

The Role Of Free Agency In Sexual Identity Development

By Douglas Abbott, Ph.D.

“Free agency can only exist within a universe where some things are right and good (for the individual and society) and other things are wrong, hurtful, and destructive.”

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Many social scientists believe that an interactional model -- combining biological, family and social influences—makes the most sense as an explanation for homosexuality. However, this model possesses one major drawback: it fails to consider choice and free will in shaping same-sex orientation and behavior.

Biological theory suggests that a force of nature (genes or prenatal hormones) causes homosexuality, and environmental theories posit that social experiences (e.g., unhealthy parent-child interaction and/or sexual abuse) push the individual into same-sex behavior. But little is said by either theoretical camp about the person’s own active participation in sexual preference development.

“Conspicuously absent from most theorizing on the origins of sexual orientation is an active role of the individual in constructing his or her own [sexual] identity” (p. 236), say Byne and Parsons (1993), following their comprehensive review of studies on homosexuality. Diamond (1998) also notes that while biology may bias the person’s sexual orientation, individual behavior remains flexible when responding to environmental influences, and free choice must also be considered (p. 67).

It is generally believed that humans are at least somewhat free to make behavioral choices, regardless of past experiences or current conditions. This concept of “agency” implies choice, free will, or self-determination; the ability to make decisions independent of past choices or circumstances. System theorists argue that present and future choices can be limited or restricted, but are not absolutely determined by past choices and experiences (Burr, Day & Bahr, 1993, p. 46). Humans have agency to make conscious choices and are free to alter their thinking, emotions, and behaviors (Warner, 2001).

Intentional action is no doubt a driving force in our human natures. Consider the experience of Viktor Frankl (1985) a psychologist and survivor of a Nazi concentration camp, who says:

But what about human liberty? Is there no spiritual freedom in regard to behavior and reaction to any given surroundings? Is that theory true which would have us believe that man is no more than a product of many conditional and environmental factors —be they of a biological, psychological or sociological nature?... Does man have no choice of action?

...The experiences of [Nazi prison] camp life show that man does have a choice of action... There were always choices to make. Every day, every hour offered the opportunity to make a decision... In the final analysis it becomes clear that the sort of

person the prisoner became was the result of an inner decision and not the result of camp influences alone.

Fundamentally, therefore, any man can, even under such circumstances, decide what shall become of him—mentally and spiritually (p. 86-87).

In a similar way, a particular individual may have been predisposed to homosexuality due to biology, family pathology, sexual abuse, or the enticements of peers and the media, but there is still likely an element of choice involved. In other words, in addition to biology and environmental influences, a person over a period of months or years can make decisions that lead to eventual involvement in same-sex behavior.

It is not my purpose to condemn those who engage in same-sex behavior. But I believe that heterosexuality is preferable to homosexuality—and that as social scientists, we have an obligation to explore the role of choice in sexual identity development.

A Religious Understanding of Free Agency

Williams (1992, 2004) proposes a view of agency that differs from the secular understanding. He sees it as a two-fold process: first, there must be a “knowledge of truth,” and second, one must make the decision to “live truthfully.” Agency does not consist chiefly in “doing what we want” (i.e., choosing between amoral alternatives), but in “doing what we should do” (i.e., knowing true principles and deciding to live by them) (2004, p. 152).

“Human freedom does not simply mean doing whatever one wants, Needleman (2004) explains. “That is a childish idea. A mature vision of freedom—a religious vision of freedom—implies voluntary obedience to the higher law of conscience [i.e., the laws of God].”

It is my own belief that agency can only exist within a universe where some things are right and good (for individual and society) and other things are wrong, hurtful, and destructive. A moral universe can only be created and structured by a divine creator, because every man-made form of morality will eventually breakdown into individual preferences and relativistic choices. Like Novak (in Smith, 2001, p. 210), I believe that there is no agency without morality:

“In the absence of judgment [i.e. a moral standard] freedom [i.e., agency] cannot thrive. If nothing matters, freedom is pointless. If one choice is as good as another, choice is merely a preference. Without standards, no one is free, but only a slave to impulses coming from who knows where” (p. 210).

