

# Correction of Homosexual Desire in a Male Adolescent. A Case from Clinical Practice

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The article describes a clinical case with a 17-year-old male patient, who presented complaints about presence of his homosexual desire. He believed that his sexual orientation was pathology and existing statements about normality of homosexuality were political propaganda. He wanted to get rid of homosexuality, marry over time and have children. During an active inquiry he informed that the proportion of the homosexual component of his libido in its total structure was 90–95%, that of the heterosexual one being 5–10%. Though during his active inquiry the patient informed about presence of a minimally expressed heterosexual component, our comprehensive analysis of his psychosexual development, sexual behavior manifestations and erotic dreams did not reveal any presence of the heterosexual component. Nevertheless, the latter might be present because from the very beginning the patient felt a slightly expressed sexual desire during heterosexual masturbation. The following correction was made: (1) cognitive influences targeted at strengthening of the patient's set that it is normal to be heterosexual as opposed to homosexual; (2) aesthetic-erotic correction (viewing of beautiful women [naked and non-naked] using video materials for formation of the woman ideal); (3) hypnosuggestive correction of the sexual desire orientation with inclusion of the cognitive and behavioral (aversive) components; (4) prohibition of homosexually oriented masturbation and change over to heterosexually oriented one (sexual behavior training targeted at change of orientation of his sexual desire).

Complete normalization of the patient's health took place after 10 sessions of hypnosuggestive correction (programming, modelling) and retraining masturbation. This clinical observation once again demonstrates the possible effectiveness of conversion therapy with absence of any complications. Here we should emphasize that such therapy can be given only on the voluntary basis.

**Keywords:** *homosexuality, male adolescent, hypnosuggestion, sexual behavior training.*

## Корекція гомосексуального потягу у підлітка чоловічої статі. Випадок з клінічної практики Г. С. Кочарян

У статті наведено клінічний випадок, де йдеться про 17-річного пацієнта, який скаржився на наявність у нього гомосексуального потягу. Вважає таку сексуальну орієнтацію за патологію, а існуючі твердження про те, що гомосексуалізм є нормою, – політичною пропагандою. Хочє позбутися гомосексуальності, з часом одружитися та мати дітей.

При активному розпитуванні зазначає, що питома вага гомосексуального компонента лібідо у його структурі становить 90–95%, а гетеросексуального – 5–10%. Хоча при активному опитуванні пацієнт зазначив наявність мінімально вираженого гетеросексуального компонента, проте ретельний аналіз його психосексуального розвитку, сексуальних поведінкових проявів та еротичних сновидінь наявність гетеросексуального компонента не виявив. Проте наявність такого компонента імовірна, оскільки з самого початку при гетеросексуальній мастурбації у пацієнта фіксують слабкий статевий потяг.

Було проведено таку корекцію: 1) когнітивні впливи, спрямовані на підтримку настанови пацієнта на нормативність гетеросексуальності на відміну від гомосексуальності; 2) естетико-еротична корекція (розглядання красивих жінок [оголених і неоголених] з використанням відеоматеріалів для формування жіночого ідеалу); 3) гіпносуґестивна корекція спрямованості статевого потягу з включенням когнітивного та поведінкового (аверсивного) компонентів; 4) заборона на гомосексуально орієнтовану мастурбацію та переключення на гетеросексуально орієнтовану (сексуально-поведінковий тренінг для періорієнтації спрямованості статевого потягу).

Повна нормалізація стану здоров'я пацієнта відбулася після 10-ти проведених сеансів гіпносуґестивної корекції (програмування, моделювання) та перенавчальної мастурбації. Наведене клінічне спостереження вкотре демонструє можливість ефективності репаративної терапії з відсутністю розвитку будь-яких ускладнень. При цьому необхідно наголосити, що така терапія може проводитися лише на добровільній основі.

**Ключові слова:** *гомосексуальність, підліток чоловічої статі, гіпносуґестія, сексуально-поведінковий тренінг.*

### Introduction

At present there are two approaches in providing psychotherapeutic aid to ego-dystonic homosexuals (those homosexuals, who do not accept their sexual orientation). According to the first one, such cases should be adapted to orientation of their own sexual desire and helped in ad-

justing to live in the society with heterosexual standards [7]. This is so-called supportive, or gay affirmative, therapy. The second approach (reparative, conversion, sexual reorientation, differentiation therapy) is directed to help homosexual men and women in changing their sexual orientation. The former approach is based on the statement

that homosexuality is not a mental disorder [4]; this is embodied in the International Classification of Diseases, Tenth and Eleventh Revisions (ICD-10 and ICD-11), and the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5). From this it follows that those homosexuals, who do not accept their sexual orientation, should not be treated. Also, conversion therapy is called ineffective and, even more, able only to harm, that is not confirmed by experience of clinical work [2–8, 10–11]. On the basis of such false statements measures, sometimes unprecedented, are taken for banning conversion therapy.

