication of rights and diversity arguments (do conservative (Christian) groups have the right to discriminate against sexual and other minorities on the basis of religion?)

In this article, I tend to refer to *same-sex sexual attraction* rather than *homosexuality* or *gay people*, because the latter term obscures the existence of bisexual people. I also use the terms *LGB*, *LGB(T)*, and *LGB(T) community*. The general focus of this piece is on sexuality rather than gender, though SOCE is inescapably bound up with gender normativities (what constitutes gender appropriate behavior and roles) (Robinson and Spivey 2007) and denying the validity of trans gender identities (APA 2009). The issue of trans people and conversion therapy is important, and deserves discussion in its own right. I follow the American Psychological Association's clear distinction between sexual behavior (who or what one has sex with), sexual orientation or attraction (who one is attracted to: 'an individual's patterns of sexual, romantic, and affectional arousal and desire' (APA 2009, p. 30), and sexual orientation identity (how one identifies in relation to sexual orientation in terms of membership, affiliation and self-labelling):

Sexual orientation identity refers to acknowledgment and internalization of sexual orientation and reflects self-exploration, self-awareness, self-recognition, group membership and affiliation, culture, and self-stigma. Sexual orientation identity involves private and public ways of self-identifying and is a key element in determining relational and interpersonal decisions, as it creates a foundation for the formation of community, social support, role models, friendship, and partnering (references omitted) (APA 2009, p. 30).

It is important to explain why I refer to NARTH and Core Issues Trust as 'conservative Christian organisations'. NARTH in particular, as a division of a body named the 'Alliance for Therapeutic Choice and Scientific Integrity' suggests that its emphasis is on science rather than God, though Core Issues Trust is less circumspect, for example in its homepage banner from 2015 'God's heart in sexual and relational brokenness' (Core Issues Trust 2015a). The latter describes itself as 'a non-profit Christian ministry supporting men and women with homosexual issues who voluntarily seek change in sexual preference and expression' (Core Issues Trust 2016a); it shares interests with other conservative Christian organisations such as Anglican Mainstream (despite its name, an organization on the conservative side of Anglicanism) and Christian Concern (Concern 2014), and claims affiliation with the Evangelical Alliance (Core Issues Trust 2015a). Both organisations are socially conservative, in advocating a world of traditional gender roles and sexual norms. Both, I argue, are also deeply conservatively Christian, even when representing themselves otherwise: this will become evident in my analysis, below.

In this article, I explain the background to this study and my methodology, before proceeding to explanation and interpretation of the themes that emerged in the material studied. In the discussion section, I bring together analysis of the themes studied, and situate this in the context of a backlash against social and sexual justice. The final section makes explicit my main conclusions.

2. Background

Sexual identity *qua* identity is a relatively recent and historically specific phenomenon (Foucault 1998; McIntosh 1996; Seidman 2010): before sexual identity, sex was simply something that a person did, rather than who they were. The new idea of sexual identity was primarily focused

on identifying homosexual people as deviant from the norm; the norm itself did not need to be named, as they were simply 'normal' (Jackson 1999).

Seidman's analysis is that the meaning of heterosexuality as an identity, rather than a reproductive drive, changed in response to a gender crisis in the early twentieth century, as women accessed higher education, worked outside the home, and participated in political life—and chose not to marry, or to divorce, or not to have children in marriage (Seidman 2010, pp. 47–48). In order to reaffirm gender difference and the normative model of clearly defined and opposing gender roles, the naturalness and correctness of heterosexuality was underlined:

... if heterosexuality was natural and essential for survival and a social stable order, men and women should continue to occupy different roles. Asserting a clear heterosexual identity became a way to flag a normal gender identity. Heterosexuality came to be associated with a person's core self-identity and its meaning was centred on being sexually attracted to the opposite sex (Seidman 2010, p. 48).

This emphasis on sexual identity resulted in the creation of a culture of homophobia:

As heterosexuality became an important way to demonstrate a normal sexual and gender identity, homosexuality represented a deviant status. Not only was sexual attraction to a person of the same sex stigmatized, but gender deviance was disapproved of as a sign of homosexuality. The result was that men and women feared exhibiting any gender traits that deviated from norms of masculine men and feminine women. A sexual system that aggressively enforced heterosexuality as a norm aimed to shore up a fragile gender order marriage (Seidman 2010, pp. 48–49).

Society in the US and UK became concerned to reinforce and defend this gender binary, including by the means of sexual orientation change efforts, referred to variously as conversion therapy or reparative therapy. A contemporary illustration of this can be found in Core Issues Trust's reference to a concern about the church's gendering same-sex attracted individuals differently to those who are different-sex attracted (Core Issues Trust 2016a).

Early views of homosexuality tended to split into one of three camps: (i) same-sex sexual orientation was criminal; (ii) same-sex sexual orientation was a sin; (iii) same-sex sexual orientation was a sign of mental illness, disorder, or abnormality (Katz 1976, cited in APA 2009, p. 21). Under this third head, one view was that homosexuality was caused by some kind of psychological immaturity, developmental arrest, or fixation, and was viewed as a phase on the way to proper adult heterosexuality (see (Drescher 2002a; Newbigin 2013)). This was the historical Freudian/psychoanalytic view, since repudiated by the relevant professional associations (British Psychoanalytic Council 2001; American Psychoanalytic Association 2012). The other opinion viewed same-sex sexual attraction as a pathological departure from 'a biologically predetermined, heterosexual development' (Drescher 2002a, p. 59). Humans ought to be heterosexual: divergence from this was abnormal. This 'abnormality' was ascribed to a variety of possible causes: pre-natal genetic defects or exposure to anomalous hormone levels in utero; or to post-natal environmental problems such as excessive mothering, inadequate fathering, unwarranted masturbation, seduction, or a decadent lifestyle or social contagion (Drescher 2001; Drescher 2002a, cited in APA 2009, p. 21; Drescher 2016a). These three camps, though different, all provided support for SOCE: as rehabilitation for or prevention of criminal acts; to heal the sinner; and to mend or induce psychological growth in the defective or immature.

From the 1950s in the US and the UK, conversion therapy has been a psychological practice (see (Arthur et al. 2014) for an account of the origins of reparative therapy and the ex-gay movement). Treatments administered included behavioural aversion therapy with electric shocks (the most frequent practice in the UK, though conversion therapy itself was never mainstream (King et al. 2004)), aversion therapy with apomorphine-induced nausea, psychoanalysis, oestrogen treatment (intended to reduce libido), religious counselling, electroconvulsive therapy, dialogue about the wickedness

of homosexuality, treatment to ameliorate a supposed phobia of different sex partners, hypnosis, psychodrama, and abreaction (Smith et al. 2004); inducing vomiting or paralysis, self-administered pain, covert sensitization, shame aversion, systematic desensitization, orgasmic reconditioning, and satiation therapy, education to improve dating skills, assertiveness and affection training, cognitive therapy to alter desires, thoughts, and hypnosis intended to alter sexual arousal, behavior, and orientation (APA 2009, p. 22).

King et al. detail the experience of professionals who administered such ‘therapies’ at a time when homosexuality was criminalized and considered abnormal psychologically:

Most (mental health professionals) doubted the treatment’s efficacy, however, and came to question whether they were acting in patients’ best interests. They began to think that treatment was underpinning questionable social values and that patients might say anything to convince them that it had worked to avoid yet more treatment or further legal repercussions (for example when receiving treatment as an alternative to prison) (King et al. 2004, p. 2).

The authors’ noted that their data ‘show how assumptions about public morality and professional authority can lead to the medicalisation of human differences and the infringement of human rights’ (King et al. 2004, p. 3).

As homosexuality was variously decriminalized in the UK and US ([Sexual Offences Act 1967](#); [Lawrence v Texas \(2003\)](#)³), declassified as a mental disorder by the American Psychiatric Association in 1973 (for the latest Position Statement see ([Scasta et al. 2013](#))), and removed from the Diagnostic and Statistical Manual of Mental Disorders ([American Psychiatric Association 2016](#)) (followed by the World Health Organization’s removal of homosexuality itself from the International Classification of Diseases in 1992), research into sexual orientation change efforts (SOCE) diminished noticeably. Therapeutic approaches that were not affirming of non-heterosexuality were subjected to intensified examination (APA 2009, p. 24), and multicultural competence and affirming practice became the therapeutic standard set by psychological and therapeutic regulatory bodies in the US and UK.

Professional psychological and medical bodies have denounced SOCE ([American Psychiatric Association 2000](#); [Association of Gay and Lesbian Psychiatrists n.d.](#); [NHS England et al. 2015](#); [World Medical Association 2013](#)). Legal regulation has also reflected concerns about the harm done by SOCE, with legislation in California and six other US jurisdictions currently prohibiting the administration of SOCE to a minor ([Drescher et al. 2016](#)), and a Private Member’s Bill to regulate counsellors and psychotherapists put before the UK Parliament ([Davies 2013](#); [Davies 2014](#)). During the writing of this article, Malta became the first European Member State to criminalise conversion therapy ([Pace 2016](#)). Nonetheless, the practice of and advocacy for SOCE continues ([Drescher 2003](#), pp. 431–32; [Bartlett et al. 2009](#)).

NARTH has been a notable proponent of SOCE since its establishment in 1992. This body has been the specific focus of academic attention during this time, notably by Arthur et al. ([Arthur et al. 2014](#)), which examines the framing techniques used by practitioners of reparative therapy; Waidzunas ([Waidzunas 2015](#)), whose book is concerned with the interplay between SOCE proponents and the science of sexual reorientation therapies, discussed further in my methodology section below and two studies by Robinson and Spivey ([Robinson and Spivey \(2007; 2015\)](#)).

Robinson and Spivey’s 2007 article ([Robinson and Spivey 2007](#)) scrutinises the masculinity politics of the ex-gay movement (equivalent to my understanding of SOCE proponents), demonstrating that the movement’s focus on eliminating homosexuality is predicated on an anti-feminist ideology. Following Connell ([Connell 1987](#)), they view religious discourse as a means of constituting hegemonic masculinity, as well as a means of its social control. The scientific and religious discourses of gender employed in

³ Although sodomy laws were not declared unconstitutional in the US until 2003 ([Lawrence v Texas \(2003\)](#)), most states had dispensed with these provisions earlier.

ex-gay narratives 'create a "sanctified science" that both condemns homosexuality as a sin and frames it as a gender identity disorder' (Robinson and Spivey 2007, pp. 655–56). The remedy for this 'disorder' is therapy that helps to restore 'proper' masculine attributes and conduct, including 'leadership', i.e., exercising authority over, women, who should be submissive. This agenda would be alarming enough if it were restricted to those seeking SOCE. However, the authors point out the political power had by this movement during the George W. Bush administration in the US, and that the discourses employed by them seek to challenge progressive social trends and achievements. Moreover, this movement aims to influence global culture by the establishment of a network of Christian institutions.

The authors return to the theme of the global impact of the ex-gay or SOCE movement in their 2015 article (Robinson and Spivey 2015), which focusses on the implications of ex-gay discourses of female homosexuality in a global context. Specifically, the authors explain the way in which the movement's construction of female non-heterosexuality has impacted on policy, non-heterosexual women's social situation, and LGBT civil rights generally (Robinson and Spivey 2015, p. 883). This ex-gay discourse has been exported from the US, sometimes at the invitation of other jurisdictions, and has become 'the dominant framework of the movement world-wide' (Robinson and Spivey 2015, pp. 885–86). Ironically, as Robinson and Spivey observe, a movement with its roots in Western, especially American, Christianity, coupled with discredited Western psychological theories of therapies, seems to be supporting a backlash against the 'Western disease' of homosexuality that is un-African, un-Asian, etc. (Robinson and Spivey 2015, p. 899).

What the authors found to be most significant result from their study is that, in using a politics of gender and sexuality that is essential, in a way that mirrors essentialist discourses of masculinity, the social position of non-heterosexual women has been negatively impacted in ways that are different to the impacts on non-heterosexual men, and in addition, those essentialist politics of gender have assailed LGBT rights in general (Robinson and Spivey 2015, pp. 896–97).

Robinson and Spivey's two studies, in conjunction with the work of writers such as Kaoma (Kaoma 2014), make clear the global impact of conservative Western pro-SOCE ideologies. The deleterious impact of conservative Christian ideologies on LGBT rights in general, in the West and elsewhere, deserves greater attention than it has received so far.

If we accept that our realities—social, political, professional, legal—are shaped by values, and that power and privilege habitually prevail (Mertens 2007), it is imperative to recognise which voices, groups and norms have power. This is needed both to understand how our current, historically and culturally situated understandings of the world (Gergen 1985) are constituted, and to recognise the current and potential shifts in reality brought about by the 'active, cooperative enterprise of persons in relationship' (Gergen 1985), in the world as a whole, and not only the West.

3. Methodology and Method

My interests are in social justice, and in particular the promotion and protection of rights for sexual and gender minorities (though here, I focus mainly on sexual minorities): what I term 'sexual justice.' I take the position that human beings have rights to self-determination and the things that make this possible, including psychological and physical health, by virtue of being human—or more accurately, by virtue of being agents (persons with the capacity and disposition for control, choice, knowledge and reflective intention), and not for any other reason such as a particular sexual identity or orientation (Gewirth 1978; Beyleveld 1992). Elsewhere, I have described this as a foundationalist perspective (Clucas 2012, pp. 937–38). Accordingly, I reject the idea that heterosexuality is normatively superior to non-heterosexuality. This position influences my methodology by eliminating any religious or moral ontological qualifications to my concept of rights holder; it also sensitizes me to instances of such qualification.

In this article, I take a social constructionist view of reality (Berger and Luckmann 1991; Gergen 1985; Mertens 2007) informed by theories of heteronormativity (Jackson 1999; Seidman 2010; Weeks 2003). If social order is an ongoing human production (Berger and Luckmann 1991, pp. 69–70), I contend

it is crucial to discern what shifts in reality—which ways of shoring up normative heterosexuality against current threats of equal rights and increasing social regard for non-heterosexuals—conservative Christian groups are trying to bring about. For this reason, I am focusing my study on conservative Christian organisations, specifically NARTH and Core Issues Trust, and their promotion of SOCE.

I follow Adams and Brownsword ([Adams and Brownsword 2006](#)) in taking a functional view of law that sees social, religious, professional/organizational and formal, traditionally legal (statue, bills, court cases) instances of regulation as different facets of law understood as ‘the enterprise of subjecting human conduct to the governance of rules’ ([Fuller 1969](#)). Consequently, I do not regard the distinction between legal and professional regulation of SOCE to be significant from a conceptual point of view for the purposes of this study. My analysis of the themes arising from legal and other material is separated in the results discussion below due to the impact of pre-existing legal categories on the claims made.

A lengthy and fairly sympathetic study of NARTH has been published by Waidzunas ([Waidzunas 2015](#)). One of the main distinctions between my approach and his is that I subject the claims made by NARTH (and Core Issues Trust) to critical analysis, whereas Waidzunas appears to uncritically accept their claims to scientific knowledge ([Waidzunas 2015](#), pp. 173–76), though this is qualified in his methodological appendix ([Waidzunas 2015](#), pp. 259–60)). In this process of evaluation, I share Ronald Dworkin’s view ([Dworkin 1996](#)) that we can evaluate the reasons for having a particular viewpoint, and accept or discard viewpoints depending on their defensibility. Specifically, in Dworkin’s theory of law, where one or more legal principles fit the established legal narrative, the judge must choose that which casts the community’s political morality in the best moral light ([Dworkin 1998](#)). As I view institutional, professional and state legal regulation as law, functionally understood, my position is that decision-makers engaged in this enterprise ought to choose the interpretation of regulatory material that is the morally best option that fits into the regulatory scheme: specifically, an option that does not discriminate on the grounds of sexual orientation or gender (see above).

The method underpinning my study is documentary analysis, examining texts such as legal cases; websites; documents and booklets published or written by key personnel in the organisations studied, and linked from their websites. I investigate the contemporary resistance of NARTH and Core Issues Trust to increasing regulation, professional and legal, of the SOCE which they advocate. Parallel to this is their opposition to an environment in which social and sexual justice demands that same-sex attraction be treated as equal to different-sex attraction, and in which sexual minority rights are human rights. My research questions are: how do these organisations further their claims and attempt to discredit those of the regulators, both major therapy professional bodies and providers and legal bodies? (How) do these organisations use the language of rights and diversity to further their aims? My aim in using this method was to produce a rich description of the phenomenon of resistance to sexual equality norms in the context of legal and professional regulation of SOCE, to enrich our understanding of this phenomenon ([Bowen 2009](#)).

This study is important because professional and legal regulation, and rights, are intended to protect vulnerable persons and groups—here sexual minorities—in an environment that historically (and currently still) favours a different norm, which is heterosexuality. It is vital to recognise and understand these conservative claims, both to review society’s current conception of social justice (are conservative voices/needs being unjustly excluded?) and to be alert to any attempt to subvert social (sexual) justice by the misapplication of rights and diversity arguments (do conservative Christian groups have the right to discriminate against sexual and other minorities on the basis of religion?)

My study is centred on cases consisting of instances of response to SOCE regulation. The data of my study were documents issued by conservative (Christian) organisations that in some way responded to the legal and/or professional regulation of sexual orientation change efforts. My theoretical cases are the conservative (Christian) responses to SOCE regulation; my empirical cases are the materials produced by these organisations in response to SOCE regulation. Analysis of these

cases answers my research questions by showing the arguments and tactics employed by conservative (Christian) organisations to further the acceptance of SOCE and resist social (sexual) justice.

I have limited my investigation to two organisations in particular: NARTH (the National Association for Research and Therapy of Homosexuality), and the Core Issues Trust, a UK organization. NARTH, the name of the original organisation, persists as one of three divisions of the Alliance for Therapeutic Choice and Scientific Integrity: the others are Public Education and Client Rights, and the Ethics, Family and Faith divisions ([Alliance for Therapeutic Choice and Scientific Integrity 2016](#)). NARTH itself is again subdivided into Clinical, Medical and Research divisions of the NARTH Institute. For this reason, I treat references to NARTH, the Alliance, or another of its divisions as equivalent, i.e., a reference to the same entity. Since 1992, NARTH/the Alliance have been a focus for viewpoints that hold that homosexuality is a disorder, and that SOCE are effective and beneficial to clients.

In the UK, Core Issues Trust is a Christian organisation that focuses primarily on homosexuality. It is headed by Michael Davidson, who identifies as ex-gay. The Trust holds itself out to offer help to men and women experiencing unwanted same-sex attraction, which it views as a disorder. It views sexuality as fluid, the brain as malleable, and disagrees that people are 'born gay'. As well as the issue of homosexuality and the possibility of change, the Trust also seems to direct at least some of its energy at current debates on homosexuality and celibacy in the Church of England and Anglican Communion ([Core Issues Trust 2016a](#)). This could be conceived as another arena in which they are responding to the regulation of sexuality.

I have chosen these two organizations for their prominence amongst conservative voices in their respective jurisdictions; their degree of organization; their publication of a variety of material (websites, books and articles that support their views, and their participation in legal cases (lawsuits) against measures restricting some aspect of SOCE. There is mutual recognition and approval of each other's goals, as can be seen in various documents ([Alliance for Therapeutic Choice, Scientific Integrity 2015b](#); [Core Issues Trust 2015a](#); [Core Issues Trust et al. 2015](#)). These organisations are also significant because of their engagement with reasoned argument and claims to scientific integrity, rather than straightforward reliance on interpretations of biblical texts. They have, at least at face value, a rational approach that can engage with secular and scientific debates on sexuality that is totally absent from organisations such as the Westboro Baptist Church ([Westboro Baptist Church 2016](#)).

The US and the UK are not identical in their attitudes to religion and sexual justice. Nonetheless, I believe there are sufficient parallels—in terms of language, culture, professional regulation, and legal culture, not to mention equivalences in the tactics of NARTH and Core Issues Trust, to make it worthwhile to study both jurisdictions in one enquiry.

Because I am interested in responses to legal and professional regulation, I focus my attention on material dating from 2009 onwards (for discussion of pre-2007 material, see ([Robinson and Spivey 2007](#))). This is because of the timing of a pivotal report by the American Psychological Association Task Force, *Appropriate Therapeutic Responses to Sexual Orientation* ([APA 2009](#)). The report undertook a widespread review of the literature on psychotherapy and the psychology of sexual orientation from 1960 to 2007, coming to conclusions on the (lack of evidence for) efficacy and (lack of evidence for) safety of SOCE; made recommendations on future directions, practice and research for the American Psychological Association (APA); and in doing so, informed the APA's response to groups who had asked it to support their promotion of SOCE. Although professional bodies had renounced SOCE before this point ([American Psychoanalytic Association 2000](#); [APA 2009](#), p. 24), the depth and quality of the APA's Report was a watershed in the professional regulation of SOCE: not only was a professional body rejecting SOCE, it was doing so on the explicit basis of a thorough review of the scientific evidence. The impact of this report can be seen in the themes arising from my analysis of NARTH's website, as well as in the self-positioning of professional therapists examined by Arthur et al. ([Arthur et al. 2014](#)) There is no equivalent report in the UK; however the Core Issues Trust shares many of the themes employed by NARTH (see my discussion below).