Freedom without the guidance of moral principle is not freedom, Needleman (2004) explains, but simply devolves into self-interest and personal gain. Thus agency cannot exist in a moral vacuum. In the Hebrew Bible, God explains: “My thoughts are not your thoughts, neither are your ways my ways, saith the Lord. For as the heavens are higher than the earth, so are my ways higher than your ways, and my thoughts than your thoughts” (Isaiah 55:8-9).

Says psychologist Allen Bergin (2002): “For sexual expression to nurture relationships and produce joy, it must be guided by spiritual principles. Behavior outside these principles puts at risk our ability to ultimately attain the highest joys of sexual expression” (p. 206). Such principles come from our creator and exist “independently of anyone’s construction of them” says Fischer (2004).

Free agency, understood through this worldview, is the ability to grasp the true reality of our sexual natures and the conscious, deliberate choice to fulfill our true roles as heterosexual beings. The individual is considered able (in most situations) to alter his thinking, emotions, and behaviors in order to live in harmony with revealed truth.

Is Choice Completely “Free”?

Note, however, that choosing to live by true principles is easier for some than for others. A person without the light and knowledge of true principles; or who is reared in a corrupt and depraved family, or who is subjected to a social environment of promiscuity and violence; or who has made immoral choices in the past, will have a limited ability to exercise agency and choose right (i.e., moral) behavior (Bergin, 2002, Fischer, 2004). For example, compare homosexuality to an addiction like alcohol or gambling. A person may have an innate susceptibility to alcohol or risky behavior like gambling, but in the beginning the whiskey or the poker games were choices. Over time, the booze or black-jack became a compulsion, and eventually an addiction.

Same-sex behavior may develop in a similar way. The first same-sex experience is chosen and intentional--though made more likely to occur by prior environmental conditions, or emotional or biological predispositions. But the more one engages in same-sex behavior, the more the behaviors become habitual and compulsive (Nicolosi, 1991). Neural pathways are strengthened by repetition of the behavior, and emotional-social responses are conditioned through integration into a homosexual lifestyle. In small ways the brain and body chemistry are eventually changed to reinforce the homosexual behavior.

Over time, the person has less ability to reduce or stop the same-sex behavior. If asked, a man (or woman) trapped in alcohol or gambling will respond that "No, I didn't choose this! Why would anyone choose this life?" He assumes he never "chose" because he doesn't recall making a conscious decision to be a drunk or a gambler. Likewise, a gay man or lesbian may not recall "choosing" to be homosexual, but forgetfulness does not eliminate the possibility that conscious decisions were made that put the person on the path to homosexuality.

Ex-gay authors Davies and Rentzel (1994) acknowledge this possibility: "Many gays and lesbians believe that they were born homosexual. They do not remember making a *conscious choice* to be sexually drawn to members of their own sex; so, common logic says homosexuality must be genetic or hormonal, and there is nothing that can be done about it" (p. 20).

Neurological Patterns

It is popularly assumed that the brain and hormones direct our behavior--in a one-way, cause and effect manner. It is assumed that the brain affects behavior, but behavior does not influence (or change) the brain. However, it is apparent from many human and animal studies that behavior can alter the neurons and biochemistry of the brain (Dawson & Fischer, 1994; Diamond, 1998; Greenough, Black & Wallace, 1987; Shore, 1997). For example, Breedlove (1997) found that differences in the sexual behavior of adult rats caused, rather than were caused by, differences in brain structure. Yes, people are not rats; but the fact that experience can modify brain structure is well-established (Kandel, Schwartz & Jesell, 1991).

The plasticity (i.e., flexibility) of the human brain is greater than most believe. Greenough et al. (1987) explains that "There is little question that the cerebral cortex and also the cerebellum retain the capacity to form new synaptic connections in response to new experience" (p. 548). Environmental stimulation can create a "dynamic synapse-formation process" (p. 550), i.e., new neurons are formed and new interconnections between nerve cells are made.