Malta has become the first European country, where conversion therapy is officially banned. The bill concerning its ban was unanimously approved by Maltese legislators. Under this new law, anyone who tries to “change, repress or eliminate a person’s sexual orientation, gender identity and/or gender expression” will be fined up to 10,000 Euros or even jailed for up to a year. The bill also states that “no sexual orientation, gender identity or gender expression constitutes a disorder, disease or shortcoming of any sort”.

Bundesrat (the representative body of federal states in Germany) approved on June 5, 2020 the bill, which bans conversion therapy. Its delivery can be punished with imprisonment for up to one year, its promotion and facilitation being fined with up to 30,000 Euros, as *The Deutsche Welle* informs [1].

At present this therapy is legally prohibited for minors in 20 states and numerous municipalities in the United States; efforts are also made to expand the scope of this ban for adults [11].

As a matter of fact, these bans deprive ego-dystonic homosexuals of the opportunity to receive the aid they look for and as a result violate their rights. But the use of conversion therapy is not banned in the majority of countries, Ukraine being among them.

Below is a clinical example of successful correction of homosexuality with use of psychotherapeutic influences.

### Case report

Male patient L., 17, a second-year university student, did not work. He sought our medical advice on September 11, 2021.

**Complaints.** He presented complaints about presence of his homosexual desire. He believed that his sexual orientation was pathology and existing statements about normality of homosexuality were political propaganda. He wanted to get rid of homosexuality, marry over time, have children and live a normal life. During an active inquiry he informed that the proportion of the homosexual component of his libido in its total structure was 90-95%, that of the heterosexual one being 5-10%.

**Anamnesis.** Before the 5<sup>th</sup> form (the age of 11 years) he did not like anybody – either boys or girls. He had never had any romantic (platonic) desire to girls. In the 5<sup>th</sup> form he began to like boys, but it was not platonic libido any more: he imagined that he came into physical contact with them with resultant erection. He attempted to touch them accidentally, but he did not go further. At school and outdoors he started to wrestle with them intentionally that resulted in erection. He had never fallen in love with boys. It should be particularly emphasized that during all his life

the patient had never fallen in love with either males or females. He had never had any sexual intercourses.

**Masturbation** started from the age of 14-15 (the 7<sup>th</sup>-8<sup>th</sup> form). His **first ejaculation and orgasm** happened at the same age too. He masturbated using fantasies and photographs of clothed boys and additionally engaging more sexually explicit fantasies as well as he used video plots including porn ones: at first they contained naked men and later homosexual intercourses. From the very beginning, he had been masturbating every day.

**Erotic dreams.** He remembered that they appeared more than a year before and occurred once every two months. He did not dream sexual intercourses, and he had never felt any desire to kiss. He dreamt that he touched abdominal muscles and other parts of boys’ body except for their lips. During such dreams no orgasm and ejaculation took place.

In childhood, he was friendlier with girls. He did not like wrestling (except for with the erotic purpose); he was not fond of football and basketball either. During 11 years (from the 1<sup>st</sup> to 11<sup>th</sup> form) he enjoyed practicing ballroom dancing. Some period of time he also made yogic exercises, and he liked them.

He had never disguised himself as persons of the opposite sex, painted his lips, put on earrings or made up.

His mother was the leader in their family. He characterized her as very active and emotional. His father was the very opposite to her. It was his mother who paid much more attention to his education. His father worked much (“he had some business”) and came home after his work very late. Only his mother knew about his sexual orientation.

His mother’s delivery was normal; he was born mature and healthy.

He did not have any chronic diseases. He did not smoke, abuse alcoholic drinks and take narcotic drugs.

**Objective data.** Body height = 178 cm; body weight = 70 kg. He shaved himself once every 3-4 days (“such a necessity appears”). There was much hair on his arms and legs. Also, hair was present on his abdomen and chest. There was a hair “line” from his pubis to umbilicus. The size of his penis and testes was normal. His scrotum was sufficiently wrinkled and pigmented. His glans penis was freely exposed.

