POSITION STATEMENT

HOMOSEXUALITY

SASOP acknowledges that in the past, use of diagnostic systems that classified homosexuality as a disorder, may have caused patients distress. SASOP actively distances itself from this previously held position and endorses the equality clauses in the present constitution.

SASOP endorses the stance of the American Psychiatric Association that homosexuality per se implies no impairment in judgement, stability, reliability, or general social, vocational capabilities or increased psychopathology. (The APA removed homosexuality as a mental disorder from the Diagnostic and Statistical Manual of Mental Disorders (DSM) in 1973 after reviewing evidence that revealed it did not fit necessary criteria to be categorized as a mental illness.) SASOP undertakes to do all that is possible to decrease the stigma related to homosexuality wherever and whenever it may occur.

SASOP opposes any psychiatric treatment such as "reparative" or "conversion" therapy designed to change a person's sexual orientation from homosexual to heterosexual and supports the opinion of the APA that "there is no scientific evidence that reparative or conversion therapy is effective in changing a person's sexual orientation. There is, however, evidence that this type of therapy can be destructive." In fact reparative therapy runs the risk of harming patients by causing depression, anxiety, and self-destructive behavior.

SASOP however recognizes that the development of a homosexual or gay identity is extremely stressful. As a consequence patients may need psychotherapy in coming to self-fulfilling acceptance and self actualization. In all other respects, the therapeutic needs of patients should be based not on the grounds of sexual orientation but on the grounds of a sound clinical evaluation in which respect for the sexual orientation of the patient is implicit.

SASOP recognizes that bias-related incidents such as acts of violence or harassment, arising from anti-gay and lesbian prejudice are widespread in society and continue to be a source of individual suffering and trauma. These
incidents result in emotional and physical trauma for individuals, as well as stigmatization of affected groups. SASOP deplores such bias-related incidents and encourages its own member psychiatrists to take appropriate actions in helping to prevent such events, as well as to respond actively in treating the victims of such events.