In his book, "Blaming the Brain," Valenstein (1998) makes a powerful argument that experience can modify the brain:

A person's mental state and experience can modify the brain... Various experiences can cause structural and functional changes in the brain... Genes are responsible for establishing the scaffolding of the brain, but a large amount of the neuronal growth that leads to the establishment of connections has been shown to be influenced by experience (p. 126-128).

The point is this: if choice plays a role in the homosexual condition, then immersion in the gay lifestyle may alter the neural pathways and body chemistry to reinforce or strengthen homosexual thinking and behavior. If this is the case, then later transformation to heterosexuality would be extremely difficult. Reorientation is possible, but is likely very difficult without enormous personal effort and the help of others (Satinover, 1996).

Choice for Lesbians?

In many essays and research reports on lesbianism, choice is acknowledged as an important determinant of same-sex behavior (Bart, 1993; Golden, 1994). In a 1995 survey in the popular gay magazine "The Advocate," only 50% of lesbians thought they were born gay; the remainder thought that childhood experiences and/or choice accounted for their sexual orientation.

Kirkpatrick (1987) found that prior to the onset of stable lesbian coupling, most women in her clinical work reported a "durable" and satisfactory heterosexual marriage (p. 202). According to Rosik (2003), the literature demonstrates "the relative malleability of erotic attraction for lesbians." He says, "studies have reported a 31% to 50% of lesbians consider their sexual orientation to be the result of a conscious, deliberate choice" (p. 17).

Choice for Gay Men?

Environmental theories hold that same-sex behavior is primarily learned. Evidence supporting these theories would consist of data that demonstrates that homosexuality can be unlearned, or changed. It appears that some gays have changed their sexual preference and function successfully as heterosexuals (Nicolosi, 1991, 1993; Satinover, 1996; van den Aardweg, 1985).

MacIntosh (1995) asked 422 psychiatrists if they had helped homosexuals who wanted to change their sexual orientation. Of those responding (n=285), the doctors said that 23% of their patients had converted to heterosexuality, and 84% made significant improvement toward a heterosexual identity. Nicolosi, Byrd, and Potts (2000) surveyed 882 individuals who had gone through some type of conversion education or therapy (mostly in religious settings) and had experienced some degree of sexual-orientation change. Of those responding, 34% reported a significant change toward heterosexuality. Twenty-three percent reported no change in sexual orientation and 43% reported some change. In the total group, only about 7% said they were doing worse psychosocially than before the conversion interventions (Throckmorton, 1998; 2002).

Robinson (1998) interviewed seven men, then married, who had been heavily involved in homosexual activity and considered themselves to be gay. At the time of the interview, these men, reactivated into religious worship, said they had not participated in same-sex activities for at least one year and were no longer troubled by compulsive sexual thoughts or same-sex desires or fantasies. Robinson summarized his findings:

The most important conclusion of this study is that change is possible. Participants provided extensive and credible descriptions indicating that they had experienced profound and life altering change. This change included, but was not limited to, a dramatic reduction in frequency, intensity, and duration of homosexual desires...The change was experienced as being personally fulfilling and greatly increasing the quality of their lives socially, emotionally and spiritually. It would be difficult to argue from the accounts given by these men that the change they reported was imagined, misinterpreted by them, or fundamentally unhealthy (p. 319 & 320).

Throckmorton (2003) concluded that: "My literature review contradicts the policies of major mental health organizations because it suggests that sexual orientation, once thought to be an unchanging sexual trait, is actually quite flexible for many people, changing as a result of therapy for some, ministry for others, and spontaneously for still others" (para. 4).

Psychiatrist Robert Spitzer, a leading member of the American Psychiatric Association who helped remove homosexuality from the Association's "Manual of Mental Disorders" in 1973, also believes that some people can change. In 2000, Dr. Spitzer interviewed 200 men and women who claimed to have come out of homosexuality. Spitzer concluded:

Like most psychiatrists, I thought that homosexual behavior could be resisted—but no one could really change their sexual orientation. I now believe that's untrue—some people can and do change ... Contrary to conventional wisdom, some highly motivated individuals, using a variety of change efforts, can make substantial change in multiple indicators of sexual orientation, and achieve good heterosexual functioning (quoted in Nicolosi, 2002, p. 140-141).