### Conclusion

The state of that young man could be assessed as ego-dystonic homosexuality. During his active inquiry the patient informed about presence of a minimally expressed heterosexual component. Yet our comprehensive analysis of his psychosexual development, sexual behavior manifestations and erotic dreams did not reveal any presence of the heterosexual component. Nevertheless the latter might be present because from the very beginning the patient felt a slightly expressed sexual desire during heterosexual masturbation.

### Recommendations.

1. Cognitive influences targeted at strengthening of the patient’s set that it is normal to be heterosexual as opposed to homosexual.
2. Aesthetic-erotic correction (viewing of beautiful women [naked and non-naked] using video materials for formation of the woman ideal).

3. Hypnosuggestive correction of the sexual desire orientation with inclusion of the cognitive and behavioral (aversive) components.

4. Prohibition of homosexually oriented masturbation and change over to heterosexually oriented one (sexual behavior training targeted at change of orientation of his sexual desire: experiencing of pleasant sensations, excitement and orgasm during heterosexual masturbation with resultant formation of heterosexual behavior stereotype).

**September 12, 2021. The first session of hypnosuggestive therapy was conducted.**

The following suggestion, which included 5 structural components, was made:

1 “The homosexual desire and intercourses are futureless. ... This is a dead-end road that leads to loneliness, absence of family and children”.

2. Twelve comparisons of the word “homosexuality” with other ones were pronounced, those words being associated with either unpleasant sensations, or unpleasant landscapes, or negative social consequences of homosexual relations, or mental disorders and somatic problems observed in homosexuals.

3. Liberation of the organism from the homosexual desire: “One. ... Your organism has begun to liberate from the homosexual desire... Two. ... The process of liberation from the homosexual desire is becoming still more expressed and passing still more intensively. Three. ... You are becoming liberated from the homosexual desire more and more. ... Four. ... The internal cleaner enters the most hidden areas of your psyche, your consciousness and subconsciousness, casting out residues of the homosexual desire, collecting them and throwing out of your organism like garbage in order to release it from this pathological programme, from this pathogenic garbage. ... Five. ... Your organism has been liberated from the sexual desire to males to the maximally full degree possible by today”.

4. Filling of the organism with the heterosexual desire: “One. ... Your organism has begun to fill with the heterosexual desire, which is filling every cellule of your body. ... Two. ...The desire to females is filling your every nerve cell. ... Three. ...The desire to girls and women is filling all your nervous system. ... Four. ... The heterosexual desire is filling every unit of your mental space, your consciousness and subconsciousness. ... Five. ... Your psyche, your nervous system, all your organism have been filled with the sexual desire to persons of the opposite sex”.

5. A change of the aesthetic and sexual perception of persons of the female and male sex, intensification of the sexual desire to girls and women: “From now persons of the female sex arouse your interest. ... You like their beautiful faces, nice figures, pleasant voices. You like to communicate with them, you feel a strong sexual desire to them. ... On the contrary, persons of the male sex are perceived by you only as friends, comrades, fellows, acquaintances and strangers, but sexually neutral objects. ... Any sexual desire to them is absolutely absent”.

Also suggestions were made (nonstructural component), which were focused on programming of good mood: “From now, from the moment of waking up in the morning and by the moment of falling asleep in the evening you are in good and sometimes festive mood. ... You perceive life in

optimistic, pink shades; you enjoy life and derive pleasure from it”.

**September 17, 2021.** The patient noticed small positive shifts. The homosexual and heterosexual components in the structure of his libido made, respectively, 85 and 15%. His reaction to girls had become slightly larger. During the previous period he masturbated 3 times. He used fantasies, imagined his wrestling with boys. He had sexual excitement and orgasm.

**September 17, 2021. The 2<sup>nd</sup> session of hypnosuggestive therapy was conducted;** that was the same as the 1<sup>st</sup> one.

**September 21, 2021.** The patient noticed positive changes after the second session of hypnosis. The homosexual and heterosexual components in the structure of his libido made, respectively, 70 and 30%. He became to pay attention to girls. He masturbated every day using porn (female masturbation). That kind of plot was recommended by me. He had weak sexual excitement and erection manifested by 80%, but he failed to desire himself to the point of ejaculation and orgasm. The above masturbation did not cause any aversion; he felt weak satisfaction.

**September 21, 2021. The 3<sup>rd</sup> session of hypnosuggestive therapy was conducted;** that was the same as the 2<sup>nd</sup> one.

**September 24, 2021.** No changes in the structure of his libido were observed. He masturbated every day using the same porn plots as after the second session of hypnosis. Like after the second session of hypnosis, masturbation caused weak sexual excitement and erection manifested by 80%, but he failed to desire himself to the point of ejaculation and orgasm. The above masturbation did not cause any aversion; he felt weak satisfaction.