In selecting the data for analysis, I deliberately narrowed my focus on organisations and timeframe, for the reasons detailed above. It was also necessary to restrict the quantity of data analysed for reasons of available time. I concentrated on what might be termed the central case of each organization, by focusing on the following: the legal cases instigated by Core Issues Trust and NARTH respectively ([Core Issues Trust v Tfl \[2013\]](#); [R v Tfl \[2014\]](#); [Pickup v Brown \(2014\)](#); [Pickup v Brown 2012](#)); key interviews and opinion pieces about these cases; press statements or similar issued by the organisations; the organisations' home webpages and the first level of links from these; articles and booklets promoting SOCE written by members of or people associated with the organisations that are readily available in the public domain (i.e., available without a subscription). The home webpage material I used was that which was captured during the timeframe of my study, and is mostly from 2016. Accordingly, this research is not an exhaustive study of all possible material produced by NARTH and Core Issues Trust between 2009 and 2016, though my investigation reached saturation in that I ceased to add new categories of analysis, and my existing categories seemed fully developed in that no new information was being added ([Bazeley 2013](#), p. 50). This cumulative data provides a cross-section of official policy; priorities considered significant enough for expensive and uncertain litigation; other responses to legal and professional regulation, and material directed at the public, including potential advocates for and consumers of SOCE. In this way, it provides material for 'observing, describing, interpreting and analyzing the way that [these conservative (Christian) organisations] experience, act on, or think about themselves and the world around them' ([Bazeley 2013](#), p. 4).

Electronic data was stored in NVivo 10 and coded into nodes. Some themes such as autonomy/self-determination, and client rights, were theoretically derived. Other themes emerged from the data. My notes data obtained only in hardy-copy form (e.g., printed booklets) were made electronically and stored in NVivo also, to facilitate coding and analysis.

4. Results: Explanation and Discussion

A number of themes were evident in the material analysed. Because of their quantity, I will explain the significant ideas arising, giving representative but not exhaustive examples, and discuss that theme before moving on to the next. I describe and discuss topics arising from websites and other material separately to those resulting from the legal cases, as the themes in the legal cases are necessarily shaped by legal concepts and discourse. The themes from websites and supplementary materials are the organisations' relationship to God or religion; characteristics of the organisations; attacks on opposing viewpoints; claims to superior scientific knowledge and integrity; respecting self-determination; justice; rights claims, and respecting diversity. The themes arising from the legal cases are: freedom of expression; the rights of ex-gay people; freedom of speech, and parental rights.

4.1. *The Organisations' Relationship to God or Religion*

The NARTH home page itself is devoid of any references to religion or faith, though, as part of the Alliance for Therapeutic Choice and Scientific Integrity, it is organisationally proximate to faith. The two other divisions of ATCSI are that of Public Education and Client Rights, and the Ethics, Family and Faith divisions ([Alliance for Therapeutic Choice and Scientific Integrity 2016](#)). NARTH's conservative Christian allegiances are discussed further in [Robinson and Spivey \(2007\)](#).

NARTH is described by Joseph Nicolosi as 'the only secular group in the U.S. which protects the rights of therapists to counsel clients with unwanted homosexuality' ([Nicolosi 2016a](#)). Nicolosi is one of the founding organisers of NARTH ([Nicolosi 2016a](#)), a licensed clinical psychologist whose practice is concerned with 'counseling clients, who experience conflict between unwanted same-sex attractions and their values' ([Pickup v Brown \(2012\)](#)).

Although NARTH's home page is free from religious references, a number of the hyperlinks found there are to articles published in an explicitly religious publications, for example, a piece on 'LGBTQ activists and other sexual revolutionaries' as those culpable for the spread of HIV ([O'Leary 2015](#)).

Another is a personal reflection on Bob Spitzer, a significant writer in the debate over whether sexual orientation change is possible, now deceased, by Linda Ames Nicolosi (Nicolosi 2016b), former publications director for NARTH and co-author (with Joseph and Linda Nicolosi) of a book aimed at parents on preventing homosexuality in children (Nicolosi et al. 2000). Both of the articles mentioned are published in a periodical named *Crisis Magazine: A Voice for the Faithful Catholic Laity*. And although references to God or faith are absent in both pieces, the values expressed in them (anti-LGBT activism; pro-SOCE) are consistent with conservative Christianity.

There are also recurring tropes that are implicitly religious, such as service: 'let us know how we can serve you' (Alliance for Therapeutic Choice and Scientific Integrity 2016).

Core Issues Trust is avowedly Christian (Core Issues Trust 2016a). The earlier strapline for their website and documentation logo was 'God's heart in sexual and relational brokenness' (Core Issues Trust and Davidson 2014b), which made this very explicit. This has since changed to 'Challenging Gender Confusion; upholding science and conscience' (Core Issues Trust 2016i).

The 'gender confusion' of this slogan seems to refer to two matters. One is trans identity, which violates the idea of two God-given genders in the creation stories of Genesis Chapters One and Two. The second is a sense that '[H]omosexual 'orientation' has been reified in our teachings⁴ so that same-sex orientated men and women are gendered differently from those who do not experience such feelings' (Core Issues Trust 2016a). This would again be a violation of a Biblically ordained and fixed gender binary of male and female. As Robinson and Spivey put it,

[SOCE] etiologies of homosexuality presume a natural link between sex (male), normative gender identity (masculine), and its progeny, heterosexual desire. [SOCE] discourses identify sex differences as the most basic, defining feature of humanity and conflate biological sex with gender identity, which scripts one's relationships and designates one's place in society. Ex-gay theology asserts that sex differences are divinely created and ordained, justifying distinct social and sexual scripts in the family and society (Robinson and Spivey 2007, p. 658).

It is interesting to note how Core Issues co-opts the language of social constructionism (reified, gendered) to make their point.

NARTH and Core Issues situate themselves somewhat differently to the broadly dichotomous client-centered (professional) and God-centered (religious) framing strategies noted in Arthur et al.'s study of reparative therapy websites (Arthur et al. 2014). NARTH's framing is client-centered and science-referencing (see below), and avoids explicitly God-centred claims to authority (though as I have noted, some of the links it provides from its homepage are implicitly religious). Core Issues, in contrast, has a strongly God-centred tone which is supplemented with references to science. NARTH is more consistent in its 'professional therapist' framing. Core Issues seems to have evolved from a purely religiously-framed approach to one which incorporates a professional, science-referencing approach; yet there is a sense that the professional aspects are bolted on to the religious foundations of framing.

God-Given Gender and Complementarity

Gender essentialism (the 'God-giveness' of gender) is assumed throughout the materials of both organisations, but generally not foregrounded (with the exception of 'About Core Issues Trust' (Core Issues Trust 2016a)). This essentialism is a 'cosmically significant' ontological difference between males and females (Cornwall 2013, p. 44). The point of most consequence for my purposes here is that the Genesis accounts of the creation of humankind are understood by conservative Christians as divinely ordained 'fact' (Thatcher 2012, p. 43).

⁴ In this context, Western Christianity in general, and the Church of England in particular.

The two Genesis accounts differ slightly but in a way that has been interpreted to have significance. In Genesis One, humankind is made ‘in the image of God . . . male and female’ (verse 27). In Genesis Two, the female is created after the male, and from the male’s body. This is usually taken to mean a subordination of the female to the male, frequently presented as ‘different-but-equal’ (Meaningful Life Center 2014), or the oxymoronic ‘subordination-within-equality’ (House of Bishops 1991, para. 2.5) (for further discussion of gender and the related idea of complementarity, see (Cornwall 2013, chp. 3; Thatcher 2012, chp. 4). This second Genesis account resonates with feminist conceptions of heteronormativity, in which gender is structured in binary fashion, male and female (where male is dominant), and which, due to assumptions of heterosexuality, homosexuality is subordinated and marginalised as a transgressor against the structured gender order (Weeks 2003, p. 37).

4.2. Characteristics of the Organisations

4.2.1. Authority of the Organisation

A number of practices on both organisations’ websites emphasise the authority of the person or organisation, implying that their views are worth listening to.

Core Issues Trust has made numerous submissions to official bodies with national and international standing: to the Organisation for Security and Cooperation in Europe (Core Issues Trust 2014b); to the Fundamental Rights Agency (Core Issues Trust 2014e); to the UN’s Committee Against Torture (Core Issues Trust 2014h); concerning UK proposed legislation (Core Issues Trust 2014g); in response to the EU’s Lunacek briefing (Core Issues Trust 2014d). The Alliance responded to the Academy of Science of South Africa’s Diversity in Human Sexuality Report and to the US President’s appeal against SOCE for minors (NARTH Institute 2016). The formal character of these responses, the assumption that there is no question that they have a right to intervene, the number of submissions, the way in which website visitors are informed about this activism on the part of the organisations, all these things emphasise their prominence and the weightiness of their opinions.

The organisations also engage in activities which imply professional respectability, an excellent knowledge-base, and general competence: NARTH provides training (NARTH Institute 2016); Core Issues provides various resources (Core Issues Trust 2016f); it has people available to speak in churches and at faith meetings (Core Issues Trust 2013), and has published a box set of booklets under the title ‘Leaving Homosexuality: The Right to Try: Ethics, Evidence and Practice, comprising a pamphlet *Protecting the Rights to Receive and Provide Professional Care for Unwanted SSA* (International Federation for Therapeutic Choice 2014); the booklets *Out of Harm’s Way: Working Ethically with Same-Sex Attracted Person: Questions of harm, evidence and practice* (O’Callaghan and Davidson 2013); *The Right to Decide: Seeking justice for choices around unwanted same-sex attractions* (Davidson 2012b); *What the Research Does and Does Not Say: Is Therapeutic Support for Unwanted Same-Sex Attractions Harmful?* (Sutton 2014), and *Beyond Critique: The Misuse of Science by UL Professional Mental Health Bodies (2nd (expanded edition): When Ideology Replaces Science)* (O’Callaghan and May 2013).

The esteem of NARTH’s officials and their international authority is emphasised: ‘Alliance President Speaks at UK Conference—International Report’ (NARTH Institute 2016).

Core Issues writes with apparent authority on matters requiring legal expertise:

Clearly whatever the committee’s response to the delegation’s reply on the 13th of November in the weeks that follow, and however the committee ultimately reports on the matter, their findings are not legally binding on the state. I think the CAT body may well exceed its mandate if it conveys the impression that committee recommendations on the matter of so called ‘conversion therapy’ are to be read as UN law, thereby sanctioning the persecution of therapists practicing SOCE ethically. To convey this idea will lead to the further identification, and expulsion from professional and licensing bodies—based on ideological and spurious ethical charges—of innocent professional therapists and counsellors. It is vital that the public in whichever country they reside, understand this,

and that they are vigilant as to the dangers of hate speech that might be extended towards these professionals, as a result of any poorly investigated demand by LGBT activists at a politicised committee which has no legislative authority (Core Issues Trust 2014h).

This extract shows a straw man argument, hypothesising (implausibly) about the UN Committee Against Torture's future behaviour, and the legality of this hypothetical behaviour.⁵ (The High Commissioner recently *recommended* that States address violence by, inter alia, banning 'conversion therapy' (United Nations High Commissioner for Human Rights 2015, para. 78 (g)), noting that:

There is mounting concern about so-called "conversion therapies" intended to "cure" homosexual attraction. Such therapies have been found to be unethical, unscientific and ineffective and, in some instances, tantamount to torture—leading to successful legal challenges and bans in several countries (United Nations High Commissioner for Human Rights 2015, para. 52).

The Core Issues extract also suggests the Committee's behaviour might give the impression that 'persecution' or 'hate speech' by national governments against 'ethical' SOCE practitioners was legal. Here, the Trust is engaged in canny borrowing of progressive language to underline its status as a marginalised group in need of protection.

4.2.2. Integrity of the Organisation

There are frequent claims, explicit and implicit, that the organisations regard themselves as upright and honourable—usually in contrast to those proffering a pro-LGBT view. The Alliance's strapline on their website is '*Principled* advocates for persons experiencing unwanted homosexual attractions' (my emphasis) (Alliance for Therapeutic Choice and Scientific Integrity 2016). Core Issues also professes integrity in their logo strapline: '*Challenging gender confusion; upholding science and conscience*' (my emphasis) (Core Issues Trust 2016f).

NARTH implies that their use of research is reliable, in a murky environment: '[c]urrent discussions of homosexual sexual orientation change are unavoidably occurring within a sociopolitical climate that makes nonpartisan scientific inquiry of this subject very difficult' (NARTH Institute 2012). This is probably a strategy for neutralising NARTH's own marginalization in the mental health and secular communities, which disavow SOCE (Arthur et al. 2014). Similarly, the therapy endorsed by the Alliance is '*scientifically informed* therapy for unwanted same-sex attractions and behavior' (my emphasis) (Alliance for Therapeutic Choice, Scientific Integrity 2015a). The question of scientific integrity is discussed further below.

With regard to their claim of integrity, it may be instructive to consider Core Issues' dispute with the Association of Christian Counsellors. In 2014, Core Issues became involved in a dispute with the Association of Christian Counsellors (ACC) over its membership. In December 2012, the ACC had issued a statement to its members, arising 'out of a debate around same sex attractions' which emphasised both the client's right to make their own decisions, and the member's duty to

⁵ The High Commissioner recently recommended that States address violence by, inter alia, banning 'conversion therapy' United Nations High Commissioner for Human Rights, "Discrimination and Violence against Individuals Based on Their Sexual Orientation and Gender Identity: Report of the Office of the United Nations High Commissioner for Human Rights," Annual report of the United Nations High Commissioner for Human Rights and reports of the Office of the High Commissioner and the Secretary-General (United Nations High Commissioner for Human Rights 2015, para. 78 (g)). Noting that:

'There is mounting concern about so-called "conversion therapies" intended to "cure" homosexual attraction. Such therapies have been found to be unethical, unscientific and ineffective and, in some instances, tantamount to torture—leading to successful legal challenges and bans in several countries' (United Nations High Commissioner for Human Rights 2015, para. 52).

secure the client's best interests ([Association of Christian Counsellors 2012](#)). This statement seems ambiguous regarding the permissibility of SOCE; Core Issues interpreted it as prioritising client autonomy ([Core Issues Trust n.d.](#)). In an updated statement in January 2014 ([Association of Christian Counsellors 2014](#)), the ACC clarified that reparative or conversion therapy did not satisfy the ethical principles that the ACC required of its members. Core Issues responded to this statement by critiquing ACC's 'volte-face', as if a change of direction was in itself a sign of dishonesty; asserting that among other things, to align with the UKCP position was to provide secular, not Christian counselling; asserting that as there was a lack of 'gold standard' scientific research establishing harm [or benefit] from SOCE, it should not be disallowed; and that the ACC had misrepresented the impact of the Equality Act 2010 on the practice of SOCE ([Core Issues Trust and Davidson 2014b](#)). Following correspondence and 'an ultimatum' from the ACC, Core Issues undertook to comply with the January 2014 statement, in order that its membership could be renewed, in parallel with seeking recognition by the Professional Standards Authority as a supplier of human sexuality-focused counselling and psychotherapy. The ACC refused to renew Core Issues' organisational membership after 31 December 2014 because 'your response to our request for compliance is not acceptable as it adds too many caveats' (ACC Executive, quoted in ([Davidson and Core Issues Trust 2014](#))).

Michael Davidson's response to this was:

2015 marks the ongoing compliance of Christian leaders with a growing world-wide totalitarian approach to sexual ethics ultimately designed to demean, criminalise and annihilate Judeo-Christian foundations of family, fidelity, and the sanctity of true marriage. This is the triumph of the rise of the pansexual movement: it has persuaded a naive Christian leadership that its goals are egalitarian, democratic and benign ([Core Issues Trust 2016a](#)).

It seems plain from this correspondence, as with Core Issues' response to the Memorandum of Understanding ([NHS England et al. 2015](#)) discussed below, and its response to the failure of its legal case to display 'ex-gay' adverts on London buses ([Core Issues Trust 2015b](#)), and other material discussed in this article, that Core Issues' sole aim is to ensure the dominance of its view about the undesirability of same-sex attraction, the unreality of homosexuality as an identity, the desirability and possibility of change in same sex attraction, and the marginalised status of ex-gay identities in need of protection, notwithstanding the weight of opinion to the contrary from professional psychological bodies and the UK courts.

4.2.3. Organisation as Champion

Both the Alliance and Core Issues envision themselves as champions: 'Principled advocates for persons experiencing unwanted homosexual attractions ([Alliance for Therapeutic Choice and Scientific Integrity 2016](#)); 'Core Issues Trust campaigns for the freedoms of men and women who, although may have experienced homosexual feelings and behaviours, are unwilling to be forced into accepting that homosexual practice is innate, and immutable' ([Core Issues Trust 2015a](#)).

This championship has two aspects. The first is a focus on fighting for or otherwise supporting client rights: to access SOCE, for example when making representations to the European Agency for Fundamental Rights ([Core Issues Trust 2015a](#); [Core Issues Trust 2014a](#); [Core Issues Trust 2014e](#)); in providing consulting rooms in London and Belfast in which SOCE may be practised ([Core Issues Trust 2015a](#)), as other psychological professional bodies refuse to support SOCE. As the Trust is keen to advocate for rights which may not be recognised in law, or by professional bodies, this suggests that their conception of rights is philosophical rather than purely legal (rights exist whether or not they are recognised or granted by law; legal instruments may be defective to the extent that they fail to recognise the appropriate philosophical right). The question of the origin of such rights is not directly addressed (or recognised in the terms in which I have phrased it), but it is clear from Core Issues' various documentation that God, or more precisely, their own conservative interpretation

of God and Christianity, is the source of client rights to SOCE. The exception to this is their client rights webpage that reproduces ATCSI material ([Client Rights Division of the Alliance for Therapeutic Choice and Scientific Integrity 2015](#)) which has no religious references. I suggest that this is part of a general strategy on the part of NARTH and Core Issues to provide plausible secular foundations for their worldviews: see the discussion below.

The second aspect of Core Issues' championship is not just for any client rights, but for true rights, for true freedom: 'This Bill [The Counsellors and Psychotherapists (Regulation) Bill 2014–2015] attempts to close down dissent and ultimately attacks the freedom of individuals to resist homosexual indoctrination' ([Core Issues Trust 2014g](#)). Again, this freedom to resist indoctrination is an example of a (Core Issues interpretation of a) philosophical right, and it is the *correct* understanding of freedom or autonomy: the implication here is that 'homosexual indoctrination' is illegitimate, and people are justified in resisting it, or perhaps even morally required to do so.

Another aspect of this championship can be seen in hearing those who are often unheard, for example 'Growing Up With Two Moms: The Untold Children's View' ([Lopez 2012](#)), linked from ([NARTH Institute 2016](#)).

4.2.4. Some Markers of Reputable Practice

Both NARTH and Core Issues maintain websites that have at least some markers of belonging to reputable bodies. Core Issues' website has 'About', 'Help we offer', 'Resources' sections etc, ([Core Issues Trust 2016a](#)), and is particularly professional in layout: it compares favourably with UKCP's home page, for example ([UK Council for Psychotherapy 2016](#)). Some of the pages in the website arrangement are currently empty, such as 'Freedoms and "Rights"' ([Core Issues Trust 2016e](#)).

The Alliance's home page is less well-structured and professional-looking, but includes advertising for the *Journal of Human Sexuality* ([Alliance for Therapeutic Choice and Scientific Integrity 2016](#)). The home page of the *Journal* also looks superficially like a standard peer-reviewed journal, though there is currently no claim that this is so ([NARTH 2014](#)). It seems that this claim of being peer-reviewed was made in the past in a NARTH press release: see Rattigan ([Rattigan 2009](#)) for an extract and discussion, and Burroway ([Burroway 2009](#)) for a critique.

Documentation is also an important aspect of the claim to reputability. Core Issues has issued multiple press statements, for example ([Core Issues Trust 2016g](#)), in the manner of any newsworthy organisation.

Core Issues claims to foster cross- and inter-cultural competence, and to support LGBTI dignity, in their statement about the public benefits of their educative work (which I presume forms part of the legal justification for their charitable status):

In working educatively, rather than to indoctrinate its values, the charity encourages the interrogation of ideology, both religious and secular, through analysis and critique of diverse perspectives and readings of the literature relating to human sexuality and Christian living. In so doing, it fosters cross- and inter-cultural competence [. . .] Core Issues Trust promotes tolerance, and co-existence with and between groups holding conflicting view-points. It supports the freedoms of conscience, self-determination and LGBTI dignity ([Core Issues Trust 2016b](#)).

NARTH in particular mirrors the practices of well-respected bodies such as the American Psychological Association (APA). The *Report of the American Psychological Association's Task Force on Appropriate Therapeutic Responses to Sexual Orientation* ([APA 2009](#)) was met with NARTH's *Task Force on Practice Guidelines for the Treatment of Unwanted Same-Sex Attractions and Behaviour* ([NARTH Institute 2010](#)).

The APA Task Force's Report is an extremely significant document in the SOCE debate. It undertook a systematic review of the peer-reviewed literature in English from 1960 to 2007, in order to address three questions: (1) Are sexual orientation change efforts effective at changing sexual

orientation? (2) Are they harmful? (3) Are there any additional benefits that can be reasonably attributed to SOCE? (APA 2009, p. 2). Its discussion of these questions was thorough and lengthy. It provided the basis for the APA's resolution on Appropriate Affirmative Responses to Sexual Orientation Distress and Change Efforts (Anton 2010); the Task Force's Report was part of the evidence relied on by the signatories to the UK's Memorandum of Understanding on Conversion Therapy in the UK (NHS England et al. 2015, n. 5).