Is Change Possible?

Although controversial, there are numerous accounts of people who have changed their sexual orientation. The research has flaws (i.e., small samples, anecdotal evidence), and some of those individuals have returned to a homosexuality. There is, however, too much evidence of conversion to heterosexuality to dismiss all these accounts as fabrications. Some homosexuals have changed their thinking, feelings, and behavior and reoriented their lives to heterosexual living (Anderson, 1998; Davies & Rentzer, 1994). They marry, have children, and believe themselves to be heterosexual, and the transformation appears to be lasting (Bieber, 1976; Davies & Gilbert, 2001; Nicolosi, 1993; Satinover, 1996).

In summary, then, there is evidence that choice does play a role in sexual preference. Research with lesbians demonstrates unequivocally that some women who had previously functioned in heterosexual marriage, later chose a lesbian identity, and in some cases, returned once again to a heterosexual identity. Some men also have given up same-sex behavior and chosen to return to heterosexual marriage. This data, in total, suggest that choice is one factor that influences same-sex behavior (Andersen & Andersen, 1998).

An Interactional Theory

Both biology and environment appear to contribute to homosexuality, and, as we have argued, choice also appears to play a role. King (2004) agrees:

Most researchers today agree that biological and social influences both contribute to the development of sexual orientation. The question is no longer nature versus nurture, but to what extent each influences orientation. They certainly interact in some complex yet undetermined manner. At the moment, the most we can say for biological factors is that they probably predispose (this is not the same as cause) an individual to a particular sexual orientation. What this means is that given a certain genetic background and a particular set of social and environmental influences; it is more likely than not that a person will assume a heterosexual or homosexual orientation (p. 278).

If all three factors (e.g., biology, environment, and choice) interact, then the question remains: "What is the relative contribution of each factor to a homosexual outcome?" In other words, is homosexuality mostly due to biology, with some environmental influences and little free will? Or is homosexuality mostly a choice, made more likely due to a pathological family, sexual abuse, a promiscuous peer group, and a genetic predisposition toward shyness, sensitivity, and nonaggression?

An illustration of the multiple causality of homosexuality was described by Schmidt (1995):

A boy with a biological disposition to gender non-conforming behavior is born in a confused culture that associates such behavior with homosexuality. The boy has a

dysfunctional family in which the mother is overwhelming and the father is ineffectual. The boy grows up with no more moral training that is necessary to keep him out of trouble at home or at school. He experiments with same-sex relations as an adolescent and finds pleasure and companionship. As he enters adulthood, he chooses to move to a large city where he can build a life within the homosexual subculture (p. 151).

Perhaps an analogy may help illustrate my interactional theory. Nicolosi (1993) provides comparison between the development of obesity and homosexuality:

Your son Jack is born with a gene that makes it likely he will gain weight. You really love to cook for him, and so he grows up loving desserts and fried foods. At school he is teased, excluded, and called names, and so he goes home and comforts himself the way he knows best—by eating. ‘Maybe they’re right’, Jack decides, ‘Maybe this is who I am’. Pretty soon Jack is overweight and his doctor gives him a note excluding him from physical education class.

Is ‘fat’ who he really is? He got that way through a combination of biological factors, parental influence, social influence from peers, and behavioral choice. Just as with homosexuality. Yet as much as overeating may be understandable for Jack (and it feels pretty normal to him), we still recognize that obesity is not healthy” (Nicolosi, 1993, p. 35-36).

