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A Positive View of Spitzer's Research and an Argument for Further Research

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Spitzer demonstrates that some individuals who have undergone "reparative" therapy report that they have changed their sexual orientation from homosexual to heterosexual for at least a 5-year period. His study obviously has many limitations, being retrospective, relying on telephone interviewing, and without any objective measurements of sexual arousal, such as penile plethysmography or vaginal photoplethysmography, which he fully discusses.

Arguably, one's fantasies, including masturbatory fantasies, are the best reflection of one's sexual arousal pattern compared with questions involving one's history of sexual interest or behavior. It is notable that in this study, among those who masturbate post-therapy, 68 percent of males and 41 percent of females still report same-sex fantasies on 20 percent or more of masturbatory occasions and only 31 percent of males and 72 percent of females report opposite-sex fantasies on 20 percent or more of masturbatory occasions. This masturbatory data suggest that change in one's sexual arousal pattern is difficult.

Spitzer, as well as the various national organizations cited in his article, suggests that more research could be done to further determine "reparative" therapy's risks versus its benefits. However, he then says that, realistically, it is unlikely, given the costs of such a study, that such research will be conducted in the future. Although "reparative"

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therapy concerns itself with change in sexual orientation, other therapies, such as cognitive behavioral therapy, concern themselves with the control or elimination of unwanted sexual behaviors and arousal, such as those present in the paraphilias or in individuals who are sexually compulsive (Abel et al., 1992; Benotsch, Kalichman, and Kelly, 1999; Kalichman, Greenberg and Abel, 1997). Further study of behavioral and/or pharmacological therapy to help such individuals seems indicated and appropriate. I think that Spitzer has made a substantial contribution, given limited resources, and would hope that more funding for the study of therapies involving not only the change and control of unwanted sexual behavior, but its origins and development, will become available.

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