The Report emphasised a number of important issues, and here I mention one in particular, which forms part of the standard of a professionally competent therapist: therapists should establish a multicultural and client-centred approach to their work, which means acknowledging the significance of 'age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, and socioeconomic status' (APA 2009, p. 2). In other words, our social, political, historical and economic contexts influence us and our behaviour, and it is part of a psychologist's role to comprehend the impact of these environments and background (American Psychological Association 2002, p. 1).

NARTH implicitly claims multicultural competence and a lack of therapist bias by quoting from American Psychological Association Code of Professional Ethics on its home page:

Psychologists are aware of and respect cultural, individual, and role differences, including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, and socioeconomic status and consider these factors when working with members of such groups. Psychologists try to eliminate the effect on their work of biases based on those factors, and they do not knowingly participate in or condone activities of others based upon such prejudices (Principle E: Respect for People's Rights and Dignity) (NARTH Institute 2016).

Whether NARTH does treat all sexual orientations equally is a question of fact that I am not able to establish here, though that claim seems incompatible with their views on the desirability of SOCE. What is more clear is that their claim to multicultural competence is not compatible with the definition proffered by the APA's Task Force, who, among other things, see a multiculturally competent and affirmative approach as based on the acceptance of the *fact* that:

same-sex sexual attractions, behavior, and orientations per se are normal and positive variants of human sexuality—in other words, they do not indicate either mental or developmental disorders . . . Gay men, lesbians, and bisexual individuals form stable, committed relationships and families that are equivalent to heterosexual relationships and families in essential respects (APA 2009, p. 2).

As far as I can discover, Core Issues does not make a similar claim about psychotherapeutic practice—though it does claim to inculcate respect for diversity and LGBTI dignity (Core Issues Trust 2016b); see the discussion below.

4.2.5. Organisation as Compassionate

Not only do NARTH and Core Issues Trust distance themselves from prejudice against LGBT people, but also they represent themselves and their therapists as compassionate. NARTH highlights '[c]aring licensed counsellors and grateful clients' (NARTH Institute 2016). Michael Davidson is described as 'a caring and courageous counsellor' by Dermot O'Callaghan (Christian Concern 2013). Core Issues states:

The Church of Christ has a responsibility to support, with patience, understanding, sensitivity and respect, individuals who chose to work through those issues that have led to the homosexual impulse. The process of change is often exceedingly painful and requires the support of skilful mentors and a loving community in order to promote wholeness and restoration (Core Issues Trust 2016c).

Core Issues' sensitivity and understanding does not seem to extend to recognising same-sex attractions as natural, normal, and non-pathological.

This emphasis on compassion, whilst simultaneously maintaining a sharp preference for heterosexuality, may be understood as *paternalistic heterosexism* (Arthur et al. 2014), a category in Walls' taxonomy of heterosexism, defined as:

subjectively neutral or positive attitudes, myths and beliefs that express concern for the physical, emotional or cognitive well-being of nonheterosexual persons while concurrently denying, denigrating, stigmatizing and/or segregating any nonheterosexual form of behavior, identity, relationship, or community (Walls 2008).

In referring frequently to 'unwanted' same-sex attraction that can (should) be changed, both organisations emphasise the plight of those individuals who feel this way, thus further detaching same-sex attracted individuals from and subjugating them to the dominant norms of conservative (religious) society (Arthur et al. 2014, p. 27). This is reinforced by testimonials of pre-SOCE hopelessness:

Prayer, fasting, talking to other people about it, asking for their prayer, greater and greater efforts to avoid falling into what I the bible terms as 'sin'. This is a discouraging and soul destroying experience which can leave you emotionally drained and disheartened and wondering if you'll ever be able to live apart from homosexuality in your life. I am here to tell you that there is hope, but not from the same methods you've been using and trying harder at (Freedman 2016a).

And the benefits of SOCE ('therapy saved my life' (NARTH Institute 2016)).

According to Core Issues Trust, 'same-sex attraction disorder' is not exclusively a spiritual problem, i.e., a sin: same-sex attraction may develop from unhealed trauma, and unmet needs that have become distorted (Core Issues Trust 2016c). This shifts the narrative around homosexuality away from straightforward sinfulness to a person in need of help. However, Core Issues does not maintain a strict model in which to be disordered is to be blameless: they hold to the idea that individuals are not 'victims' of their sexual desires (Core Issues Trust 2016a); i.e., they have some, perhaps much, moral responsibility for their feelings and actions.

4.3. Attack on Opposing Views

Both Core Issues and NARTH see their ethos as under attack by various forces.

4.3.1. Anti-Christianity

The UK Counsellors and Psychotherapists (Regulation) Bill (presented in two consecutive parliamentary sessions, but not enacted as law (Davies 2013; Davies 2014) were viewed by Core Issues not just as an attack on the practice of SOCE, but on Christianity itself:

In reality what we see in the motive of this Bill, is brazen determination that all UK citizens, regardless of whether they are of a faith or no-faith background, be forced to embrace a socialisation process that seeks to overthrow Judaeo-Christian values that have underpinned the western world for centuries (Core Issues Trust 2014g).

As well as catastrophizing the Bill's likely impact (the overthrow of centuries' worth of significant values), this statement assumes the deliberate targeting of Judeo-Christian values, rather than simply SOCE, by those pursuing anti-SOCE legislation.

Relatedly, there is at least an assertion, or possibly an assumption, that Judeo-Christian values are uncomplicatedly aligned with pro-SOCE viewpoints. This is not the case. There is currently widespread disagreement within the Anglican Communion, and the Church of England specifically, about the acceptability of same-sex sexual relationships (Church of England Media Centre 2014;

[Foreshew-Cain et al. 2016](#); [Writer 2016](#); [Steven and Synod 2014](#)). It is possible to be Christian and to believe that same-sex relationships, including sexual ones, are ethically acceptable, and there is a substantial literature on this from a range of viewpoints (see for example ([Sharpe 2011](#); [John 2012](#); [Song 2014](#))). Even the more conservative official teaching of the Church of England that requires celibacy from same-sex attracted people does not suggest that same sex attraction itself ought to be removed in some way ([Synod 1987](#); [House of Bishops 1991](#); [Lambeth Conference 1998](#); for further discussion see ([Clucas 2012](#))). The Trust is certainly aware of this, as it refers to current debates on homosexuality and celibacy in the Church of England and Anglican Communion ([Core Issues Trust 2016a](#)). This suggests that the Trust sees itself as the true arbiter of what Christianity *really* requires in relation to homosexuality.

This claim for religious veracity rings out more clearly here:

‘It [anti-SOCE legislation] is the latest sophisticated manifestation of a new anti-Semitism that also seeks, as it did in the days of the rise of the German National Church, to strip the Christian Gospel of any vestige of the Jewish heritage which includes a call to sexual purity and rejection of homosexual practice’ ([Core Issues Trust 2014g](#)).

By referring to the Jewish heritage of Christian ethics, the Trust emphasises its pedigree. It also provides an oblique means of accusing MP Geraint Davies, the sponsor of the two Bills, and those who agree with him, of anti-Semitism, with allusions to the Nazi regime. In context, there also seem to be an implicit claim for Core Issues’ own respect for veracity and diversity: *they* are the ones resisting the Nazis and defending the true Gospel. In the world of the Trust, it is one of the few courageous souls who dares to speak clearly about this bigoted attack on true Christian values.

In the view of Christian Concern, in a piece linked from the Core Issues website, the secularising agenda enshrined in the UK Counsellors and Psychotherapists (Regulation) Bill poses a threat to the autonomy of the church:

‘the Bill seeks to give the government control over what Christians may believe and teach about sexual ethics, because it would set into law the idea that to attempt to change sexual orientation is “harmful”. But even more seriously, it seeks to take away from God the right to bring change in a particular area of human life. It is directly contradicting God’s word. It is claiming for itself the authority to pervert the Law of God . . . ’ ([Concern 2014](#))

Again, Christian Concern is equating its conservative interpretation of scripture with ‘what Christians believe’ (i.e., all Christians), which is inaccurate. It seems to dismiss the idea that SOCE could be harmful by placing that word in inverted commas. It is also clear that for this organisation, the overriding source of moral values and normative behaviour is not human law, but God—as interpreted by a conservative Christian.

4.3.2. An anti-SOCE Position Hides an Ideological Agenda

NARTH claims that the current social and political climate of mental health associations is hostile to reports of improved heterosexual functioning brought about by psychotherapy, and to those who seek such treatment. These people:

. . . may have their experiences of change marginalized or invalidated

One possible reason for such marginalization is the increasing number of resolutions, position statements, and practice guidelines produced by professional psychological associations that are related to therapeutic approaches to sexual orientation (e.g., American Psychological Association, 2000, 2009). [. . .] Specifically, they often appear to be produced by partisan committees whose members do not generally share the goals, values, or worldviews of many clients who seek assistance in changing unwanted same-sex attractions and associated feelings, fantasies, and behaviors ([NARTH Institute 2010](#), p. 2).

Here, NARTH avoids criticising the American Psychological Association itself (which it quotes approvingly—and selectively—at various junctures), but identifies ‘partisan committees’ such as the Task Force that produced the report *Appropriate Therapeutic Responses to Sexual Orientation* (APA 2009). This portrayal seems different to the account of the transparent nominations and appointment processes in the report, which was concerned with soliciting nominations from persons with relevant expertise, and welcoming the participation of psychologists from under-represented groups (APA 2009, pp. 8–9).

At least one of the Task Force’s members, Jack Drescher, has served on LGBT committees, as well as having been chair, president or member of other psychological associations (Drescher 2016b; Drescher et al. 2016), and is well-known as a critic of SOCE and the claims made by its proponents (Drescher 2002b; Drescher 2009; Drescher 2015). It seems likely that the presence of LGBT community members or allies on the Task Force is what led to the claim of partisanship. If this is the case, then the factors that one would normally take to be indicators of intellectual merit and integrity, namely being a globally esteemed psychiatrist and psychoanalyst, medical college professor, well-respected by one’s peers, a member of many eminent psychiatric, medical and scientific organisations, and a prolific author of books and peer-reviewed papers (Drescher 2016b), would seem to count for nothing if one’s scholarly opinions and recommendations are sympathetic to one’s sexual identity.

Similarly, Core Issues attacks individuals such as Michael King, equating allegedly inaccurate submissions to various bodies to his membership of the Gay and Lesbian Special Interest Group of the Royal College of Psychiatrists (Core Issues Trust 2014f). It is implicit that a supposed bias in his submissions is to do with his LGBT community membership.

O’Callaghan and May, in their booklet *Beyond Critique* (O’Callaghan and May 2013) published by Core Issues Trust, claims that UK psychological professional bodies are operating as apologists for a pro-LGBT ideology. Core Issues repeats this view in their response to the Memorandum of Understanding on Conversion Therapy in the UK:

It is important to note that this Memorandum of Understanding openly acknowledges an ideological basis for those associating with it, saying “it is informed by a position that efforts to try to change or alter sexual orientation through psychological therapies are unethical and potentially harmful”. In its failure both to cite conclusive peer-reviewed scientific evidence to support these claims, and without admitting dissenting voices to debate contested areas, the Memorandum of Understanding remains a political statement uncritically promoting gay ideology (Core Issues Trust 2014f).

This seems to miss the point: a memorandum of understanding between the UK’s major psychological professional bodies is simply a memorandum of understanding: a formal (though non-legal) agreement between parties. This is not the same thing as a research report.

The memorandum states that it is recording conclusions already reached by major psychological professional bodies (NHS England et al. 2015, para. 9), and provides footnotes referring readers to comprehensive digests of research on conversion therapy (such as (APA 2009)). It is true that this research does not conclusively prove that SOCE is harmful; however, it provides better evidence that SOCE is harmful than that it is beneficial (APA 2009). Core Issues itself has not conclusively proved via peer-reviewed scientific evidence that SOCE is beneficial.

It is unclear what proof Core Issues requires to demonstrate that SOCE is unethical, if the consensus of UK psychological professional bodies is inadequate.

The Consensus Statement from the UK’s Professional psychological professional bodies (UK Council for Psychotherapy et al. 2014) is characterised as ‘the new creed for gay science’ (Core Issues Trust and Davidson 2014a), implying that ‘gay science’ is not really science, but rather ideology; and also using the religious imagery connoted by ‘creed’ to suggest blind faith.

‘Ideology’ is also the reason given for the removal of Michael Davidson (of Core Issues Trust) from the British Psychodrama Association’s register of trainee psychotherapists (Christian Concern 2013). Having given two interviews to the BBC in 2012, ‘in which he carefully explained his evidence-backed

opinions' ([Christian Concern 2013](#)) for practising conversion therapy, Davidson's trainee membership was revoked in the course of an investigation. The Ethical Principles for the UK Council for Psychotherapy were the measure, described by Dermot O'Callaghan as '... a set of so-called "Ethical Principles" ... that are themselves anything but ethical' because they '... den[y]clients the right to shape their own sexual preferences' ([Christian Concern 2013](#)). This question of client autonomy or self-determination will be discussed further, below.

4.3.3. Homosexual Indoctrination

The theme of anti-SOCE or pro-LGBT measures as forms of homosexual indoctrination occurred frequently.

In a statement on the Counsellors and Psychotherapists (Regulation) Bill 2014–2015, Core Issues declares '[t]his Bill attempts to close down dissent and ultimately attacks the freedom of individuals to resist homosexual indoctrination' ([Core Issues Trust 2014g](#)). This suggests a rather alarming world in which SOCE is the only defence against a populace being brainwashed to accept gayness, and become gay, with the understanding that being gay is a bad thing to be.

NARTH responds to research into poor practice and ethical violations by licensed conversion therapists ([Schroeder and Shidlo 2002](#)) by re-categorising this work as 'anti-SOCE *advocacy* research' (my emphasis) ([NARTH Institute 2016](#)), indicating that the research is about the promotion or sponsorship of an anti-SOCE position, rather than a study that demonstrates flaws in SOCE practice. This seems to be a wilful miscategorisation of Schroeder and Shidlo's work that downplays the significance of their findings.

Core Issues describes their affiliates as:

those who sense that this notion of 'orientation' is being used to usher in acceptance—particularly of homosexuality—as a normal and natural variant of human experience and sexual expression. They sense that this seemingly unstoppable trend is at variance with an even more primary sense of right and wrong that they have grown up with and hold dear. They may also sense that this new movement that has begun to find acceptance in churches or sacred spaces, has a deep resonance with very ancient ideas about sexuality that are of dubious origin [presumably, paganism as practised by the ancients]. Their spiritual radar warns them that our culture is under threat ([Core Issues Trust 2016a](#)).

Acceptance of people simply having a homosexual orientation violates a proper sense of right and wrong; even churches are becoming polluted by this notion; there are parallels between accepting homosexuality as an orientation and with pagan practices denounced in the Bible.

4.3.4. Doubting/Discrediting

In addition to dismissing the UK's major psychological professional bodies as proponents of LGBT ideology, Core Issues also doubts the testimony of someone with an anti-SOCE position. It seems that such testimony can only be real if there is proof in the form of official documentation of some kind:

No actual example of the use of this technique in respect of sexual orientation change efforts (SOCEs) in the USA was cited by the complainant Mr Samuel Brinton who is sponsored by the National Centre for Lesbian Rights (NCLR), in California [...] What is unknown is whether the committee has ascertained the date, place and identity of the provider of conversion therapy Mr Brinton claims damaged him, and whether or not his father, who he claims abused him, has been prosecuted ([Core Issues Trust 2014h](#)).

A similarly dismissive tone was taken to some evidence in the EU LGBT Survey. A lesbian woman disclosed an instance of discrimination at work, when a colleague told her she was abnormal, and that her sexual orientation was against nature. Core Issues' response was:

... at the top of page 17 there is a quote from someone who obviously sees discrimination and homophobia everywhere ... If homophobia is so widely defined it is likely that the survey will reflect inflated results. Such a vague approach to data gathering cannot safely be used for the basis of EU policy and strategy (Core Issues Trust 2014a).

In both of these examples, Core Issues dismisses the testimony of people who say they have experienced discrimination or psychological harm, where the instances of alleged harm or are opposed to Core Issues' views. Yet Core Issues does not require proof of those whose reported experiences are aligned with their goals, before taking them seriously, such as the ex-gay blog of 'Callum Freedman' (a pseudonym) (Freedman 2016b). NARTH also accepts testimonies as good evidence for the benefits of SOCE (NARTH Institute n.d.).

4.4. Claim to (Superior) Scientific Knowledge and Integrity

As well as explicitly and implicitly asserting the integrity of their organisations, Core Issues and NARTH declare that they hold the high ground in relation to scientific integrity.

4.4.1. Homosexuality is not Normal

Core Issues rejects the consensus of national and international psychological and medical bodies (e.g., American Psychological Association [1992] 2011; British Psychoanalytic Council 2001; Scasta et al. 2013), that homosexuality is a naturally occurring variant of human sexuality. It classifies homosexuality as 'same-sex attraction disorder' (Core Issues Trust 2016c).

NARTH does not go quite this far, but states '[s]ince 1973, homosexuality itself has no longer been formally considered to be pathological' (references omitted) (my emphasis) (NARTH Institute 2010). This suggests that, although homosexuality was officially declassified, people *really* knew that there was a problem with it. NARTH also developed training '... to help clients with unwanted homosexual attractions and other sexual addictions and behavioral challenges' (Alliance for Therapeutic Choice and Scientific Integrity 2016). Here, as in Arthur et al.'s study, those advocating SOCE do not conceptualize homosexuality as an inherent part of an individual's identity, but rather as 'a feeling, condition, or behavior that can be treated' (Arthur et al. 2014, p. 27).

Although 'unwanted homosexual attractions' are named as the problem, rather than simple 'homosexual attractions', the latter is implicitly problematic in the context given: homosexual attractions are a type of sexual addiction and behavioural challenge. It would be odd to imagine that the sexual addiction only exists where the same-sex attraction is unwanted. The APA regards these types of view as unfounded beliefs about sexual orientation (APA 2009, p. 12).

4.4.2. SOCE Is Good for Clients

As homosexuality is deviant, it follows that SOCE is good for clients. Specifically, SOCE facilitates personal growth. This is not simply a claim about therapy bringing about personal growth, but specifically equates a change *away* from same sex attraction with psychological growth:

'There is a story that isn't being told in the mainstream media about sexuality research, therapeutic self-determination, caring licensed counselors, and grateful clients who have experienced personal growth in their individual counseling experiences. You—as an individual who has experienced this clinical help or as a counselor who has shared the experience of growth in a clinical setting—can change these misperceptions by sharing your story' (NARTH Institute 2016).

This idea is consistent with the opinion that to experience same-sex attraction is to suffer from some kind of immaturity or arrested development (see the discussion above).

Core Issues also espouses the idea of growth and recovery:

'Merely abstaining from homosexual activity, although admirable, cannot be regarded as healing. Heterosexual preference is the goal of gender-affirming therapy and this may often lead to marriage' (Core Issues Trust 2016c).

An emphasis on healing the brokenness of same-sex attracted persons was also noted in Arthur et al. (Arthur et al. 2014).

'Gender-affirming therapy' is a reference to the idea that same-sex attraction is caused by some shortfall in correct gender identification. This understanding is shared by many of the NARTH members interviewed by Waidzunus (Waidzunus 2015, p. 4) and discussed by Robinson and Spivey (Robinson and Spivey 2007).

4.4.3. Standard Treatment is Mistaken and Harmful

If homosexuality is deviant, and SOCE good for clients, it follows that mainstream approaches that do not focus on change of sexual orientation (APA 2009, p. 5), and in particular legislative and regulatory measures that restrict or ban SOCE, are mistaken, and actually cause harm to clients (Pickup v Brown (2012), p. 3).

Conversely, the medical and social changes involved in recognising and giving effect to trans people's identities are 'insanity' in response to a 'mental health disorder' (Gomes 2016a), linked from a Core Issues page (Gomes 2016b); 'policy makers and the media are doing no favors either to the public or the transgendered by treating their confusions as a right in need of defending rather than as a mental disorder that deserves understanding, treatment and prevention' (McHugh 2016), linked from (NARTH Institute 2016).

People experiencing same-sex attraction ought to have the therapeutic help they need to rid themselves of these feelings, rather than being given help in supporting their identity development without a pre-determined treatment goal as advocated by the APA (APA 2009, p. 5); people understanding themselves as trans ought to be treated for their mental disorder, like patients with anorexia nervosa (McHugh 2016).

4.4.4. Rebranding

A recent enterprise undertaken by Christopher Rosik of NARTH is the renaming of SOCE, to further disassociate it from the negative, anti-gay connotations of conversion therapy, reparative therapy, and, increasingly, SOCE. His new preferred terminology is 'SAFE-T' (Sexual Attraction Fluidity Exploration in Therapy) (Rosik 2016a).

This rather clever acronym emphasises the safety of the treatment, and focuses on fluidity exploration, the latest focus of these organisations, which is discussed further below. Rebranding to avoid negative connotations was also the suggested motivation for the renaming of the NARTH Institute to the Alliance for Therapeutic Choice and Scientific Integrity (see discussion above).