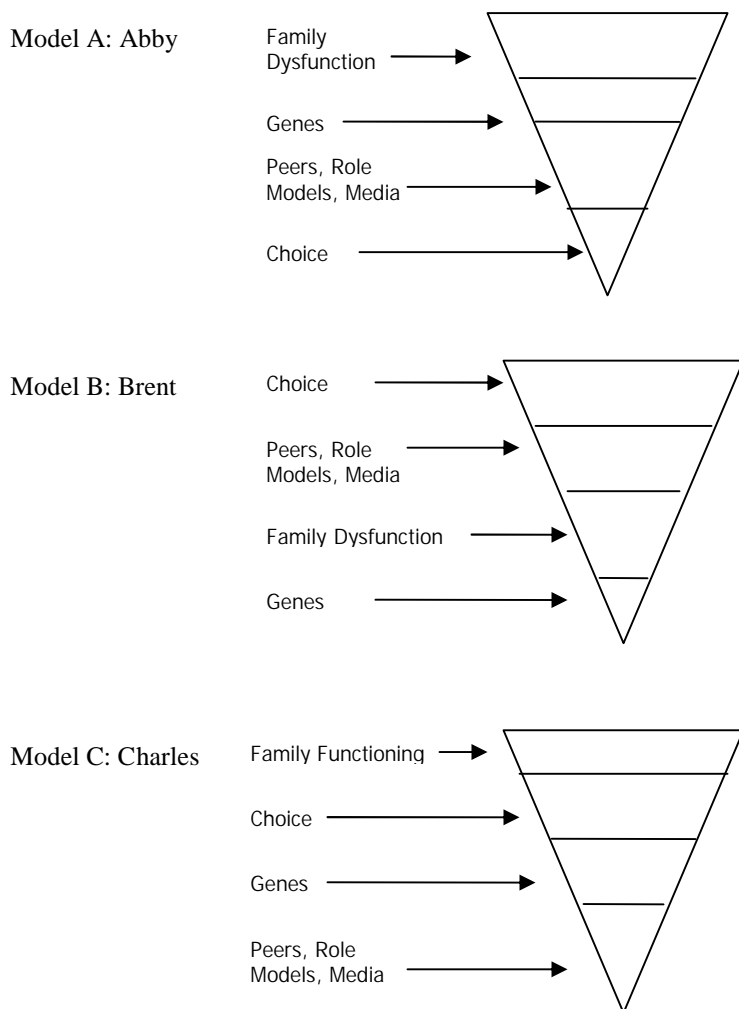
This account reveals that Jack’s obesity is a result of nature, nurture, and choice. He inherited a tendency to be overweight. His diet and home life facilitated his over-eating. The cruelties of his peers lead Jack to assuage his rejection and depression with food. Jack, himself, made decisions to lead a “couch potato” lifestyle. In his mind, Jack would not recognize or admit that he chose his condition. He would say that obesity just happened to him, it was part of who he was and he can’t be blamed for that.

In Figure 1 below, I propose multiple pathways for the development of homosexuality. A triangular shape was chosen because it conveys visually the relative contribution of each part to the whole. The larger the polygon sections of the triangle, the greater its influence in eliciting a homosexual outcome. In addition, the vertical placement of the factors conveys the idea that factors higher up in the triangle can trump those below it. However, factors can free-float, moving up and down much like the blobs in a lava lamp that rise and fall, depending on time and other conditions. For example, a person may lose his or her freedom to resist same-sex behavior as time and conditioning reinforce the patterns of homosexual behavior.

Please note that when I use “*genes*” as a contributing factor in my theory I am not referring to biology as a direct, causative agent in homosexuality. When I say “gene” I mean that there may be some genetically based physical or personality traits that may influence a person’s social interaction, which in turn, leads to opportunities for homosexual socialization and interaction. Genes are NOT posited to be a direct cause of homosexual behavior.

Caution: the three models are simplistic examples of the factors, forces, and conditions that may contribute to a preference for same-sex partners. But the final outcome--homosexuality--cannot be reduced to the simple presence or absence of any of these factors. There may be other influences not yet identified that may be influential. The models will only show how various forces and factors may interact to encourage homosexuality. (The case studies presented below are fictional.)

Figure 1: Three Models of Homosexuality



Three Models

Model-A. Abby always considered herself a tomboy. As a child she rejected dolls and dresses and preferred the rough and tumble play with boys. She had few girl friends. Abby had a cold, distant father and weak, passive mother. She did not want to grow up and be like her mother--submissive and powerless. Her father was a truck driver, rarely around. At fifteen, Abby was seduced and raped by a boy from school and then emotionally abandoned by him. She grew to distrust men, and had no interest in dating other guys. Her closest confidante was her aunt, a longtime lesbian. She also had a gay first cousin in a neighboring town that lived with his partner.