4.4.5. Claim to Be at the Forefront of Knowledge

NARTH proclaims:

NEW RESEARCH SHEDS LIGHT ON FLUIDITY: Study has implications for legislative efforts to ban change-oriented therapy. Conventional wisdom within the sexual orientation literature is that women experience changes in their sexual attractions and identities far more than men. However, new research is challenging the notion that such fluidity is rare in men ... (Rosik n.d.)

Somehow, the 'new research' about fluidity is seen as evidence that SOCE ought to be permitted (Rosik n.d.). This assumption that science can tell us what social, political and ethical decisions we need to make, however is rarely justified (Bailey et al. 2016), and Rosik's piece is no exception to this rule (see Beyleveld and Brownsword (Beyleveld and Brownsword 1994, chp. 1) for discussion of errors

in 'ought implies can' arguments). Although evidence that sexual orientation *can* change doesn't prove that it ought to be changed, it does undermine one objection to that view.⁶

Core Issues Trust shares a belief in fluidity (Core Issues Trust 2013). Its News page also features prominently a 'New Study: Sexuality and Gender—The understanding of sexual orientation as an innate, biologically fixed property of human beings—the idea that people are "born that way"—is not supported by scientific evidence' (Core Issues Trust 2016h).

The 'study', actually a review, to which this refers is Mayer and McHugh (Mayer and McHugh 2016), published in a non-peer-reviewed journal with a socially conservative agenda: for discussion see Throckmorton (Throckmorton 2016). The most authoritative current discussion of sexual orientation and science, which concludes that there is significantly more evidence supporting non-socially influenced (e.g., hormonal, genetic, and non-social environmental) causes of sexual orientation than socially influenced (early sexual experiences and cultural acceptance of non-heterosexuality) causes is Bailey et al. (Bailey et al. 2016). And, as in Rosik's piece, Core Issues' assumption that a particular course of action must flow from the 'science' is unfounded: even if the cause of homosexuality were completely socially determined, this would not by itself mandate any particular social, ethical or political course of action (see Powell and Stein for further discussion on this point (Powell and Stein 2014)).

In another instance of claiming superior knowledge, NARTH proclaims: 'Sexual Orientation as a Conditioned Response to Childhood Sexual Abuse: A Rarely Discussed Factor in the Scientific Literature' (NARTH Institute 2016). This headline gives the impression of boldly going where few men have gone before, or, to mix metaphors, swimming against the scientific tide of opinion. Yet, in actuality, this seems to be another instance of a claim for scientific validity for a less credible causal theory of sexual orientation (Bailey et al. 2016, p. 46).

4.4.6. Debunking

As an aspect of doubting or discrediting their opponents, both organisations regularly engage in a process of setting the record straight on what research, especially science, *really* says. Examples of this include 'No, Scientists Have Not Found the 'Gay Gene'. The media is hyping a study that doesn't do what it says it (Alliance for Therapeutic Choice and Scientific Integrity 2016); 'Same-Sex Parenting and High School Graduation Rates: the "no difference" mantra is failing the test of better research' (Rosik 2016b), linked from (NARTH Institute 2016); characterising the EU LGBT Survey as a faulty research instrument (Core Issues Trust 2014a); 'Debunking the Myths: Same-sex Attraction, Science and the Gospel' (Core Issues Trust 2015a); accusing the Royal College of Psychiatrists of double-speak ((Gagnon 2014), linked from (Core Issues Trust 2016d)). Both organisations engage in this process energetically, presumably seeing themselves as having the duty (and the right) to give the true version of events or knowledge to their readers.

Jack Drescher has critiqued eloquently NARTH's use of science on a number of occasions (Drescher 2002b; Drescher 2009; Drescher 2015). There is no peer-reviewed literature on Core Issues on this point, to the best of my knowledge, but see Cook's article in the *Church Times* (Cook 2014a), the letter by O'Callaghan (Dermot 2014), Cook's response (Cook 2014b), and the discussion elsewhere in this article. I hope it is clear from the analysis in this section that rather than presenting a dispassionate view of science and its conclusions, both organisations are engaged in wrapping their political agendas in the mantle of science (Drescher 2009, p. 216).

4.5. Respecting Self-Determination/Autonomy

Self-determination of the client is a recurring theme. Though its meaning is not developed in NARTH and Core Issues material, I understand this to be a claim to a philosophical and sometimes

⁶ I am indebted to Tony Ward for this point.

legal principle of autonomy, on the part of a person who is a self-governing agent. I therefore use these terms as synonyms.

4.5.1. Supporting People's Choices to Diminish Same Sex Attraction

Neither Core Issues nor NARTH claim that same-sex attraction is not a real phenomenon. What they dispute is that same-sex attraction should be embraced, identified with, and followed: 'I didn't choose my homosexual feelings, but I knew I had choices around these feelings...' (Core Issues Trust 2015a); '[s]upporting every client's right to live a life congruent with their freely chosen values!' (NARTH Institute 2016); '[w]ithout immediate action by this Court, SB 1172 will compel licensed mental health practitioners to sever their confidential relationship with their clients cease helping their clients reach their self-determined goals' (Pickup v Brown 2012, p. 1). The APA Task Force reported that 'the proponents of SOCE that consist of organizations that adopt a disorder model of homosexuality and/or advocate a religious view of homosexuality as sinful or immoral wanted APA to clearly declare that consumers have the right to choose SOCE (references omitted)' (APA 2009, p. 12). These types of view run counter to the mainstream slogans of 'born this way', common media descriptions of gayness as a biological fact, and many people's lived experiences of exclusive and consistent same-sex attraction.

Professional bodies such as the Royal College of Psychiatrists and the APA (APA 2009) do in fact recognise that sexual orientation is not rigid:

It is not the case that sexual orientation is immutable or might not vary to some extent in a person's life. Nevertheless, sexual orientation for most people seems to be set around a point that is largely heterosexual or homosexual. Bisexual people may have a degree of choice in terms of sexual expression in which they can focus on their heterosexual or homosexual side (Royal College of Psychiatrists 2014).

Where they oppose NARTH and Core Issues is in providing or advocating therapy to help individuals become more heterosexual: The Royal College considers the purported 'treatment' of homosexuality as unethical, because homosexuality is not a disorder (Royal College of Psychiatrists 2014, pp. 2–3). The UKCP likewise regards SOCE as exploitative because this is to offer a dubiously effective treatment for which there is no illness (UK Council for Psychotherapy n.d., para. 1.1 (e), (f)).

The reason for this is that, for someone to choose to move away from their feelings and attraction, the person must perceive those feelings/attractions as wrong. This judgement is an internalisation of societal stigma against homosexuality, i.e., heterosexism (Herek et al. 2009); see also (APA 2009, pp. 3–5, 15–17) for a discussion of stigma. Studies in the ten years prior to *Appropriate Therapeutic Responses to Sexual Orientation* (APA 2009) indicated that the SOCE-seeking population comprised mostly men, predominantly educated to a good standard, for whom religion of a conservative or traditional character was an extremely significant part of their lives (APA 2009, p. 3). This would seem to support the model of SOCE-seekers as persons living in a stigmatising environment.

In response to the self-determination claim, The APA Task Force responded:

We were not persuaded by this argument, as it encourages LMHP [licensed mental health providers] to provide treatment that has not provided evidence of efficacy, has the potential to be harmful, and delegates important professional decisions that should be based on qualified expertise and training—such as diagnosis and type of therapy. Rather, therapy that increases the client's ability to cope, understand, acknowledge, and integrate sexual orientation concerns into a self-chosen life is the measured approach (APA 2009, p. 6).

And

We believe that simply providing SOCE to clients who request it does not necessarily increase self-determination but rather abdicates the responsibility of LMHP to provide competent assessment and interventions that have the potential for benefit with a limited risk of harm (APA 2009, p. 69).

There seem to be are two conceptions of autonomy or self-determination in conflict here. The NARTH/Core Issues model declares that the client knows best about their desire for SOCE, and should be supported in this. The mainstream psychotherapeutic view is that of APA (APA 2009), above, and that of the UKCP. The UKCP's *Ethical Principles and Codes of Professional Conduct: Guidance on the Practice of Psychological Therapies that Pathologise and/or Seek to Eliminate or Reduce Same Sex Attraction* are worth quoting at length to explain the nuances of this position:

Section 1 of UKCP Ethics Code: Best Interests of Clients

1.1 The psychotherapist takes responsibility for respecting their client's best interests when providing therapy.

Guidance:

- (a) Research has shown that offering, or agreeing to the client's request for, therapy for the reduction of same sex attraction is not in a client's best interests. (Drescher, Shidlow and Schroeder, 2002).
- (b) An ethical response to a request by a client for psychotherapy to reduce same sex attraction would be to establish a clear contract with the client regarding the nature of psychotherapy as a process rather than an outcome, and to share with the client basic information on the findings of research on therapy that aims to change or reduce same sex attraction, which is that research does not suggest this therapy is effective, although sometimes limited effect has been reported. There is overwhelming evidence that undergoing such therapy is at considerable emotional and psychological cost.
- (c) A competent first response to a request by a client for psychotherapy to reduce same sex attraction would be to establish where the pressures are coming from for the client to seek making such a change.

[...]

1.7 The psychotherapist undertakes to respect their client's autonomy.

1.8 The psychotherapist undertakes not to harm or collude in the harming of their client or a client of others.

Guidance:

- (g) It is not a sufficient defence for a therapist to argue that in attempting (or expecting as an outcome of therapy) reduction of same sex attraction they were acting in the client's best interests, or according to the client's wishes and autonomy, as offering such therapy would be contributing to and reinforcing their externalised and internalised oppression and likely to cause harm to the client, or extend their existing distress (UK Council for Psychotherapy n.d.).

Where there is a conflict between the client's current desire (for SOCE) and their broader or longer-term best interests (to reduce internalised oppression, not reinforce external oppression in the therapy context, and help minimise client distress), the therapist should help the client explore the factors surrounding this desire, but should not agree to provide or actually provide therapy to attempt to reduce same-sex attraction. This is, in fact simply one example of the therapist's duty not to allow the client to dictate the therapeutic contract. A client cannot expect that the therapist help them to commit suicide, or become a better murderer, and the therapist must not agree to do this: neither would be in the client's best interests.⁷

This idea that broader or longer-term interests are militating factors in accepting a particular choice as a (true) exercise of a client's self-determination is supported by philosophical discussion of autonomy:

⁷ I am indebted to Pete Palumbo for this point.

Agents persist through time; and so [. . .] an agent's point of view is not simply a function of whatever mental state(s) she happens to be in at some point in time. Because an agent's plans play a crucial role in ensuring that she is more than a mere collection or sequence of mental states, it is reasonable to think that whether her motives have her support depends on whether they are constrained by these plans. So, too, it is reasonable to think that her stance toward her motives is determined by her long-term values and/or her relatively stable commitments and cares (Buss 2013).

At this point it might be tempting to conclude that NARTH and Core Issues are operating with an unsophisticated notion of autonomy. However, there are indications that this is not the most accurate inference to make. In a piece linked from the NARTH website, entitled 'Transgender Surgery Isn't the Solution; A drastic physical change doesn't address underlying psycho-social troubles,' McHugh asserts that trans people are disordered and confused, and need to be cured, not have gender reassignment (McHugh 2016). Gomes (Gomes 2016a) makes similarly dismissive remarks about trans people. It seems strange that a client may have a deeply held desire to change (the expression of) their sexual orientation, and should be able to do so, yet a client that has a deeply held desire to align the outward manifestation of their internal psychological gender, is disordered. NARTH and Core Issues seem to claim to uphold client autonomy when a person's views coincide with their own, and to deny it when they do not.

4.5.2. Telic Congruence

The desire to live in accordance with one's values is telic congruence, as opposed to organismic congruence, 'i.e., living with a sense of wholeness in one's experiential self' (APA 2009, p. 18). The former is, effectively, what Andrew Symes of the organisation Anglican Mainstream is arguing for when he criticises the proposed regulation of counsellors and psychotherapists in the UK: '[t]he Bill says nothing about the many people with unwanted feelings of same sex attraction who on their own initiative (in fact often with God's prompting), want to change' (Concern 2014, linked from Core Issues Trust 2015a).

Telic congruence is seen as problematic when the desire to minimise or rid oneself of homosexual feelings is the result of stigma from a values system and community that disparages homosexuality. The APA Task Force is not optimistic about the psychological well-being of a person who pursues a telic congruence based on stigma and shame (APA 2009, pp. 4–5).

It is evident that Core Issues does not share this understanding of the problem of shame and homosexual feelings. Rather than comprehend conservative Christian environments as contributing to the problem of internalised shame and stigma, Core Issues sees the church as a supportive community in which to work on homosexuality:

'The Church of Christ has a responsibility to support, with patience, understanding, sensitivity and respect, individuals who chose to work through those issues that have led to the homosexual impulse. The process of change is often exceedingly painful and requires the support of skilful mentors and a loving community in order to promote wholeness and restoration' (Core Issues Trust 2016c).

Core Issues' idea of wholeness seems to rest on an idea of psychological growth and development away from same-sex attraction. By contrast, the APA's organismic congruence (above) is a wholeness of the experiential self, a phenomenological idea of the lived, unitary self as it exists in the world. In humanistic psychotherapy, we become more whole as we recognise and integrate all (even unwanted) aspects of our self (e.g., (Perls et al. 1994)); for Core Issues, this wholeness is attained by aiming at and hopefully succeeding in ridding oneself of an unwanted aspect of the self.

It is interesting to note that the APA Task Force (a 'partisan committee': (NARTH Institute 2010, pp. 1–2), recognises and accepts that 'some individuals choose to live their lives in accordance with personal or religious values (i.e., telic congruence)' (APA 2009, p. 2). This is seen as a valid possible

outcome of therapy. What is invalid for the APA is the *aim* that therapy should be directed at ridding oneself of same-sex attraction. However, there is no corresponding recognition by Core Issues or NARTH that it is a valid outcome of SOCE to embrace one's gay identity and have same-sex sexual relationships (see also Robinson and Spivey's studies concerning NARTH prior to and after the 2009 APA report ([Robinson and Spivey 2015](#))).

4.5.3. The Context of Self-Determination

As described above, it is believed by the mainstream psychological bodies that a person seeks SOCE because of their interior and exterior environments: internalised stigma, and the external stigmatisation of homosexuality. This is, additionally, combined with minority stress ([APA 2009](#), p. 69): the impact of discrimination towards marginalised groups, which makes itself shown in health disparities compared to the general population ([Meyer 1995](#); [Meyer 2003](#); [Hatzenbuehler et al. 2008](#); [APA 2009](#), p. 16). The APA Task Force recommend that practitioners assess the extent to which the self-determination of a client seeking SOCE is diminished ([APA 2009](#), p. 69). The shame and stigma impacting on an individual cannot be understood in isolation from the community in which they reside.

This idea of context was dismissed by Christian Concern, an organisation sharing many of Core Issues' priorities. In response to the removal of Michael Davidson of Core Issues Trust by the British Psychodrama Association from the psychotherapists' register of trainee professional membership under the direction of the United Kingdom Council for Psychotherapy (UKCP), Christian Concern scorned the UKCP Code of Ethics against which Davidson was measured:

The BPA tried him against a set of so-called "Ethical Principles" of the UK Council for Psychotherapy that are themselves anything but ethical. These principles say: "It is not a sufficient defence for a therapist to argue that...they were acting in the client's best interests, or...autonomy, as offering such therapy would be...reinforcing their externalised and internalised oppression." So if someone asks a therapist for help to reduce unwanted same-sex attractions, they will be told that they are suffering from oppression and that it is unethical for a therapist to do what they ask ([Christian Concern 2013](#)), linked from ([Core Issues Trust 2016d](#))).

This, incidentally, is not what is recommended by the UKCP's Guidance on the Practice of Psychological Therapies that Pathologise and/or Seek to Eliminate or Reduce Same Sex Attraction (UKCP 2016).

The Alliance also disregards the impact of a client's circumstances, and views the client as an atomised individual:

It appears that CIT's sole "crime" is to provide therapeutic care for clients who autonomously and with informed consent desire to modify their unwanted same-sex attractions and behaviours ([Alliance for Therapeutic Choice, Scientific Integrity 2015b](#)).

It seems that clients seeking SOCE are fully autonomous and capable of giving informed consent.

Again, a more sophisticated understanding of autonomy differs from this point of view. Buss explains that it is naïve to uncomplicatedly equate simple action and choice with self-determination: our actions are not guaranteed to be motivated by our long-term values and/or relatively stable commitments and cares (our real exercise of autonomy). It is uncontroversial to say that we are often influenced by circumstances outside our control; in such situations, the choice available to us is limited, and our main option may be to choose how we respond to the restricted options available: for example, if we do not receive our dream job offer, what will we do next, and will we act with optimism or pessimism? However, some of the forces in our environments '... influence us in a way that makes a mockery of our authority to determine our own actions. They undermine our autonomy' ([Buss 2013](#)). It is this kind of influence that UKCP and the APA Task Force are concerned with in the case of clients seeking SOCE.

In psychotherapy practice, it is accepted that clients (and not just those who are ill) have a somewhat compromised degree of self-determination, and that it is the therapist's goal to nurture the client's greater autonomy and independence (see Carl Rogers' discussion of Ellen West and the regaining of the locus of evaluation (Rogers et al. 1961, pp. 157–68; Bergin 1991; Ryan and Deci 2008; Philippson 2001)). A common problem is introjection: the uncritical internalisation of an external 'should' or 'ought', often in childhood, taken on board as a means to become acceptable or safe (simple examples include 'boys don't cry', 'don't complain', 'think about others before yourself', etc.) (Ryan and Deci 2008, p. 169; Mann 2010, pp. 44–46). Because the impact of these introjects can be profound and life-blighting, the therapist aims to help the client challenge them:

... to allow them to reevaluate these inner demands and come to a true, reflective choice about whether they are indeed congruent and meaningful for the individuals. To the extent that they are reflectively considered to be authentic and appropriate, the clients can then work to integrate them. To the extent that the demands are considered inappropriate, the clients can begin to experience, with support from their therapists, what it means to discard them (Ryan and Deci 2008, p. 189).

These descriptions of nuanced autonomy and the introjects that shape and compel us seem a much more convincing picture of the individual than that of Christian Concern's and the Alliance's fully autonomous client. It is evident that conservative Christian norms around same-sex sexuality are a potent source of introjects ('it's wrong to have same-sex feelings'; 'gay sex is a sin'). Mainstream therapy gives the option for the client to consider whether conservative sexual norms are authentic and appropriate, or inappropriate, for them.

Moreover, even apart from which conception of autonomy is preferable (black and white or nuanced), the conservative version seems flawed on its own terms. As clients seeking SOCE do so in order to deal with their unwanted same-sex attraction, this is, in itself an indicator that the client is not without impulsion by forces that undermine their autonomy (even if there may be dispute over what really constitutes their truly autonomous course of action).

4.5.4. Self-Determination and Other Principles

Core Issues, NARTH, the APA, and UKCP, all value client autonomy or self-determination. Where they differ is the weight given to the desire to have SOCE. Core Issues and NARTH claim that client autonomy—the desire to pursue SOCE—is the overriding concern in treatment, which should be pursued at the expense of other considerations. Given that there is very reasonable doubt about the efficacy and safety of SOCE, this is to privilege the principle of autonomy above all other ethical principles, such as the best interests of the client, or the principles of beneficence and non-maleficence. Such a prioritisation is against the Code of Ethics of UKCP (UK Council for Psychotherapy 2009), of the American Psychological Association (American Psychological Association 2016), and the consensus of esteemed medical ethicists such as Beauchamp and Childress (APA 2009, p. 67).

Alternatively, one might conceptualise the matter thus: the mainstream professional psychological organisations are willing to focus on the client's long term autonomy as being in their best interests. Core Issues and NARTH either merely assume that a client's best interests are identical to their current wishes, or are indifferent about a client's best long term autonomy goals.

4.5.5. The Impact of Regulation on Pro-SOCE Practitioners

There is an implicit second strand to the organisations' autonomy claim, discussed above: regulation of SOCE impinges on the personal autonomy of SOCE practitioners (Concern 2014), destroys the careers they have chosen and threatens their livelihoods (Pickup v Brown (2014)).

This autonomy/livelihood aspect of SOCE regulation is generally not pursued in these terms by Core Issues, who prefer to position themselves as innocent victims, of anti-religious sentiment

([Core Issues Trust 2014g](#)), or the potential victims of hate speech if SOCE practice is further restricted ([Core Issues Trust 2014h](#)).

4.6. Justice

The concept of 'justice' is used by Dermot O'Callaghan (the co-author of two booklets published by Core Issues Trust, *Beyond Critique: The Misuse of Science by UK Professional Mental Health Bodies* ([O'Callaghan and May 2013](#)) and *Out of Harm's Way: Working Ethically with Same-Sex Attracted Persons: Questions of harm, evidence and practice* ([O'Callaghan and Davidson 2013](#)) as a cry of foul play on Michael Davidson's removal from the psychotherapists' register of trainee professional membership under the direction of the United Kingdom Council for Psychotherapy (UKCP).

"They have ruined the life of a caring and courageous counsellor. It is not that a bad therapist has been tried against good ethical principles; rather, a good man has been tried against bad principles. This is a wake-up call for all who value justice, including justice for the group of people who are despised by some for feeling same-sex attraction, and by others for wanting to reduce it..." Dermot O'Callaghan, quoted in ([Christian Concern 2013](#)).

As with the idea of self-determination, the concept of justice to which O'Callaghan is referring is not explicitly theorised. (Nor is justice defined in Michael Davidson's collection of testimonies *The Right to Decide: Seeking Justice for choices around unwanted same-sex attractions* ([Davidson 2012b](#))).

The striking theme for me in this paragraph is the polarisation. Davidson is a 'good man'; the principles are 'bad' (and if Davidson had been a 'bad' therapist tried against 'good' ethical principles, the result would have been just). In this black-and-white picture that O'Callaghan paints, there is no nuance. If Davidson is a good man—and he must be, because he is profoundly religious and he sincerely cares about his clients—then the ethics code must be bad. This depiction has no room for a sincere but mistaken belief, for example.

In contrast, the idea of justice evidenced by the APA's Task Force is much more sophisticated, ethically-informed, and draws attention to the way in which a person or organisation's context (such as possessing heterosexual privilege in a heteronormative world) impacts on our understandings of justice, rights and dignity ([APA 2009](#), pp. 68–70).

4.7. Rights Claims

4.7.1. There is a Right to (Attempt to) Change Unwanted Same-Sex Attraction

Core Issues claims that:

In foregrounding controversy about so called 'conversion', 'reparative' or 'gay cure' approaches, the memorandum obscures the real issue: the freedom and rights of autonomous individuals to explore, with the help of professionals, the origins of their unwanted homosexual feelings and the degree to which these feelings may be subject to change, whether these are inborn, the result of abuse or acquired through behavioural patterning ([Core Issues Trust 2014f](#)).

A claim to rights is made in NARTH's material, both explicitly: 'Supporting every client's right to live a life congruent with their freely chosen values!' ([NARTH Institute 2016](#)), and implicitly: 'the Alliance responds to the President's call for ending therapeutic choice for adolescents and their families' ([NARTH Institute 2016](#)).

As with self-determination and justice, the concept of rights proffered is not theoretically informed. The claim to have a right to SOCE is a simplistic claim that 'I have a right, therefore I ought to be allowed to . . . ' In particular, there is no recognition of the issue of competing rights (such as the right of the LGB community to be free from discrimination). This more complex discussion will be resumed below, in relation to the legal cases.

4.7.2. Ex-Gay and Post-Gay Identities Have a Right to Protection

Core Issues claims that LGBT identities are favoured at the expense of other sexual orientations (Core Issues Trust 2014e; Core Issues Trust 2015a):

An event at the European Parliament [. . .] will be held Tuesday 28th October, 2014 entitled “Tackling Sexual Orientation and Gender Identity Discrimination: Next steps in EU and Member State policy making”. But will the event again single out LGBT issues and ignore other sexual orientations, including those of persons who experience homosexual behaviours and feelings as past, and consider their sexual orientations and identities to have changed? (Core Issues Trust 2014e)

No doubt Core Issues wishes ex gay identities to be recognised. The reference to other excluded orientations (as well as ex-gay) gives their plea more legitimacy by avoiding the appearance of special pleading. However, it seems unlikely that they are serious about the recognition of other excluded sexual orientations: this would arguably include nonmonogamy as an orientation, and kink: see (Ozimek 2010).

Recognition of ex-gay identities is implicit in Core Issues’ protest against the Counsellors and Psychotherapists (Regulation) Bill 2014–2015, which would have made it an offence ‘for any person to practise, or to offer to practise, gay to straight conversion therapy’ (Davies 2014). ‘There are no exceptions to this ban: not even individuals in opposite sex marriages wishing to remain in their relationship so as to maintain their homes and families, or those who hold to traditional Judaeo-Christian values’ (Core Issues Trust 2014g).

This appeal to pathos however, is disingenuous. Had the Bill become statute, individuals, married or not, who are conflicted about their feelings of attraction for another person, same-sex or otherwise, would be free to access advice and therapy to help them decide what to do. The restriction would have been on conversion therapy specifically, i.e., therapy aiming to diminish or eliminate same-sex attractions. There is also no prohibition in the Bill on any person identifying as ‘ex-gay’: the proscription concerned therapists practicing or offering to practise conversion therapy. Michael Davidson’s practice would have been threatened by the Bill had he not already been removed from the UK register of trainee psychotherapists.

The legal aspect of the recognition of ex-gay identities will be discussed below.

4.8. Distancing of Organisation

Both organisations distance themselves from undesirable attitudes and practice. Core Issues says the Church should treat people who experience same-sex sexual attraction with love and understanding, not intimidation or violence. And, the Church should also encourage same-sex attracted people to try to live their lives in accordance with (a conservative interpretation of) Biblical principles (Core Issues Trust 2013). Although this statement calls for love and understanding, it is evident from Core Issues’ other material that the love is somewhat conditional: same-sex attracted persons *should* seek to live as heterosexual a life as possible. Whether this position can genuinely be categorised as one of understanding is debatable.

NARTH seems less grudging. It condemns ineffective and unprofessional treatment for SSA such as electric shock aversion therapy and exposure to pornography (NARTH Institute 2016). This liberal-sounding statement is a careful condemnation of specific treatments, rather than SOCE itself. NARTH also censures the intimidation of gay young people and homosexual adults in various parts of the world (Alliance for Therapeutic Choice and Scientific Integrity 2016), identifying these groups as having gay identities rather than as experiencing same-sex attraction (see the discussion of terminology, below).

In all of these examples, the organisations distance themselves from acts of hate against same-sex attracted persons. This has the effect of positioning the organisations away from the ‘anti-gay’ end of the spectrum, and away from accusations of prejudice. A careful reading of their statements makes it

clear that they do not condemn other actions and attitudes that would normally be associated with criticism of aversive electro-shock therapy etc.: e.g., NARTH disapproves of various means of SOCE, but not the practice of SOCE itself. Core Issues would seem to understand SOCE as part of the process of encouraging people to live in accordance with their particular understanding of Biblical principles.

4.9. Respecting Diversity

A theme related to distancing the organisation from the accusation of prejudice, is that of respecting diversity: an organisation that is not prejudiced is one which respects the rights and identities of others.

I have discussed NARTH's claim to multicultural competence above, as a marker of reputable practice. Reputable psychotherapeutic practice includes respecting 'the dignity and worth of all people, and the rights of individuals to privacy, confidentiality, and selfdetermination' (APA 2016), reproduced in (NARTH Institute 2016). As part of their reputable practice, NARTH claims to respect the dignity, worth and rights of gay (and other) people.

A similar claim is made by Core Issues Trust:

It [Core Issues Trust] respects the rights of individuals who identify as 'gay' who do not seek change, and supports dignity for LGBT persons. It does not support gay "marriage"—usually considered an "equality" issue, premised on the belief that being gay is "biological" and is therefore unchangeable. Core Issues Trust offers one-to-one support for individuals voluntarily seeking to leave homosexual behaviours and feelings. Please read our "Statement on Prejudice". The Royal College of Psychiatrists (2014) has recently affirmed that human sexuality is fluid for some, and therefore changeable in some cases (Core Issues Trust 2016a).

Although Core Issues claims to respect the rights of gay individuals and LGBT persons, this 'respect' is clearly hedged around with qualifications. Gay people are 'gay', i.e., so-called 'gay' rather than truly gay as an identity, because Core Issues does not recognise gay identities as real (instead, this is 'same-sex attraction disorder' (Core Issues Trust 2016c)). Gay marriage is 'marriage', not real marriage, and Core Issues does not support the right for same-sex people to enter into equivalent legal relationships as different-sex couples. Core Issues supports those wishing to rid themselves of same-sex attraction and behaviour. It is somewhat analogous to Core Issues claiming they respect the rights of people to drink coffee instead of tea, but they refuse to take seriously the identity of 'coffee lovers', do not support the provision of coffee as well as tea in cafes, campaign against the availability of coffee on equal terms with tea, and offer support to people wishing to leave their coffee-attracted behaviours and feelings—but do not do so for those with a preference for tea. The only possible account for such differential behaviour is that Core Issues do *not* really respect coffee drinkers, or same-sex attracted people.

Likewise, their claim to respect and dignity for LGBT persons seems empty. It doesn't sit well with their invention of 'same-sex attraction disorder': Core Issues does not believe the self-understanding and identity of LGB(T) people to be true and normal—they have a disorder. It also doesn't sit with claims of homosexual indoctrination, or that psychological professional bodies are operating with a pro-LGBT ideology: there is a consistent refusal to recognise that LGBT people and their allies could be in the right. A very recent anti-trans blog post by 'Rebel priest' Rev Jules Gomes (Gomes 2016a), in which he asserts 'gender lunacy is now hallowed dogma', has its own summary page on the Core Issues site, entitled 'Gender is an objective fact, not some batty whim' (Gomes 2016b). This belies any claim to respect for trans people.

4.9.1. Use of Respectful Terminology?

NARTH and Core Issues Trust fairly consistently refer to ‘people experiencing same-sex attraction,’ or ‘homosexual attractions,’ not ‘gays’ (usually considered to be offensive when used as a noun rather than an adjective) or ‘gay people’ (which is generally acceptable).

In many ways these look like respectful appellations, and are reminiscent of inclusive language associated with pro-LGBT therapists and cultural competence. ‘Same-sex’ is often more inclusive in its application than ‘gay’: for example, ‘same-sex marriage’ includes bisexual people marrying a person of the same sex, whereas ‘gay marriage’ obscures the existence of bisexual people (implies that people are either gay or straight), and also masks the existence of lesbian women, as ‘gay’ is always understood to include gay men, but only sometimes gay women. ‘Homosexual attractions’ ([Alliance for Therapeutic Choice and Scientific Integrity 2016](#)) is less acceptable in LGBTQ-affirming circles: GLAAD describes ‘homosexual’ as an ‘outdated clinical term considered derogatory and offensive’ ([GLAAD 2016](#)).

Despite its superficial inclusivity, I suggest that NARTH’s and Core Issues’ use of ‘same-sex attraction’ is a marker of *lack* of respect. The focus on attraction and behaviour seems a deliberate refusal to recognise gay identities, that is, the recognition of gay people’s self-understanding as a valid way of being. This is on a par with Core Issues’ ‘same-sex attraction disorder’ as a substitute for being gay, and NARTH’s ‘homosexual attractions and other sexual addictions and behavioral challenges’ ([Alliance for Therapeutic Choice and Scientific Integrity 2016](#)).

4.9.2. Progressive Language

In a number of places, Core Issues and NARTH employ terminology and concepts that are associated with progressive (pro-LGBT) worldviews. People ‘speak *their* truth’ (my emphasis) ([Davidson 2012a](#), p. 9), rather than *the* truth. Core Issues worries about SOCE practitioners being subject to hate speech ([Core Issues Trust 2014h](#)). Sexuality is fluid, rather than fixed ([Rosik n.d.](#)). I return to the significance of progressive markers in the discussion section, below.

4.10. Clear Vision

It is common in the material of both organisations to encounter the claim or inference that they are the ones who see clearly, in comparison to mainstream opinion.

4.10.1. Wise Overseer

NARTH, in particular, often has the benign and quietly authoritative tone of a wise overseer:

Finally, it also needs to be observed that reports on the potential for sexual orientation change may be unduly pessimistic based on the confounding factor of type of intervention. Most of the recent research on homosexual sexual orientation change has focused on religiously mediated outcomes which may differ significantly from outcomes derived through professional psychological care. It is not unreasonable to anticipate that the probability of change would be greater with informed psychotherapeutic care, although definitive answers to this question await further research. The Alliance and the NARTH Institute remain highly interested in conducting such research, pursuant only to the acquisition of sufficient funding ([NARTH Institute 2012](#)).

A similar tone is found in Davidson’s introduction to a collection of narratives from people experiencing unwanted same-sex attraction:

This book provides a space for such voices to speak their truth from the safest position they can find: anonymity ... these voices convey the complexity and vulnerability of human sexuality ([Davidson 2012a](#), p. 9).

4.10.2. Holding to Account

Core Issues writes in many different registers in different pages and documents. In a significant number of instances, the tone of many of their interventions is nearer to a superior 'we are right; you are wrong'. A number of comments on the position of the Royal College of Psychiatrists provide an illustration of this.

First, 'Pilling Report vindicates criticisms of Royal College of Psychiatrists by Core Issues Trust' the Trust declares ([Core Issues Trust 2015a](#)). This story begins a little earlier, when The Royal College made a submission to the Pilling Enquiry (the House of Bishops Working Group on Human Sexuality, chaired by Sir Joseph Pilling, resulting in the Pilling Report ([Working Group on Human Sexuality 2013](#))), explaining that discrimination in society and possible rejection accounted for the greater incidence in mental health problems among LGB people. Core Issues countered with their own submission, saying that the papers cited by the Royal College did not in fact support their position on societal factors, and that lifestyle issues were more likely implicated in psychological disorders in LGB people. The Working Group assumed that the current scientific evidence neither proved or ruled out social prejudice (the Royal College's view) nor the idea that homosexuality 'and all it entails cuts against a fundamental, gender-based given of the human condition, thus causing distress' (the Core Issues view) as a cause for LGB health issues ([Working Group on Human Sexuality 2013](#), para. 208). This is the 'vindication' to which the headline above refers.

However, as Cook points out, the Working Group did not critically evaluate Core Issues' submission (which runs counter to the widely accepted scientific view, itself based on peer-reviewed material). Cook concludes:

Having consulted the peer-reviewed primary-research papers on which the opposing viewpoints are based, I find it hard to avoid the conclusion that Core Issues Trust has simply marshalled scientific evidence in support of a position that has been previously determined by a particular interpretation of scripture. Thus, the point of view that it promotes is not so much based on scientific evidence as it is an apologetic for a theological tradition ([Cook 2014a](#)).

Secondly, Core Issues take another pot-shot at the Royal College over the origins of same-sex attraction:

This [the Royal College of Psychiatrist's position that same-sex attraction is not fully determined at birth] is a remarkable development and underlines the need to hold influential professional bodies to account by confronting them with the reality of the scientific evidence so that those they represent can have full confidence in the positions they adopt ([Core Issues Trust 2014c](#)).

There are a number of points of interest here. Core Issues evidences a kind of role-reversal regarding expert professional bodies: instead of trusting the experts' conclusion on their area of expertise, it seems Core Issues does not trust what the experts say until the experts agree with them. This paragraph also misrepresents the nature of scientific (and other types of) understanding: conclusions can change as our understanding improves or deepens; this does not entail a dramatic climb-down as the Trust describes it.

Additionally, this holding to account is rather selective. In the opening paragraph of their statement, the Royal College of Psychiatrists state:

[The College] considers that sexual orientation is determined by a combination of biological and postnatal environmental factors. There is no evidence to go beyond this and impute any kind of choice into the origins of sexual orientation (references omitted) ([Royal College of Psychiatrists 2014](#)).

Core Issues Trust ([Core Issues Trust 2014c](#)) and the Gagnon piece ([Gagnon 2014](#)) to which they provide a link conveniently ignore this second sentence, and assume that if one is not straightforwardly 'born gay', then gay identity and attraction must be a choice.

The Royal College of Psychiatrists' statement about the combination of biological and postnatal environmental factors is supported by three research articles in particular: Mustanski et al. ([Mustanski et al. 2005](#)), Blanchard et al. ([Blanchard et al. 2006](#)), and Bailey et al. ([Bailey et al. 2000](#)). Mustanski et al.'s article identifies areas of genetic interest resulting from the first full genome scan for male sexual orientation. Blanchard et al.'s paper investigates evidence for interactions between two well-established factors in the aetiology of male homosexuality: left-handedness, and having older brothers. Both of these conditions are thought to result from changes in the uterine environment. Of the three articles, only Bailey et al. is concerned with environmental influences on sexual orientation (and this was the only article concerned with female, as well as male, homosexuality). One would expect, therefore, that Core Issues Trust would pay close attention to this paper, if their claims to scientific truth and integrity are genuine.

Yet the nuances from the scientific research are absent from Core Issues Trust's account. Bailey et al. caution: '[a]s is clear from the confidence intervals of the univariate parameter estimates, however, only fairly general statements about genetic and environmental influences can be made with confidence' ([Bailey et al. 2000](#), p. 533)—in other words, familial *and* genetic factors seem to be involved in a person's homosexuality, but it is not clear in which proportion. Moreover, 'we do not know what the relevant environment for sexual orientation is' ([Bailey et al. 2000](#), p. 534). Core Issue's assertion that 'Science suggests that most of them [people who experience same sex sexual attraction] "became that way" as a result of real or perceived traumatic experiences in early life' ([Core Issues Trust 2013](#)) does not fit with the real science underpinning the Royal College of Psychiatrists' 'climb-down' that Core Issues celebrated ([Core Issues Trust 2014c](#)).

An additional complicating factor that is ignored by Core Issues Trust is that the incidences of nonheterosexual attraction experienced by men and women in Bailey et al.'s study were strikingly different: women showed a greater tendency to have slight to moderate same-sex attraction, whereas men 'were more likely to be nearly exclusively homosexual' ([Bailey et al. 2000](#), pp. 528–29). Their analysis '... provided evidence that male and female sexual orientation should be analyzed separately and probably require different theoretical accounts' ([Bailey et al. 2000](#), p. 533). Core Issues Trust neither acknowledges a difference in the distribution of same-sex attraction between men and women (Though a piece by May ([May 2014](#), p. 15) on their 2015 home page ([Core Issues Trust 2015a](#)) does note that sexual fluidity in women and young people is 'particularly well-documented'), nor the likely contribution of this difference to findings about sexual fluidity. Sexual fluidity is a cornerstone of Core Issues' current position: 'The Trust considers human sexuality in both men and women to be fluid,' which gives the opportunity for change ([Core Issues Trust 2013](#)). Yet if women have a greater incidence of bisexuality, women in same-sex relationships, or who identify as lesbian, may already be attracted to both men and women, and therefore apparently 'change' their sexual attraction, or its expression.

In sum, Core Issues' claims to hold scientists to account ring rather hollowly. To slightly misquote Cook ([Cook 2014a](#)), I find it hard to avoid the conclusion that Core Issues has conveniently ignored the science that does not support their position, and made unsubstantiated claims of the evidence that might be more favourable to them. This seems to continue their pattern of providing an allegedly scientific apologetic for what is really a theological position.

4.10.3. Disaster and Conspiracy

Another theme from both websites is that of impending disaster. In NARTH's case, this was more likely to be the view of articles linked from their web page ([NARTH Institute 2016](#)), such as O'Leary's piece on the spread of HIV due to the actions of pro-LGBT activists ([O'Leary 2015](#)). In Core Issues' case, disaster was a prominent and repeated theme in its own material and the links provided.

O'Callaghan described the UKCP's prohibition on its members practising SOCE as having 'a sinister Orwellian ring to it and [denying] clients the right to shape their own sexual preferences' (([Christian Concern 2013](#)); linked from ([Core Issues Trust 2016d](#))).

According to Core Issues, the Counsellors and Psychotherapists (Regulation) Bill was not really about therapist ethics:

In reality what we see in the motive of this Bill, is brazen determination that all UK citizens, regardless of whether they are of a faith or no-faith background, be forced to embrace a socialisation process that seeks to overthrow Judaeo-Christian values that have underpinned the western world for centuries. This is further evidence of the rise of the pansexual agenda, and a return to a pre-Christian world ([Core Issues Trust 2014g](#)).

And

Core Issues Trust believes that the present Bill is a wake-up call to both Church and State of the imminent danger that we may lose some important freedoms not on grounds of scientific evidence but because of ideological pressure ([Core Issues Trust 2014g](#)).

The culture of western civilisation itself is under threat ([Core Issues Trust 2016a](#)), as is religious freedom (([Concern 2014](#)), linked from ([Core Issues Trust 2016d](#))).

5. Legal Cases

The two sets of proceedings I focus on are, for *Core Issues Trust v Transport for London*, the first instance case ([Core Issues Trust v TfL \[2013\]](#)) and appeal case ([R v TfL \[2014\]](#)) and ([Beyleveld 1992](#)) and the appeal case for *Pickup v Brown* (2014). *Pickup v Brown* has a very lengthy list of case proceedings: for a full list see ([United States Courts for the Ninth Circuit 2014](#)).

I provide a summary of the cases and refer to the legal arguments relevant to my discussion. This discussion is not intended to be a comprehensive legal analysis of the cases: for further consideration of *Pickup*, see ([McHale-Farsai and Williams 2013](#); [Fore 2014](#); [Travis 2014](#); [Winkler 2015](#)); for brief summaries of *Core Issues Trust*, see ([Giles 2014](#); [Hopkins 2015](#); [Public Law 2014](#)).

5.1. *Core Issues Trust v Transport for London*

Core Issues Trust and Anglican Mainstream⁸ had placed an advert with CBS Outdoor UK, an external contractor who enters into arrangements with bus operators. The advert,

"NOT GAY! EX-GAY, POST-GAY AND PROUD. GET OVER IT!

www.anglican-mainstream.net www.core-issues.org"

was in response to an earlier Stonewall UK campaign:

"SOME PEOPLE ARE GAY. GET OVER IT!"

which had appeared on Transport for London's (TfL) buses. TfL refused to run the Core Issues/Anglican Mainstream advert on the grounds that it was contrary to its advertising policy.