During a stressful time in her senior year in high school Abby became attracted to a compassionate girlfriend. She confided in a gay-friendly school counselor and was encouraged to explore her homosexual feelings. During this time Abby would occasionally masturbate while watching pornographic videos. Her friend gave her Chastity Bono's memoir (i.e., daughter of Cher, the ageless rock singer), "Family Outing," to read. It is a coming-of-age story of Bono's lesbian experience. Abby followed that up by reading "Early Embraces" by Lindsey Elder (1996)

and “Skin Deep” edited by Nicole Foster (2000) --true stories of lesbian sexual experiences. After months of sexual frustration, Abby persuaded her girlfriend to have sex.

Model-B. Brent’s father was a straight-laced preacher, warm but strict and judgmental. His relationship with his dad was at times conflicting. He felt he could never measure up to his father’s expectations. Brent’s parents had a relatively happy and stable marriage, but he could sense that his mother chafed at the father’s strong patriarchal control. Rebellion came easy to Brent. In small ways he defied his father and spurned his mother’s guidance and love.

During middle childhood and into adolescence, Brent engaged in masturbation and mutual masturbation with his male buddies. He also tried out heterosexual intercourse on several occasions and found it satisfying. As a teen Brent was involved with a punk-rock band whose members experimented with drugs and deviant sexual behaviors. During his last two years of high school Brent “palled around” with a friend who was gay. Occasionally, the two of them would sneak into a gay bar, drink, socialize, and then have bathroom sex with older men. Brent wasn’t sure if he was straight, gay or bisexual, but he chose to run with the gay crowd for the present.

Model-C. Charles had what he considered a normal childhood. His parents were affectionate and available, but they took a laissez-faire approach to parenting. There were few rules and regulations. His parents gave him little moral guidance and direction, and for the most part, Charles was left to make his own decisions. The parents held liberal values regarding sex and sexuality, and were openly accepting of alternative lifestyles, and had several gay friends. They gave no direct guidance to Charles on appropriate sexual behavior. Charles recalled that in his early years he felt different somehow but wasn’t sure why. He was kind, sensitive, and talented in the arts.

His friends at school were mostly girls who shared his interest in music and drama. He felt comfortable and safe with them, but was ill at ease around boys, yet attracted to them. He idolized his male teachers and his male cousins who were tough, rugged men. Brent longed for their attention and affection. Occasionally, he would fanaticize about being gay, but the guilt upset him and the fear of homophobia depressed him. He finally decided to discuss his feelings with a gay student he knew and eventually had sex with this same boy.

These three models acknowledge the possible influence of psychosocial factors and biology, yet recognize that *agency*--the freedom to make choices—plays an important part in the process.

Abby, Brent and Charles represent different pathways into a similar, though not identical ends. They experience homosexuality differently because they have different histories, motivations, and different emotional and social conditioning.

Similar Background, But Different Outcome

I realize that there are some youth—for example, let’s call one such fellow “Harry”—who had a life story similar to Abby, Brent, or Charles, and yet Harry turned out to be heterosexual. So how can one then explain this?

An answer is that with Harry, those conditions that might tilt him toward homosexuality existed in different proportions and in a different temporal sequence than for Abby, Brent and Charles. Like Abby or Charles, Harry was exposed to pornography and liberal sexual mores in the home, but he spent much of his time at a friend’s home where heterosexuality was expected. In addition, Harry was more resilient to stress and family dysfunction than was Brent. And last, Harry’s moral agency—his freedom to choose--was a more potent factor in influencing sexual attraction. So in the end, Harry met Sally and is heterosexual, while Abby and Charles are homosexual, and Brent is bisexual.

Remember that these models are simplified. The development of homosexuality is probably more intricate and convoluted than my examples. These scenarios, however, represent probable pathways to homosexual outcomes.