Core Issues submitted that TfL had abused its statutory powers for an improper purpose, and that the real reason for the ban was the impending Mayoral election in which Boris Johnson aimed to get re-elected. The Judge at first instance, the Honourable Mrs Justice Lang, held that Johnson had influenced the decision, and that it was proper for him to be involved in the process as TfL Chair (though it would not have been, if he had acted in order to advance his election campaign). Core Issues contended that the decision was in an over-hasty manner, and without

⁸ Another conservative Christian organization in the UK.

proper consideration of the human rights of Anglican Mainstream and the Trust. The Judge agreed ([Core Issues Trust v TfL \[2013\]](#), para. 67).

5.1.1. The Right to Freedom of Expression

The Trust argued that the removal of the advert was a violation of its right to freedom of expression under the European Convention on Human Rights (ECHR):

Article 10.1: Everyone has the right to freedom of expression. This right shall include freedom to hold opinions, and to receive and impart information and ideas without interference by public authority and regardless of frontiers ([Council of Europe 2010](#)).

Qualifications to this right are found in Article 10.2:

2. The exercise of these freedoms, since it carries with it duties and responsibilities, may be subject to such formalities, conditions, restrictions or penalties as are prescribed by law and are necessary in a democratic society, in the interests of national security, territorial integrity or public safety, for the prevention of disorder or crime, for the protection of health or morals, for the protection of the reputation or rights of others, for preventing the disclosure of information received in confidence, or for maintaining the authority and impartiality of the judiciary ([Council of Europe 2010](#)).

The judge at first instance accepted that Article 10.1 was engaged in the case, and that freedom of expression is a primary right in a democratic society ([Core Issues Trust v TfL \[2013\]](#), para. 98).

In withdrawing the advert, the judge found that Transport for London had been motivated by the desire to protect the private and family life of gay people. Article 8.1 states that:

Everyone has the right to respect for his private and family life, his home and his correspondence ([Council of Europe 2010](#)).

As a public body, it was under a positive statutory obligation to protect the rights of gay people ([Equality Act 2010](#), s. 149), which the judge also considered to be a legitimate aim under Article 10(2) of the ECHR ([Core Issues Trust v TfL \[2013\]](#), para. 91).

The remaining question around Article 10 was whether the interference with the Trust's freedom of expression was necessary in a democratic society: whether the means employed were proportionate to the aim, and whether the interests of the community and the protection of the individual's rights had been balanced fairly. The judge considered that Transport for London's advertising policy, restricting material 'likely to cause widespread or serious offence', met the test of necessity. Though those wishing to promote an offensive or controversial message had the right to do so, they were able to express these views in a variety of ways already. It was proportionate to restrict advertising on buses ([Core Issues Trust v TfL \[2013\]](#)). Moreover, the material of the Trust's advert was likely to cause offence to a significant number of people, and to interfere with gay people's right to respect for their private life under Article 8.1. It was also liable to encourage homophobic views, and thus endanger gay people. In sum, the Trust's decision not to run the advert was justified and proportionate in protecting the rights of others ([Core Issues Trust v TfL \[2013\]](#), paras. 138–48).

5.1.2. Discrimination against Ex-Gay People

The Trust submitted that Transport for London discriminated against ex-gay people; that these are a class of persons protected by the Equality Act 2010). The relevant provision is as follows:

12 Sexual orientation

- (1) Sexual orientation means a person's sexual orientation towards—
 - (a) persons of the same sex,

- (b) persons of the opposite sex, or
 - (c) persons of either sex.
- (2) relation to the protected characteristic of sexual orientation—
- (a) a reference to a person who has a particular protected characteristic is a reference to a person who is of a particular sexual orientation;
 - (b) a reference to persons who share a protected characteristic is a reference to persons who are of the same sexual orientation (Equality Act, s. 12).

The judge rejected this submission on two grounds. The first was that the Trust is a corporate body, and therefore cannot have a sexual orientation ([Core Issues Trust v Tfl \[2013\]](#), para. 155). The second was that ‘ex-gay’ was not an orientation recognised by the Equality Act, which was concerned with homosexual, heterosexual and bisexual orientations only ([Core Issues Trust v Tfl \[2013\]](#), paras. 156–58).

The second human right claimed by Core Issues was that of Article 9:

1. Everyone has the right to freedom of thought, conscience and religion; this right includes freedom to change his religion or belief and freedom, either alone or in community with others and in public or private, to manifest his religious belief, in worship, teaching, practice and observance.
2. Freedom to manifest one’s religion or beliefs shall be subject only to such limitations as are prescribed by law and are necessary in a democratic society in the interests of public safety, for the protection of public order, health or morals, or for the protection of the rights and freedoms of others ([Council of Europe 2010](#)).

The trial judge believed that Article 9 was not engaged in this case. This was because the right to freedom of thought, conscience and religion could not be possessed by corporate entities. Additionally, the advert was motivated by a religion or belief—the advert did not express the belief itself, and was not required by the belief—but was not a manifestation of a belief. The latter, but not the former, would be protected by Article 9 ([Core Issues Trust v Tfl \[2013\]](#), paras. 160–65).

Permission was given to appeal to the Court of Appeal ([R v Tfl \[2014\]](#)).

The main judgment was that of the Master of the Rolls, Lord Justice Briggs. The Court agreed with the trial judge that Transport for London was entitled to withdraw Core Issues’ advert in order to protect the rights of others, and that its advertising policy complied with its public sector equality duty under the Equality Act 2010 ([R v Tfl \[2014\]](#), paras. 60–62). The restriction on the Trust’s right to freedom of expression (Article 10) was justified because of the proportionate nature of the restriction: it only applied to advertisements on buses. The advert would have been likely to encourage discrimination against gay people ([R v Tfl \[2014\]](#), paras. 83–65). Article 9 was not engaged ([R v Tfl \[2014\]](#), paras. 91–92).

The Master of the Rolls disagreed with the trial judge on the matter of ex-gay discrimination, which he addressed, even though this submission was not made at the appeal ([R v Tfl \[2014\]](#), paras. 95–98). Equality Act protection is extended not only to those having a particular orientation, but also to those subjected to less favourable treatment because they are perceived to be of a particular orientation. Lord Justice Briggs agreed with counsel for the Trust that

... it would be surprising if less favourable treatment because a person in the past was homosexual, but is now heterosexual, was not equally prohibited. This does not require that “ex-gays” are to be regarded as a separate category of sexual orientation. Discrimination against a person because of his or her past actual or perceived sexual orientation, or because his or her sexual orientation has changed, is discrimination “because of . . . sexual orientation”. There is no requirement in the [Equality Act] that discrimination must relate to a person’s current sexual orientation. All that is required is that the discrimination is ‘because of sexual orientation’ ([R v Tfl \[2014\]](#), para. 98).

Because this issue of Equality Act protection was not essential to (or submitted in) the appeal case, Lord Justice Briggs's remarks are *obiter dictum*, and not legally binding on future cases. However, the opinions of an eminent judge are often persuasive, and deserve consideration.

Mrs Justice Lang took a restrictive approach to the Equality Act's definition of sexual orientation: the list of homosexual, heterosexual, and bisexual was comprehensive, and if an orientation was not specified, it was not included. Lord Justice Briggs interpreted 'sexual orientation' more expansively, in a manner that suggests it could apply to any sexual orientation. Whether he understood that a full list of possible orientations would be much longer than adding 'ex-gay' to the gay, straight, and bi, list, is unclear.

At present, then, the recognition of an ex-gay identity in English law is unclear.

5.2. *Pickup v Brown*

Pickup et al. v Brown et al; Welch et al. v Brown et al ([Pickup v Brown \(2014\)](#)) was a case on appeal from the United States District Court for the Eastern District of California, heard in the United States' Court of Appeals for the Ninth Circuit.

The appeal was a consolidation of two cases concerning Californian Senate Bill 1172 (SB 1172), which bans state-licensed mental health providers from engaging in SOCE with people under the age of 18. Both cases sought to prevent the enforcement of SB 1172 on the basis that it violated their First Amendment rights to freedom of speech, and other constitutional rights. The cases were heard at first instance by different judges, with different results: in *Welch v Brown*, the plaintiffs were told by the District Judge that their claim was likely to succeed on its merits; in *Pickup v Brown*, the judge ruled that the plaintiffs were unlikely to succeed. The losing parties both appealed, and the cases were joined in this hearing. The panel, whose view was presented by Judge Graber, held that

SB 1172, as a regulation of professional conduct, does not violate the free speech rights of SOCE practitioners or minor patients [. . .] and does not violate parents' fundamental rights. Accordingly, we reverse the order granting preliminary relief in *Welch* and affirm the denial of preliminary relief in *Pickup* ([Pickup v Brown \(2014\)](#), p. 23).

5.2.1. Freedom of Speech

The argument that SB 1172 interfered with the rights to freedom of speech was dealt with swiftly. The panel held that only treatment was regulated, not speech: mental health providers were free to discuss and recommend SOCE, but not to actually provide it. This minor impact on free speech was justifiable if it bore a rational relationship to a legitimate state interest, which emphatically was the case when protecting the well-being of minors ([Pickup v Brown \(2014\)](#), pp. 42–43). It was noted that, in aiming to protect minors, the legislature relied on 'the well-documented, prevailing opinion of the medical and psychological community that SOCE has not been shown to be effective and that it creates a potential risk of serious harm to those who experience it' ([Pickup v Brown \(2014\)](#), p. 27).

5.2.2. Parents' Fundamental Rights for Their Child to Have SOCE

The explicit claim that it is part of a parent's fundamental rights for their child to have SOCE was made by counsel for David Pickup and others on behalf of minor clients and their parents ([Pickup v Brown \(2012\)](#), p. 12), and as parental rights alone ([Pickup v Brown \(2012\)](#), p. 32).

The Pickup plaintiffs argued that parents have the right to raise their children according to their own judgement. Counsel for the State agreed with this, but argued that the plaintiffs 'cannot compel the State to permit licensed mental health [professionals] to engage in unsafe practices, and cannot dictate the prevailing standard of care in California based on their own views' ([Pickup v Brown \(2012\)](#), p. 50).

The appeal panel was not convinced by the plaintiffs' claim: no case law existed addressing the question whether a parent has the fundamental right to choose a treatment that the State considers harmful. Case law *did* state that patients did not have the right to choose their own treatment. It would

therefore be strange if parents had a right over their children's treatment that they do not possess over their own. SB 1172 was held not to infringe the fundamental rights of parents ([Pickup v Brown \(2012\)](#), pp. 51–53).

The plaintiffs were unsuccessful in their claim that a prohibition on providing SOCE to minors was a violation of the therapists' rights or those of the parents.

6. Discussion

In this section I give further consideration to the most significant themes analysed above, addressing my research questions: how do these organisations further their claims and attempt to discredit those of the regulators, both major therapy professional bodies and providers and legal bodies? (How) do these organisations use the language of rights and diversity to further their aims? My answers to these questions are situated in the context of a backlash against social and sexual justice.

6.1. Legal Cases

The legal cases of *Core Issues Trust v Transport for London* and *Pickup et al. v Brown et al.* are obvious instances of Core Issues and NARTH's attempts to further their claims at the expense of those of the regulators, and of the use of rights language. Although, as I explained earlier, these bodies operate with an understanding of rights that is philosophical rather than purely legal (rights exist irrespective of their recognition by regulators), it is nonetheless important in a world ordered by political power to gain the recognition and approbation of the relevant power-holders. This became particularly important as organs of the state (the California Senate; Transport for London as a public body) threatened or curtailed the philosophical rights that NARTH and Core Issues believed they possessed.

Because legal proceedings must comprise an arguable case under some established legal principle or provision, it would be unrealistic to expect all of the themes from my analysis of the other documentation to be reflected in the following court cases. For this reason also, it would be unwise to draw any firm conclusions about the exclusion of certain arguments from the legal cases, or the priority given to the arguments included in the case. Notwithstanding this, the underlying themes in the cases are familiar: we have the right to tell the world about ex-gay identity and SOCE (freedom of expression); there should be no discrimination against ex-gay people; therapists have the right to practice SOCE (freedom of speech); the client's autonomy to choose SOCE should be respected (parents have the right to choose SOCE for their minor children).

6.2. Client Autonomy and Telic Congruence

Superficially, at least, Core Issues and NARTH make a plausible case for respecting client autonomy. It is possible to read Buss' autonomy analysis ([Buss 2013](#)) of short-term motives versus long term and stable commitments (short term motives may conflict with a person's longer term plans, and therefore not be a real representation of their autonomous choices) as applying to a religiously-motivated person: someone's short term same-sex attraction may not have the support of their long-term religious values and their desire to live in telic congruence. On this reading, SOCE would indeed be an exercise of true autonomy.

However, NARTH and Core Issues cannot truthfully claim to uphold client autonomy in a consistent manner because of their stance on trans issues. Where a person's long term plans are about trans identity and transition, this is not supported by these organisations. This inconsistency undermines their client autonomy claims: if one holds a principle as a matter of principle, it ought to be applied consistently. To maintain an inconsistency in its application suggests that there is some other value at work that dictates when the principle ought to apply or not—in which case, the principle is not the fundamental norm that it is claimed to be; instead it is a disguise for something else.

Moreover, telic congruence is not as simple as Core Issues and NARTH would have us believe. The research in this area points overwhelmingly to the impact of external and internal stigma (augmented by LGBT-disapproving environments) on the desire to undertake SOCE, which

undermines the idea of telic congruence as truly autonomous, at least in the contexts in which it is being applied here, no matter how long-standing this desire might be.

6.3. *Smokescreen*

The sum of my analysis above, namely the selective use of science in support for SOCE; the inconsistency in supporting client autonomy; the general refusal to recognise gay identities as valid; the maintaining of the view that same sex attraction is a disorder of some kind that calls for personal growth towards heterosexuality; leads me to the conclusion that NARTH and Core Issues are not in fact interested in respecting autonomy and diversity unless what counts as autonomy and diversity corresponds precisely with their socially conservative values. These values are centred round rigid ideas of sexuality and gender that are at least strongly associated with conservative Christianity (NARTH), if not directly derived from conservative interpretations of Christian scripture (Core Issues).

If this is the case, how do we account for NARTH and Core Issues' insistence on conceptions and terminology—autonomy; science; progressive language—that are highly valued in secular society? To my mind, the most plausible explanation is that this is a deliberate and instrumental means of furthering their socially conservative goals.

If I am correct, this must cast doubt not only on the integrity of their discussion and argument, but also on the possibility of engaging in real dialogue and argument with them. If their conclusions are not in fact examples of principled decision-making based on a genuine reading of science and understanding of autonomy, but instead a series of ex-post facto 'justifications' for a conclusion that has already been reached, there is no possibility of true debate. Thus, any alleged discussion between SOCE proponents and those opposed to SOCE ceases, on Core Issues' and NARTH's part at least, to be a discussion in which arguments are carefully established, analysed and followed to their conclusion. It is instead an exercise in persuasion and propaganda.

6.4. *Backlash: Reshaping Reality*

This article situates my study of NARTH and Core Issues within the context of a backlash against social and sexual justice. As I suggested above, if we accept that our realities—social, political, professional, legal—are shaped by values, and that power and privilege habitually prevail (Mertens 2007), p. 212), it is imperative to recognise which voices, groups and norms have power.

The current political and social situation in the West, at least, has much to celebrate in its recognition of LGBT identities and rights. And yet, there are important shortfalls in current legal protection for LGBT people. The impending shift of political climate in the US looks unlikely to be positive for LGBT people. Changes in the UK political landscape such as Britain's exit from the European Union (Brexit) are likely to have an impact on rights in the UK in general. How this will affect LGBT rights specifically is unclear, though it is worth remembering that the major advances in diversity rights in the last twenty years have their origins in European Union and Council of Europe provisions (Clucas 2012, pp. 938–39; Kollman and Waites 2011). Although it is comforting to think that our current political and social situation is an important highpoint on an inevitably ascending trajectory of progressive sexual justice, this might not be the case. Perhaps our present position is a significant summit on an expedition that is vulnerable to the possibility of abandonment: instead of making further progress, our societies may instead return to a conservative base camp.

In times of political uncertainty and shifting priorities, it becomes even more important to notice, understand, and counter threats to social and sexual justice; in this case a resurgence of religiously justified heteronormativity. Our understandings of the world are constituted by the specific nature of our situatedness in the contingent past and present (Gergen 1985). If we do not expose and counter the ways in which conservative Christian organisations such as NARTH and Core Issues are attempting to reshape our social and political realities, in the West and beyond, we may find LGBT-positive worldviews diminished and invalidated.

7. Conclusions

In this article, I have situated the practice of sexual orientation conversion efforts within historical, cultural, religious and political attitudes to non-heterosexuality. Using documentary analysis, I have investigated the contemporary resistance of NARTH and Core Issues Trust to increasing regulation, professional and legal, of the SOCE which they advocate. My study has made evident the salient themes from my material. The most convincing of these themes is a claim that to provide SOCE is to respect client's autonomy rights to diminish unwanted sexual attraction, and to live in accordance with the moral principles that they value. I have shown that this claim fails to take into account the contextual influence of internal and external stigma on a client's desires. I have also demonstrated that neither NARTH nor Core Issues are consistent in their regard for client autonomy, as they both claim that trans people are disordered, and in need of treatment, not gender reassignment and political recognition. I suggest that the most plausible reason for these organisations' emphasis on autonomy and other secular tropes, such as scientific proof and progressive language, is that they provide a smokescreen ex-post facto justification for conservative Christian values. If we value a world of LGBT rights and recognition, we must counter this backlash against sexual and social justice.

Acknowledgments: I gratefully acknowledge the support of the University of Hull's research leave scheme, which enabled me to undertake this study in Semester 1 of the academic year 2016–2017.

Conflicts of Interest: The author declares no conflict of interest.

References

- Adams, John N., and Roger Brownsword. 2006. *Understanding Law*, 4th ed. Thompson: Sweet and Maxwell.
- Alliance for Therapeutic Choice, Scientific Integrity. 2015a. Statement on Faith and Therapy for Unwanted Same-Sex Attractions and Behaviour. *Therapeutic Choice*. Available online: <http://www.therapeuticchoice.com/ethics-family--faith-division> (accessed on 19 December 2016).
- Alliance for Therapeutic Choice, Scientific Integrity. 2015b. *Statement on the ACC's Removal of Core Issues Trust from Membership*. Salt Lake City: Alliance for Therapeutic Choice and Scientific Integrity. Available online: http://www.core-issues.org/UserFiles/File/Statements/Statements_2014/Alliance_Statement_on_the_ACC_removal_of_CITrevised_21_Jan_2015_pdf (accessed on 9 September 2016).
- Alliance for Therapeutic Choice, Scientific Integrity. 2015c. NARTH Institute: The Clinical, Research and Medical Divisions of the Alliance for Therapeutic Choice. *Alliance*. Available online: <http://www.therapeuticchoice.com/> (accessed on 9 September 2016).
- Alliance for Therapeutic Choice and, Scientific Integrity. 2016. Available online: <http://www.therapeuticchoice.com/> (accessed on 9 September 2016).
- American Psychiatric Association. 2000. Position Statement on Therapies Focused on Attempts to Change Sexual Orientation (Reparative or Conversion Therapies). Available online: <https://www.psychiatry.org/psychiatrists/search-directories-databases/policy-finder> (accessed on 25 October 2016).
- American Psychiatric Association. 2016. Diagnostic and Statistical Manual of Mental Disorders. Available online: <http://www.dsm5.org/psychiatrists/practice/dsm> (accessed on 31 December 2016).
- American Psychoanalytic Association. 2000. *American Psychoanalytic Association Policy on Sexual Orientation Change Efforts*. New York: American Psychoanalytic Association.
- American Psychoanalytic Association. 2012. Position Statement on Sexual Orientation, Gender Identity, and Civil Rights. Available online: <http://www.apsa.org/sites/default/files/2012%20Position%20Statement%20on%20Sexual%20Orientation%2C%20Gender%20Identity%2C%20and%20Civil%20Rights.pdf> (accessed on 1 December 2016).
- American Psychological Association. 2011. Position Statement on Homosexuality, Reaffirmed July 2011 First Published 1992. Available online: <https://www.psychiatry.org/psychiatrists/search-directories-databases/policy-finder> (accessed on 25 October 2016).
- American Psychological Association. 2002. Guidelines on Multicultural Education, Training, Research, Practice, and Organizational Change for Psychologists. Available online: http://dpi.wi.gov/sites/default/files/imce/crc/pdf/c2_multicul_gdln.pdf (accessed on 23 December 2016).