The Myth of Objectivity

There is controversy and contention in both the academic community and among the general public on the causes and consequences of homosexuality. Much of the debate is driven by religious, social, and political values, and even “objective” scientific research is influenced by these ideologies. “Scientists and clinicians,” Martin (1984) warns, “always approach their investigations with some degree of subjective feeling [bias], even if those feelings are only expectations arising from commitment to a theoretical model. The objective scientist, completely rational and above the influence of personal opinion and feelings, is a myth” (p. 29).

Biological research on homosexuality is driven by “powerful ideologies,” Haumann (1995) says, that “affect every level of the research process from the definition of the problem to the findings” (p. 59). In other words, research on homosexuality is “not immune to the cultural and political context within which it takes place” (Haumann, 1995, p. 59). Thus it is unlikely that consensus on the origins and outcomes of same-sex relationships will be achieved any time soon.

Nevertheless, the search for a “cause” is important for social and political reasons. If homosexuality was shown to have strong biological roots, then opposition to it would diminish. Thus, the search for an explanation is important, and that leads back to the theoretical explanations of homosexual behavior.

“Contributing Factors” vs. “The Cause”

In this debate about the etiology of homosexuality it is important to distinguish between two concepts: a *cause* vs. a *contributing factor*. In common usage the word “cause” denotes an exact, specific, and straight-forward reason for the occurrence of a phenomenon. For example, the cause of my cold is a virus. The cause of my flushed face is embarrassment because I forgot my lines in the community play. A “contributing factor,” however, is not a direct, unambiguous cause--but only a condition that, in combination with other conditions--may increase the likelihood of a certain outcome. A contributing factor does not absolutely “cause” a thing to happen. A contributing factor is like finding extra change in your pocket. The fact that you have the coins does not force you to spend it or determine what you will buy. Having the unexpected money only increases the chance that you might purchase something. What you do with the money is still up to you.

In medicine and engineering, “causes” are often easily identified, and effective cures for disease, or construction methods for building a bridge, are easily implemented. But in the study of human social behavior, causes are difficult to find and to prove absolutely. At best, social scientists usually identify a list of “contributing factors.” Such is the case with homosexuality. Direct causes have not been found. However, several contributing factors have been identified by researchers and clinicians over the past sixty years. Homosexual behavior appears to result from a complex, dynamic interaction of many contributing factors including environment, free will, and possibly, biology. I believe that the first two factors are the chief contributing factors to homosexuality.

Current biological and environmental theories of homosexuality say little (or nothing) about free will and choice as a possible contributing factor to same-sex behavior. Neither approach recognizes the individual’s active assent and purposeful participation in choosing sexual behavior or creating a sexual identity. Glock (2004) a sociologist at UC Berkeley explained that:

Scientists, in their search for explanations, effectively ignore free will as a possible causal agent. This is not because scientists do not believe in the existence of free will. At a philosophical level, we suspect that most count themselves as believers. Certainly, in their everyday lives, they think and act as if free will exists. When they function as scientists, however, they have not found a means to establish if free will may be operative as a determinate of human behavior.

Glock (2004) points out that while science gives no credence to free will as a possible contributor to behavior, science offers no proof of its non-existence, either. Many social scientists refuse to acknowledge free will in their research and theories, yet they believe *themselves* to be in possession of it (Burr, Day & Bahr, 1993, p. 46; Werner & Smith 1992)! However, most psychologists and psychiatrists refuse to consider that choice has anything to do with same-sex behavior.

This is not to say that at some discrete point in time, a person “chooses” to be gay. The process of homosexual development is not nearly that clear cut and straightforward. But it is likely, however, that at various times along the way to self-identification as homosexual, the individual chooses or attends to feelings, ideas, or behaviors that help move him further along the path to homosexuality. Those contributing factors may change over time--with one factor becoming more (or less) important, depending upon age and other situational conditions—and during that period, the person’s sexual preference may flow toward, or away from, a same-sex orientation.

During these periods of flux and change, I believe that same-sex identity can be modified; heterosexual identity can (in the case of a child, through the influence of his parents) be encouraged; and the person can make the choice to actively participate in that powerful--and uniquely human-- process of choice and free agency.

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