- American Psychological Association. 2016. Ethical Principles of Psychologists and Code of Conduct. Available online: <http://www.apa.org/ethics/code/index.aspx> (accessed on 21 December 2016).
- Anton, Barry S. 2010. Proceedings of the American Psychological Association for the Legislative Year 2009: Minutes of the Annual Meeting of the Council of Representatives and Minutes of the Meetings of the Board of Directors. *American Psychologist* 65: 385–475. [CrossRef]
- APA. 2009. *Report of the American Psychological Association Task Force on Appropriate Therapeutic Responses to Sexual Orientation*. Arlington County: APA.
- Arthur, Elizabeth, Dillon McGill, and Elizabeth H. Essary. 2014. Playing It Straight: Framing Strategies among Reparative Therapists. *Sociological Inquiry* 84: 16–41. [CrossRef]
- Association of Christian Counsellors. 2012. *An ACC Statement to Its Members December 2012*. Coventry: Association of Christian Counsellors.
- Association of Christian Counsellors. 2014. *An ACC Statement to Its Members January 2014*. Available online: http://www.acc-uk.org/public/docs/ACCBoard/ACC_statement_to_its_members_January_2014.pdf (accessed on 9 September 2016).
- Association of Gay and Lesbian Psychiatrists. n.d. *Positions Statements*. Available online: <http://www.aglp.org/pages/position.html#Anchor-55000> (accessed on 29 November 2016).
- Bailey, J. Michael, Michael P. Dunne, and Nicholas G. Martin. 2000. Genetic and Environmental Influences on Sexual Orientation and Its Correlates in an Australian Twin Sample. *Journal of Personality and Social Psychology* 78: 524–36. [CrossRef] [PubMed]
- Bailey, J. Michael, Paul L. Vasey, Lisa M. Diamond, S. Marc Breedlove, Eric Vilain, and Marc Epprecht. 2016. Sexual Orientation, Controversy, and Science. *Psychological Science in the Public Interest* 17: 45–101. [CrossRef] [PubMed]
- Bartlett, Annie, Glenn Smith, and Michael King. 2009. The Response of Mental Health Professionals to Clients Seeking Help to Change or Redirect Same-Sex Sexual Orientation. *BMC Psychiatry* 9: 11. [CrossRef] [PubMed]
- Bazeley, Pat. 2013. *Qualitative Data Analysis: Practical Strategies*. London and Thousand Oaks: SAGE Publications Ltd., p. 50.
- Berger, Peter L., and Thomas Luckmann. 1991. *The Social Construction of Reality: A Treatise in the Sociology of Knowledge*, New ed. London: Penguin.
- Bergin, Allen E. 1991. Values and Religious Issues in Psychotherapy and Mental Health. *American Psychologist* 46: 394. [CrossRef] [PubMed]
- Beyleveld, Deryck. 1992. *The Dialectical Necessity of Morality: An Analysis and Defense of Alan Gewirth's Argument to the Principle of Generic Consistency*, 2nd ed. Chicago: University of Chicago Press.
- Beyleveld, Deryck, and Roger Brownsword. 1994. *Law as a Moral Judgment*. Sheffield: Sheffield Academic Press, chp. 1.
- Steven, Bishop of Sheffield, and General Synod. 2014. General Synod Shared Conversations on Sexuality, Scripture and Mission. June 26. Available online: <https://www.churchofengland.org/media/2015811/gs%20misc%201083%20-%20shared%20conversations%20on%20sexuality,%20scripture%20and%20mission.pdf> (accessed on 22 December 2016).
- Blanchard, Ray, James M. Cantor, Anthony F. Bogaert, S. Marc Breedlove, and Lee Ellis. 2006. Interaction of Fraternal Birth Order and Handedness in the Development of Male Homosexuality. *Hormones and Behavior* 49: 405–14. [CrossRef] [PubMed]
- Boswell, John. 1980. *Christianity, Social Tolerance, and Homosexuality: Gay People in Western Europe from the Beginning of the Christian era to the Fourteenth Century*. Chicago: Chicago University Press.
- Bowen, Glenn A. 2009. Document Analysis as a Qualitative Research Method. *Qualitative Research Journal* 9: 27–40. [CrossRef]
- British Psychoanalytic Council. 2001. 6.2 Statement on Homosexuality. Available online: <https://www.bpc.org.uk/sites/psychoanalytic-council.org/files/6.2%20Position%20statement%20on%20homosexuality.pdf> (accessed on 1 December 2016).
- Burroway, Jim. 2009. NARTH Publishes Fake 'Study' In A Fake 'Journal'. *Box Turtle Bulletin*, July 6. Available online: <http://www.boxturtlebulletin.com/2009/07/06/13014> (accessed on 23 December 2016).
- Buss, Sarah. 2013. Personal Autonomy. In *The Stanford Encyclopedia of Philosophy*. Edited by Edward N. Zalta. Stanford: Metaphysics Research Lab., Stanford University. Available online: <https://plato.stanford.edu/archives/win2016/entries/personal-autonomy/> (accessed on 24 December 2016).

- Christian Concern. 2013. Ex-Gay Christian Counsellor Hounded out by Psychotherapist Associations. *Christian Concern*. Available online: <http://www.christianconcern.com/our-concerns/religious-freedom/ex-gay-christian-counsellor-hounded-out-by-psychotherapist-associatio> (accessed on 14 January 2015).
- Concern, Christian. 2014. Why the Bill to Ban ‘Gay Conversion Therapy’ Is Pernicious and a Threat to Christian Mission. *Christian Concern*. January 9. Available online: <http://www.christianconcern.com/our-concerns/sexual-orientation/why-the-bill-to-ban-gay-conversion-therapy-is-pernicious-and-a-threa> (accessed on 19 December 2016).
- Church of England Media Centre. 2014. Church of England News: Reflections on Shared Conversations Process ahead of College of Bishops. *Church of England News*, September 15. Available online: <https://www.churchofengland.org/media-centre/news/2014/09/reflections-on-shared-conversations-process-ahead-of-college-of-bishops.aspx> (accessed on 21 September 2015).
- Client Rights Division of the Alliance for Therapeutic Choice and Scientific Integrity. 2015. Client Rights of Autonomy and Self-Determination. *Core Issues Trust: Challenging Gender Confusion; Upholding Science & Conscience*. Available online: <http://www.core-issues.org/client-rights> (accessed on 31 December 2016).
- Clucas, Rob. 2012. Religion, Sexual Orientation and the Equality Act 2010: Gay Bishops in the Church of England Negotiating Rights against Discrimination. *Sociology* 46: 936–50. [CrossRef]
- Connell, Robert W. 1987. *Gender and Power: Society, the Person and Sexual Politics*. Cambridge: Polity Press.
- Cook, Chris. 2014a. Unanswered Questions on Pilling Report. *Church Times*, September 19, sec. Comment, p. 16.
- Cook, Chris. 2014b. As Dr Christopher Shell Has Noted. *Church Times*, October 10, sec. Letters, p. 14.
- Core Issues Trust. 2013. Core Issues Statement on Prejudice. Available online: <http://www.core-issues.org/statement-on-prejudice> (accessed on 17 December 2016).
- Core Issues Trust. 2014a. Faulty Survey Instrument and Data in Forms Fundamental Rights Agency Event: ‘Tackling Sexual Orientation and Gender Identity Discrimination. Next Steps in EU and Member State Policy Making’ in Brussels, Tuesday 28 October 2014. *Core Issues Trust: Challenging Gender Confusion; Upholding Science & Conscience*. October 28. Available online: http://www.core-issues.org/UserFiles/File/Statements/Statements_2014/FRA_LGBT_Survey_and_Tackling_S_Orientation_Final_27_October_2014_1.pdf (accessed on 14 December 2016).
- Core Issues Trust. 2014b. OSCE 2014—Erosion of Fundamental Freedoms in Britain. Available online: <http://www.core-issues.org/video/osce-2014-erosion-of-fundamental-freedoms-in-britain> (accessed on 15 December 2016).
- Core Issues Trust. 2014c. Psychiatrists in Climb-down on ‘Born Gay’ Claim. June 3. Available online: http://www.core-issues.org/UserFiles/File/Statements/Statements_2013/CIT_Statement_3_June_2013_Psychiatrists_climb_down_on_born_gay_claim.pdf (accessed on 16 December 2016).
- Core Issues Trust. 2014d. Response to Lunacek Briefing: ‘EU Roadmap against Homophobia and Discrimination on Grounds of Sexual Orientation and Gender Identity’ and Scheduled Vote in European Parliament 4th February, 2014. January 29. Available online: http://www.core-issues.org/UserFiles/File/Statements/Statements_2014/CIT_Statement_29_January_2014_Response_to_Lunacek_Briefing_.pdf (accessed on 19 December 2016).
- Core Issues Trust. 2014e. Riding Roughshod over ‘Ex-Gay’ Identities: Will the Fundamental Rights Agency Protect Sexual Orientations of Persons Who Are ‘Post-Gay’ and Their Rights to Access Therapeutic Support to Reduce Unwanted Feelings, and Behaviours? October 28. Available online: http://www.core-issues.org/UserFiles/File/Statements/Statements_2014/FRA_Discrimination_Against_Ex_gay_identity_and_Therapetic_Support_Final_27_October_2014.pdf (accessed on 14 December 2016).
- Core Issues Trust. 2014f. Statement by Core Issues Trust on the ‘Memorandum of Understanding on Conversion Therapy’. Available online: http://www.core-issues.org/UserFiles/File/Statements/Statements_2014/Statement_by_Core_Issues_Trust_18th_December_2014.pdf (accessed on 14 December 2016).
- Core Issues Trust. 2014g. Statement from Core Issues Trust the Counsellors and Psychotherapists (Regulation) Bill 2014–2015. December 3. Available online: http://www.core-issues.org/UserFiles/File/Statements/Statements_2014/CIT_Statement_3_December_2014_Counsellors_and_PSYchotherapists_Regulation_Bill_2014_2015.pdf (accessed on 15 December 2016).

- Core Issues Trust. 2014h. Statement on the UN Committee Against Torture 's Claim That Responsible Sexual Orientation Change Efforts (SOCEs) Make Use of Electro Shock Treatments. November 13. Available online: http://www.core-issues.org/UserFiles/File/Statements/Statements_2014/Core_Issues_Trust_Statement_on_UN_CAT_committee_13th_November_2014.pdf (accessed on 14 December 2016).
- Core Issues Trust. 2015a. Core Issues—Welcome to Core Issues Trust (Home Page January 2015). Available online: <http://www.core-issues.org/> (accessed on 14 January 2015).
- Core Issues Trust. 2015b. Appeal June 2015: Court Blocks Appeal of 'Banned Bus Ad' Case. Available online: <http://www.core-issues.org/appeal-june-2015> (accessed on 23 December 2016).
- Core Issues Trust. 2015c. Home Page November 2015. Available online: <http://www.core-issues.org/> (accessed on 26 November 2015).
- Core Issues Trust. 2016a. About Core Issues Trust. Available online: <http://www.core-issues.org/about> (accessed on 15 December 2016).
- Core Issues Trust. 2016b. Core Issues Mission: Public Benefits. Available online: <http://www.core-issues.org/how-our-work-benefits-society> (accessed on 23 December 2016).
- Core Issues Trust. 2016c. Core Issues Statement about Change. Available online: <http://www.core-issues.org/change-statement> (accessed on 17 December 2016).
- Core Issues Trust. 2016d. Core Issues—Welcome to Core Issues Trust Retrieved from Google 23/12/16. Available online: <http://www.core-issues.co.uk/> (accessed on 23 December 2016).
- Core Issues Trust. 2016e. Freedoms and 'Rights'. Available online: <http://www.core-issues.org/freedoms-and-rights> (accessed on 23 December 2016).
- Core Issues Trust. 2016f. Home Page 14 December 2016. December 14. Available online: <http://www.core-issues.org/index.php?mact=News,cntnt01,detail,0&cntnt01articleid=125&cntnt01returnid=15> (accessed on 14 December 2016).
- Core Issues Trust. 2016g. Media: Press Statements: 2015 Statements. Available online: <http://www.core-issues.org/2015-statements> (accessed on 23 December 2016).
- Core Issues Trust. 2016h. News. Available online: <http://www.core-issues.org/news> (accessed on 29 December 2016).
- Core Issues Trust. 2016i. UK Professional Mental Health Bodies. Available online: <http://www.core-issues.org/uk-professional-mental-health-bodies> (accessed on 14 December 2016).
- Core Issues Trust, and Mike R. Davidson. 2014a. The New Creed for Gay Science: A Consensus Statement from UK Mental Health Bodies. March 3. Available online: http://www.core-issues.org/UserFiles/File/Statements/Statements_2014/CIT_Statement_3_March_2014_UKCP_Consensus_Statement_Feb_2014_FINAL_1.pdf (accessed on 9 September 2016).
- Core Issues Trust, and Mike R. Davidson. 2014b. Core Issues Trust: Response to Association of Christian Counsellors Statement to Its Membership: 10 January 2014. January 10. Available online: http://www.core-issues.org/UserFiles/File/Statements/Statements_2014/CIT_Statement_10_January_2014_Response_to_ACC_1013_Statement.pdf (accessed on 9 September 2016).
- Core Issues Trust, Alliance for Therapeutic Choice and Scientific Integrity, and NARTH Institute. 2015. Joint Statement in Support of UK Minister Morgan's Call to End 'Gay Cure' Therapy: End Aversion Therapy Not Client Right to Informed Consent and Self-Determination. October 23. Available online: http://www.core-issues.org/UserFiles/File/Statements/CIT_and_Alliance_Statement_October_2015.pdf (accessed on 15 December 2016).
- Core Issues Trust. n.d. Association of Christian Counsellors: What Are the Essential Issues of Dispute? Available online: <http://www.core-issues.org/association-of-christian-counsellors-acc-> (accessed on 9 September 2016).
- Core Issues Trust v Transport for London*, [2013] EWHC 651 (Admin) (High Court of Justice, Queen's Bench Division, Administrative Court).
- Cornwall, Susannah. 2013. *Theology and Sexuality*. Norwich: SCM Press, p. 44.
- Council of Europe. 2010. Convention for the Protection of Human Rights and Fundamental Freedoms as Amended and Supplemented. Available online: http://heionline.org/hol-cgi-bin/get_pdf.cgi?handle=hein.journals/mjil10§ion=47 (accessed on 30 December 2016).
- Davidson, Michael R. 2012a. Introduction. In *The Right to Decide: Seeking Justice for Choices around Unwanted Same-Sex Attractions*. Edited by Michael R. Davidson. Ballynahinch: Core Issues Trust, p. 9.

- Davidson, Michael R. 2012b. *The Right to Decide: Seeking Justice for Choices around Unwanted Same-Sex Attractions*. Edited by Dermot O'Callaghan, Lynda Rose and Alan Craig. Ballynahinch: Core Issues Trust.
- Davidson, Michael R., and Core Issues Trust. 2013. Holding on to Choice. *Idea*, November–December, pp. 20–21. Available online: https://issuu.com/evangelicalalliance/docs/ideamag_novdec13_wr (accessed on 13 December 2016).
- Davidson, Michael R., and Core Issues Trust. 2014. Core Issues Trust Statement 31 December 2014: Refusal of Association of Christian Counsellors to Renew Core Issue Trust's Organisational Membership. December 31. Available online: http://www.core-issues.org/UserFiles/File/Statements/Statements_2014/Statement_by_Core_Issues_Trust_December_31st_2014_FINAL.pdf (accessed on 9 September 2016).
- Davies, Geraint. 2013. Counsellors and Psychotherapists (Regulation) Bill 2013-14. Pub. L. No. 120, 55/3. Available online: <http://www.publications.parliament.uk/pa/bills/cbill/2013-2014/0120/14120.pdf> (accessed on 6 January 2016).
- Davies, Geraint. 2014. Counsellors and Psychotherapists (Regulation) Bill 2014-15—UK Parliament. Pub. L. No. 78 2014-15. Available online: <http://services.parliament.uk/bills/2014-15/counsellorsandpsychotherapistsregulation.html> (accessed on 29 November 2016).
- Drescher, Jack. 2001. *Psychoanalytic Therapy and the Gay Man*. Hillsdale: Routledge.
- Drescher, Jack. 2002a. Causes and Because: On Etiological Theories of Homosexuality. *The Annual of Psychoanalysis* 30: 57–68.
- Drescher, Jack. 2002b. I'm Your Handyman: A History of Reparative Therapies. *Journal of Gay & Lesbian Psychotherapy* 5: 5–24.
- Drescher, Jack. 2003. The Spitzer Study and the Culture Wars. *Archives of Sexual Behavior* 32: 431–32.
- Drescher, Jack. 2009. When Politics Distort Science: What Mental Health Professionals Can Do. *Journal of Gay & Lesbian Mental Health* 13: 213–26. [CrossRef]
- Drescher, Jack. 2015. Can Sexual Orientation Be Changed? *Journal of Gay & Lesbian Mental Health* 19: 84–93. [CrossRef]
- Drescher, Jack. 2016a. History, Science and Politics of Homosexuality. Paper presented at the Science and Theology in Human Sexuality, St John's College, Durham University, Durham, UK, September 19.
- Drescher, Jack. 2016b. Jack Drescher, M.D. Professional Organizations. Available online: <http://www.jackdreschermd.net/prof-org.html> (accessed on 22 December 2016).
- Drescher, Jack, Alan Schwartz, Flávio Casoy, Christopher A. McIntosh, Brian Hurley, Kenneth Ashley, Mary Barber, David Goldenberg, Sarah E. Herbert, Lorraine E. Lothwell, and et al. 2016c. The Growing Regulation of Conversion Therapy. *Journal of Medical Regulation* 102: 7–12.
- Dworkin, Ronald. 1996. *Taking Rights Seriously*, New ed. London: Gerald Duckworth & Co Ltd., chp. 10.
- Dworkin, Ronald M. 1998. *Law's Empire*, New ed. Oxford: Hart Publishing.
- Equality Act 2010. UK Parliament. In force from 1 October 2010. Available online: <http://www.legislation.gov.uk/ukpga/2010/15/contents> (accessed on 29 January 2016).
- Fore, Wyatt. 2014. A Joyful Heart Is Good Medicine: Sexuality Conversion Bans in the Courts. *Michigan Journal of Gender & Law* 21: 311–40.
- Foreshew-Cain, Andrew and Stephen Foreshew-Cain, Canon Jeremy Davis and Simon McEnery, Ruth Wilde and Ellie Wilde, Jeremy Timm and Mike Brown, Erica Baker and Susan Strong, Keith Barber and Tim Mills, Karen Bregazzi-Jones and Samantha Bregazzi-Jones, Mark Cobb and Keith Arrowsmith, Paul Collier and Mr Collier, Simon Dawson and David Mooney, Richard Harris and Ricardo Goncalves, Paul Jellings and Andrew Carter, Clive Larson and John Markham, Garry Lawson and Timothy H. Wane, Jack Semple and Ross Griffiths, and Geoffrey Thompson and Tony Steeles. 2016. Praying to Bishops for LGBTI Acceptance. *The Sunday Times*, September 4, p. 24.
- Foucault, Michel. 1998. *The History of Sexuality 1: The Will to Knowledge*. Translated by Robert Hurley. London: Penguin, p. 43.
- Freedman, Callum. 2016a. Exploring the Terms. March 6. Available online: <http://www.core-issues.org/blog/callum-freed-man/exploring-the-terms> (accessed on 29 December 2016).
- Freedman, Callum. 2016b. Hello, My Name Is Callum. February 17. Available online: <http://www.core-issues.org/blog/callum-freed-man/hello-my-name-is-callum> (accessed on 22 December 2016).
- Fuller, Lon L. 1969. *The Morality of Law*, rev. ed. New Haven and London: Yale University Press.

- Gagnon, Robert A. J. 2014. Double-Speak from the Royal College of Psychiatrists. *Anglican Mainstream*, May 30. Available online: <http://anglicanmainstream.org/double-speak-from-the-royal-college-of-psychiatrists-2/> (accessed on 16 December 2016).
- Gergen, Kenneth J. 1985. The Social Constructionist Movement in Modern Psychology. *American Psychologist* 40: 267. [CrossRef]
- Gewirth, Alan. 1978. *Reason and Morality*. Chicago: University of Chicago Press.
- Giles, Jessica. 2014. R (Core Issues Trust) v Transport for London. *Oxford Journal of Law and Religion* 3: 366–67. [CrossRef]
- Ginicola, Misty M., and Cheri Smith. 2011. The Church, the Closet, and the Couch: The Counselor's Role in Assisting Clients to Integrate Their Sexual Orientation and Religious Identity. *Journal of LGBT Issues in Counseling* 5: 304. [CrossRef]
- GLAAD. 2016. *GLAAD Media Reference Guide*, 10th ed. New York: GLAAD, p. 7. Available online: <http://www.glaad.org/sites/default/files/GLAAD-Media-Reference-Guide-Tenth-Edition.pdf> (accessed on 29 December 2016).
- Gomes, Jules. 2016a. Gender Is an Objective Fact, Not Some Batty Whim. *The Conservative Woman*, December 18. Available online: <http://www.conservativewoman.co.uk/rebel-priest-rev-jules-gomes-gender-objective-fact-not-batty-whim/> (accessed on 29 December 2016).
- Gomes, Jules. 2016b. Gender Is an Objective Fact, Not Some Batty Whim Summary. Available online: <http://www.core-issues.org/leading-stories-and-research/gender-is-an-objective-fact-not-some-batty-whim> (accessed on 29 December 2016).
- Good, Dan, and Cecilia Vega. 2014. Pressure Reaches Boiling Point Over Arizona Anti-Gay Bill. In *ABC News*; February 26. Available online: <http://abcnews.go.com/US/arizona-gov-faces-pressure-religious-freedom-anti-gay/story?id=22677016> (accessed on 25 October 2016).
- Hatzenbuehler, Mark L., Susan Nolen-Hoeksema, and Sarah J. Erickson. 2008. Minority Stress Predictors of HIV Risk Behavior, Substance Use, and Depressive Symptoms: Results from a Prospective Study of Bereaved Gay Men. *Health Psychology* 27: 455–62. [CrossRef] [PubMed]
- Herek, Gregory M., J. Roy Gillis, and Jeanine C. Cogan. 2009. Internalized Stigma among Sexual Minority Adults: Insights from a Social Psychological Perspective. *Journal of Counseling Psychology* 56: 32–43. [CrossRef]
- Hopkins, Gwyn. 2015. R (Core Issues Trust Ltd.) v Transport for London. *Oxford Journal of Law and Religion* 4: 163–64. [CrossRef]
- House of Bishops. 1991. *Issues in Human Sexuality: A Statement by the House of Bishops of the General Synod of the Church of England*. London: Church House Publishing, para. 2.5.
- International Federation for Therapeutic Choice. 2014. *Protecting the Rights to Receive and Provide Professional Care for Unwanted SSA*. Available online: http://www.core-issues.org/UserFiles/File/IFTC/Protecting_the_Rights_to_Receive_and_Provide_Professional_Care_for_unwanted_SSA_itcp.pdf (accessed on 7 September 2016).
- Jackson, Stevi. 1999. *Heterosexuality in Question*. London: Sage Publications UK, pp. 173–74.
- John, Jeffrey. 2012. *Permanent, Faithful, Stable: Christian Same-Sex Marriage*, New ed. London: Darton, Longman & Todd.
- Kaoma, Kapya. 2014. The Paradox and Tension of Moral Claims: Evangelical Christianity, the Politicization and Globalization of Sexual Politics in Sub-Saharan Africa. *Critical Research on Religion* 2: 227–45. [CrossRef]
- Katz, Jonathan. 1976. *Gay American History: Lesbians and Gay Men in the U. S. A., a Documentary*. New York: Thomas Y. Crowell Company.
- King, Michael, Glenn Smith, and Annie Bartlett. 2004. Treatments of Homosexuality in Britain since the 1950s—An Oral History: The Experience of Professionals. *BMJ* 328: 429. [CrossRef]
- Kollman, Kelly, and Matthew Waites. 2011. United Kingdom: Changing Political Opportunity Structures, Policy Success and Continuing Challenges for Lesbian, Gay and Bisexual Movements. In *The Lesbian and Gay Movement and the State: Comparative Insights into a Transformed Relationship*. Edited by Manon Tremblay, David Paternotte and Carol Johnson. Farnham: Ashgate, pp. 181–95.
- Lambeth Conference. 1998. Section I.10—Human Sexuality. Available online: <http://www.anglicancommunion.org/resources/document-library/lambeth-conference/1998/section-i-called-to-full-humanity/section-i10-human-sexuality?author=Lambeth+Conference&year=1998> (accessed on 16 August 2016).
- Lawrence v Texas. 2003. U.S. Supreme Court. 539 U.S. 558 (2003). Available online: <https://supreme.justia.com/cases/federal/us/539/558/case.html> (accessed on 30 November 2016).

- Lopez, Robert Oscar. 2012. Growing Up With Two Moms: The Untold Children's View. *Public Discourse*, August 6. Available online: <http://www.thepublicdiscourse.com/2012/08/6065/> (accessed on 6 December 2016).
- Maccio, Elaine M. 2010. Influence of Family, Religion, and Social Conformity on Client Participation in Sexual Reorientation Therapy. *Journal of Homosexuality* 57: 441–58. [CrossRef] [PubMed]
- Mann, Dave. 2010. *Gestalt Therapy: 100 Key Points and Techniques*. Hove: Routledge.
- May, Peter. 2014. When Ideology Replaces Science. *Triple Helix*, pp. 14–16.
- Mayer, Lawrence S., and Paul R. McHugh. 2016. Sexuality and Gender: Findings from the Biological, Psychological, and Social Sciences. Special Report. *The New Atlantis: A Journal of Technology and Society* 2016: 10–143. Available online: http://www.thenewatlantis.com/docLib/20160819_TNA50SexualityandGender.pdf (accessed on 29 December 2016).
- McHale-Farsai, Kathleen M., and Ryan T. Williams. 2013. Pickup v. Brown (Consolidated with Welch v. Brown)-Ninth Circuit. *Western State University Law Review* 41: 299.
- McHugh, Paul. 2016. Transgender Surgery Isn't the Solution. *Wall Street Journal*. May 13. Available online: <http://www.wsj.com/articles/paul-mchugh-transgender-surgery-isnt-the-solution-1402615120> (accessed on 6 December 2016).
- McIntosh, Mary. 1996. The Homosexual Role. In *Queer Theory/Sociology*. Edited by Steven Seidman. Oxford: Blackwell, p. 38.
- Meaningful Life Center. 2014. Women & Men—Different but Equal? *The Meaningful Life Center*, August 3. Available online: <https://www.meaningfullife.com/differences-between-men-and-women/> (accessed on 29 December 2016).
- Mertens, D. M. 2007. Transformative Paradigm: Mixed Methods and Social Justice. *Journal of Mixed Methods Research* 1: 212. [CrossRef]
- Meyer, Ilan H. 1995. Minority Stress and Mental Health in Gay Men. *Journal of Health and Social Behavior* 36: 38. [CrossRef] [PubMed]
- Meyer, Ilan H. 2003. Prejudice, Social Stress, and Mental Health in Lesbian, Gay, and Bisexual Populations: Conceptual Issues and Research Evidence. *Psychological Bulletin* 129: 674–97. [CrossRef] [PubMed]
- Mustanski, Brian S., Michael G. DuPree, Caroline M. Nievergelt, Sven Bocklandt, Nicholas J. Schork, and Dean H. Hamer. 2005. A Genomewide Scan of Male Sexual Orientation. *Human Genetics* 116: 272–78. [CrossRef] [PubMed]
- NARTH. 2014. About the Journal of Human Sexuality. *Journal of Human Sexuality*. Available online: <http://www.journalofhumansexuality.com/books> (accessed on 23 December 2016).
- NARTH Institute. 2010. Task Force on Practice Guidelines for the Treatment of Unwanted Same-Sex Attractions and Behaviour. Available online: <https://www.scribd.com/doc/115508811/NARTH-Institute-Practice-Guidelines> (accessed on 22 December 2016).
- NARTH Institute. 2012. NARTH Institute Statement on Sexual Orientation Change. Available online: <http://www.core-issues.org/change-statement> (accessed on 17 December 2016).
- NARTH Institute. 2016. NARTH Institute. Available online: <http://www.narth.com> (accessed on 5 December 2016).
- NARTH Institute. n.d. Testimonies of Change. Available online: <http://www.narth.com/testimonies-of-change> (accessed on 23 December 2016).
- Newbiggin, Juliet. 2013. Psychoanalysis and Homosexuality: Keeping The Discussion Moving: Psychoanalysis and Homosexuality. *British Journal of Psychotherapy* 29: 276–91. [CrossRef]
- NHS England, Association of Christian Counsellors, British Association for Behavioural and Cognitive Psychotherapies, British Association for Counselling and Psychotherapy, British Psychoanalytic Council, British Psychological Society, Gay and Lesbian Association of Doctors and Dentists, National Counselling Society, PACE, Pink Therapy, Royal College of General Practitioners, Royal College of Psychiatrists, Relate, and UK Council for Psychotherapy. 2015. Memorandum of Understanding on Conversion Therapy in the UK. Available online: <https://www.psychotherapy.org.uk/wp-content/uploads/2016/09/Memorandum-of-understanding-on-conversion-therapy.pdf> (accessed on 14 January 2015).
- Nicolosi, Joseph. 2016a. Joseph Nicolosi—Reparative Therapy. Available online: <http://www.josephnicolosi.com/> (accessed on 29 November 2016).
- Nicolosi, Linda Ames. 2016b. The Bob Spitzer I Knew. *Crisis Magazine*, January 11. Available online: <http://www.crisismagazine.com/2016/the-bob-spitzer-i-knew> (accessed on 6 December 2016).

- Nicolosi, Joseph, Linda Ames Nicolosi, and Linda Nicolosi. 2000. *Parent's Guide to Preventing Homosexuality*. Downers Grove: Inter-Varsity Press, US.
- Nutt, Amy Ellis. 2016. Gays Can Be Reformed, Just like Arsonists, Trump's New Domestic Policy Adviser Has Said. *Washington Post*, November 19. Available online: <https://www.washingtonpost.com/news/to-your-health/wp/2016/11/19/gays-can-be-reformed-just-like-arsonists-trumps-new-domestic-policy-adviser-has-said/> (accessed on 30 November 2016).
- Dermot, O'Callaghan. 2014. Core Issues Trust—Letter to Church Times. *Anglican Mainstream*, October 10. Available online: <http://anglicanmainstream.org/core-issues-trust-letter-to-church-times/> (accessed on 15 December 2016).
- O'Callaghan, Dermot, and Michael R. Davidson. 2013. *Out of Harm's Way: Working Ethically with Same-Sex Attracted Persons. Questions of Harm, Evidence and Practice*. Ballynahinch: Core Issues Trust.
- O'Callaghan, Dermot, and Peter May. 2013. *Beyond Critique: The Misuse of Science by UK Professional Mental Health Bodies*, 2nd expanded ed. Ballynahinch: Core Issues Trust.
- O'Leary, Dale. 2015. Public Health Ignored as HIV Spreads. *Crisis Magazine: A Voice for the Faithful Catholic Laity*. November 17. Available online: <http://www.crisismagazine.com/2015/public-health-ignored-as-hiv-spreads> (accessed on 6 December 2016).
- Ozimek, Jane Fae. 2010. *Beyond the Circle: Sexuality and Discrimination in Heteronormative Britain*. n.p.: Consenting Adult Action Network.
- Pace, Yannick. 2016. Malta: Bill Outlawing Gay Conversion Therapy Approved. *Malta Today*, December 5. Available online: http://www.maltatoday.com.mt/news/national/72331/bill_outlawing_conversion_therapy_approved#.WEqJ_FwxaKF (accessed on 9 December 2016).
- Panozzo, Dwight. 2013. Advocating for an End to Reparative Therapy: Methodological Grounding and Blueprint for Change. *Journal of Gay & Lesbian Social Services* 25: 362–77. [CrossRef]
- Perls, Frederick S., Ralph F. Hefferline, and Paul Goodman. 1994. *Gestalt Therapy: Excitement and Growth in the Human Personality*. London: Souvenir Press Ltd.
- Philippson, Peter. 2001. *Self in Relation*. Gouldsboro: Gestalt Journal Press.
- Pickup et al. v Brown et al. 2012. Emergency Motion for Temporary Injunction Pending Appeal, 12–17681.
- Pickup et al. v Brown et al., and Welch et al. v Brown et al. 2014. No. No. 12-17681 (United States Court of Appeals for the Ninth Circuit January 29).
- Powell, Tia, and Edward Stein. 2014. Legal and Ethical Concerns about Sexual Orientation Change Efforts. *Hastings Center Report* 44: S32–39. [CrossRef] [PubMed]
- Public Law. 2014. Case Comment: Freedom of Speech. *Public Law*, p. 561.
- The Queen on the Application of Core Issues Trust v Transport for London & Another v Secretary of State for Culture, Media and Sport and Minister for Women and Equalities*, [2014] EWCA Civ 34 (Court of Appeal (Civil Division)).
- Rattigan, Dave. 2009. NARTH Author Admits Newly Touted Study Contains 'No New Science'. *Ex-Gay Watch*. July 9. Available online: <https://exgaywatch.com/2009/07/narth-author-admits-newly-touted-study-contains-no-new-science/> (accessed on 23 December 2016).
- Robinson, Christine M., and Sue E. Spivey. 2007. The Politics of Masculinity and the Ex-Gay Movement. *Gender & Society* 21: 650–75. [CrossRef]
- Robinson, Christine M., and Sue E. Spivey. 2015. Putting Lesbians in Their Place: Deconstructing Ex-Gay Discourses of Female Homosexuality in a Global Context. *Social Sciences* 4: 879–908. [CrossRef]
- Rogers, Carl R., Howard Kirschenbaum, and Valerie L. Henderson. 1961. Ellen West—And Loneliness. In *The Carl Rogers Reader*. Edited by Carl R. Rogers. London: Constable, pp. 157–68.
- Rosik, Christopher H. 2016a. Sexual Attraction Fluidity Exploration in Therapy (SAFE-T). Available online: http://media.wix.com/ugd/ec16e9_1940a968273d47f5be4bdf9614d2dd0c.pdf (accessed on 29 November 2016).
- Rosik, Christopher H. 2016b. Same-Sex Parenting Research. Available online: <http://www.narth.com/ss-parenting> (accessed on 5 December 2016).
- Rosik, Christopher. n.d. New Research Sheds Light on Fluidity. Available online: <http://www.narth.com/reincarnation-of-shidlo--> (accessed on 29 December 2016).
- Royal College of Psychiatrists. 2014. Position Statement on Sexual Orientation. Available online: http://www.rcpsych.ac.uk/pdf/PS02_2014.pdf (accessed on 16 December 2016).
- Ryan, Richard M., and Edward L. Deci. 2008. A Self-Determination Theory Approach to Psychotherapy: The Motivational Basis for Effective Change. *Canadian Psychology/Psychologie Canadienne* 49: 186–93. [CrossRef]

- SB-1172 Sexual Orientation Change Efforts. 2012. Available online: https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201120120SB1172 (accessed on 5 September 2016).
- Scasta, David, Philip Bialer, and American Psychiatric Association. 2013. *Position Statement on Issues Related to Homosexuality*. Arlington County: American Psychiatric Association. Available online: <https://www.psychiatry.org/psychiatrists/search-directories-databases/policy-finder> (accessed on 25 October 2016).
- Schroeder, Michael, and Ariel Shidlo. 2002. Ethical Issues in Sexual Orientation Conversion Therapies: An Empirical Study of Consumers. *Journal of Gay & Lesbian Psychotherapy* 5: 131–66. [CrossRef]
- Seidman, Steven. 2010. *The Social Construction of Sexuality*, 2nd ed. New York and London: W. W. Norton and Company, Inc., chp. 4.
- Sexual Offences Act. 1967. Available online: http://www.legislation.gov.uk/ukpga/1967/60/pdfs/ukpga_19670060_en.pdf (accessed on 30 November 2016).
- Sharpe, Keith. 2011. *The Gay Gospels: Good News for Lesbian, Gay, Bisexual, and Transgendered People*. Alresford: John Hunt Publishing.
- Shelton, Kimber, and Edward A. Delgado-Romero. 2011. Sexual Orientation Microaggressions: The Experience of Lesbian, Gay, Bisexual, and Queer Clients in Psychotherapy. *Journal of Counseling Psychology* 58: 210–21. [CrossRef] [PubMed]
- Shoichet, Catherine E., and Halimah Abdullah. 2014. Arizona Gov. Jan Brewer Vetoes SB 1062, Controversial Anti-Gay Bill—CNNPolitics.com. CNN, February 27. Available online: <http://www.cnn.com/2014/02/26/politics/arizona-brewer-bill/index.html> (accessed on 31 December 2016).
- Smith, Glenn, Annie Bartlett, and Michael King. 2004. Treatments of Homosexuality in Britain since the 1950s—An Oral History: The Experience of Patients. *BMJ* 328: 427. [CrossRef] [PubMed]
- Song, Robert. 2014. *Covenant and Calling: Towards a Theology of Same-Sex Relationships*. London: SCM Press.
- Writer, Staff. 2016. Fresh pressure on college of bishops to be more welcoming. *Church of England Newspaper*, September 9.
- Sue, Derald Wing. 2010. *Microaggressions in Everyday Life: Race, Gender, and Sexual Orientation*. Hoboken: John Wiley and Sons Inc.
- Sutton, Philip M. 2014. *What the Research Does and Does Not Say: Is Therapeutic Support for Unwanted Same-Sex Attractions Harmful?* Ballynahinch: Core Issues Trust.
- Synod, General. 1987. General Synod Motion Initiated by the Revd Tony Higton. Available online: <https://www.churchofengland.org/our-views/marriage,-family-and-sexuality-issues/human-sexuality/homosexuality.aspx> (accessed on 22 September 2015).
- Thatcher, Adrian. 2012. *Making Sense of Sex*. Modern Church Series. London: Society for the Promotion of Christian Knowledge, p. 43.
- The Association of LGBTQ Psychiatrists (AGLP), Scasta David, Eric Yarborough, Amir Ahuja, Kenneth Ashley, Serena Yuan Volpp, and Sarah Noble. 2016. Position Statement: Discrimination against LGBTQ Citizens under the Guise of Religious Liberty. April 25. Available online: <http://www.aglp.org/pages/LGBTPositionStatements.php#ReligiousLibertyDiscrimination> (accessed on 25 October 2016).
- Throckmorton, Warren. 2016. The New Atlantis Study on Sexual Orientation and Gender Identity That's Not a Study. *Warren Throckmorton*, August 23. Available online: <http://www.patheos.com/blogs/warrenthrockmorton/2016/08/23/the-new-atlantis-study-on-sexual-orientation-and-gender-identity-thats-not-a-study/> (accessed on 29 December 2016).
- Travis, William. 2014. Bad Medicine: The Ninth Circuit Reviews Issues of Free Speech, Professional Regulations, and California's Ban on Sexual Orientation Change Efforts in *Pickup v. Brown*. *Tulane Journal of Law & Sexuality* 23: 191.
- UK Council for Psychotherapy. 2009. Ethical Principles and Code of Professional Conduct. (UKCP). Available online: <https://www.psychotherapy.org.uk/wp-content/uploads/2016/08/UKCP-Ethical-Principles-and-Code-of-Professional-Conduct.pdf> (accessed on 20 December 2016).
- UK Council for Psychotherapy. 2016. Available online: <https://www.psychotherapy.org.uk/> (accessed on 22 December 2016).
- UK Council for Psychotherapy, British Psychoanalytic Council, Royal College of Psychiatrists, British Association for Counselling and Psychotherapy, The British Psychological Society, Pink Therapy, The National Counselling Society, Stonewall, PACE, and Relate. 2014. *Conversion Therapy: Consensus Statement*. London: UK Council for Psychotherapy.

- UK Council for Psychotherapy. n.d. UKCP's Ethical Principles and Codes of Professional Conduct: Guidance on the Practice of Psychological Therapies That Pathologise and/or Seek to Eliminate or Reduce Same Sex Attraction. (UKCP). Available online: <https://www.psychotherapy.org.uk/registers-standards/standards-guidance-and-policies/> (accessed on 20 December 2016).
- United Nations High Commissioner for Human Rights. 2015. *Discrimination and Violence against Individuals Based on Their Sexual Orientation and Gender Identity: Report of the Office of the United Nations High Commissioner for Human Rights*. Report No. A/HRC/29/23; New York: UN General Assembly, May 4.
- United States Courts for the Ninth Circuit. 2014. Pickup v. Brown, 12-17681 and Welch v. Brown, 13-15023 (SB 1172—Sexual Orientation Change Efforts). In *US Courts*; July 8. Available online: http://www.ca9.uscourts.gov/content/view.php?pk_id=0000000635 (accessed on 30 December 2016).
- Waidzunus, Tom. 2015. *The Straight Line: How the Fringe Science of Ex-Gay Therapy Reoriented Sexuality*. Minneapolis and London: University of Minnesota Press.
- Walls, N. Eugene. 2008. Toward a Multidimensional Understanding of Heterosexism: The Changing Nature of Prejudice. *Journal of Homosexuality* 55: 27–28. [CrossRef] [PubMed]
- Weeks, Jeffrey. 2003. *Sexuality*, 2nd ed. Abingdon: Routledge.
- Westboro Baptist Church. 2016. Westboro Baptist Church Home Page. *God Hates Fags*. Available online: <http://www.godhatesfags.com/> (accessed on 12 December 2016).
- Winkler, Matteo M. 2015. A Child's Right to Be Gay? Lessons from the American Therapy Litigation. In *LGBTI Persons and Access to Justice*. Edited by Anna Lorenzetti and Maria Frederica Moscati. London: Wildy, Simmonds and Hill Publishing, pp. 238–56.
- Working Group on Human Sexuality. 2013. *Report of the House of Bishops: Working Group on Human Sexuality*. London: Church House Publishing. Available online: <https://www.churchofengland.org/our-views/marriage,-family-and-sexuality-issues/human-sexuality/pilling-report.aspx> (accessed on 29 December 2016).
- World Medical Association. 2013. WMA Statement on Natural Variations of Human Sexuality. *World Medical Association*. October 19. Available online: <http://www.wma.net/en/30publications/10policies/s13/> (accessed on 5 December 2016).
- Yarbrough, Senator, Senator Barto, and Senator Worsley. 2014. Exercise of Religion; State Action. Pub. L. No. SB 1062. Available online: <http://www.azleg.gov/legtext/51leg/2r/bills/sb1062p.pdf> (accessed on 25 October 2016).



© 2017 by the author. Licensee MDPI, Basel, Switzerland. This article is an open access article distributed under the terms and conditions of the Creative Commons Attribution (CC BY) license (<http://creativecommons.org/licenses/by/4.0/>).