**September 24, 2021. The 4<sup>th</sup> session of hypnosuggestive therapy was conducted,** where the same suggestions as during the previous one were used. At the same time, those were supplemented with another suggestion. It was suggested that during masturbation with use of porn (female masturbation) he would be well excited and his penile erection would be expressed by 100%. Also, it was suggested that the above masturbation would cause pleasant voluptuous sensations accompanied by sexual excitement. It was suggested that those sensations and sexual excitement, which accompanied them, would spread all over his organism, wholly involving it, and in that flow of voluptuousness and constantly increasing sexual excitement he would steadily move towards ejaculation and orgasm.

**October 1, 2021.** A slight positive shift in the structure of his libido had happened. At that time the proportion of the homosexual and heterosexual components in the structure of his libido made, respectively, 65 and 35%. He became to pay a bit more attention to females. During the period of time after the previous session of hypnosis he masturbated two times a day. The heterosexual masturbation was performed using previous video plots. He noticed that then he had sexual excitement expressed by 80% (in the beginning of the treatment with use of heterosexual masturbation that excitement was by 30-40%). At that time voluptuous sensations made 20%, whereas in the beginning of the treatment during homosexual masturbation those ones were almost absent. But he had failed to achieve ejaculation and orgasm with that masturbation yet.

**October 1, 2021. The 5<sup>th</sup> session of hypnosuggestive therapy was conducted;** that was the same as the 4<sup>th</sup> one.

**October 5, 2021.** Positive shifts had taken place during the time after the 4<sup>th</sup> session of hypnosis. The homosexual and heterosexual components of his libido made, respectively, 60% and 40%. During the above period of time he masturbated twice a day. On October 2, 2021 ejaculation with masturbation occurred for an internet plot where wrestling women wore bras and shorts. After that, ejaculation and orgasm occurred every time when he watched those scenes. Sexual desire was expressed by 100%, erection by 90% or a bit more, orgasmic sensations by 40% versus those ones that had occurred before, when he watched gay porn. Alongside with internet products he viewed photographs of beautiful women (including naked ones).

**October 5, 2021. The 6<sup>th</sup> session of hypnosuggestive therapy was conducted;** that was the same as the previous one.

**October 12, 2021.** Slight positive shifts had taken place. When he masturbated with previously used video plots two times every day, his desire was expressed by 100%, erection by 90-95% and orgasmic sensations by 60% (versus those ones, which occurred with use of gay porn). Ejaculation and orgasm happened every time. The proportion of homosexual and heterosexual components in the structure of his libido was, respectively, 60 and 40%.

**October 12, 2021. The 7<sup>th</sup> session of hypnosuggestive therapy was conducted.** That time some changes were introduced into its structure. Thus, the 1<sup>st</sup> and 2<sup>nd</sup> structural components, previously used in hypnosuggestive programming, were excluded. But hypnosuggestive modelling was made. It was suggested to the patient that he was caressing and kissing the girl, who satisfied his taste. He saw that plot and experienced appropriate feelings. He informed that at that time his sexual desire, sexual excitement, pleasant voluptuous sensations and erections were expressed by 30% (separate self-evaluation of each of the above parameters). It was also programmed that masturbation with use of video plots with naked women would develop fully expressed sexual desire, pleasant voluptuous sensations, sexual excitement, penile tension, bright and strong orgasm.

**October 19, 2021.** For the time after the 7<sup>th</sup> session of hypnosis the rate of masturbation and the character of video plots, used during it, were as before. No changes in the proportion of the homosexual and heterosexual components of libido as well as in separate characteristics of the masturbatory act had taken place. It was revealed that when during his masturbation he watched video plots with women only their legs excited him.

**October 19, 2021. The 8<sup>th</sup> session of hypnosuggestive therapy was conducted;** by its structure it was significantly identical to the previous one. In the process of modelling of the preliminary period of sexual intercourse the patient's sexual desire and voluptuous sensations were expressed by 40%, sexual excitement and erection by 50%. That time, in addition, the basic period of sexual intercourse was modelled. According to self-evaluation, the expression of felt pleasant voluptuous sensations was 60% and that of sexual excitement and erection was 50%.

**October 26, 2021.** The expression of both homosexual and heterosexual components of libido was 50%, this fact

demonstrating further improvement. During the time after the 8<sup>th</sup> session of hypnosis he masturbated with the same rate as before. But then he masturbated viewing naked women, who were wrestling. In such cases his sexual desire was expressed by 60%, erection by 95%, orgasmic sensations by 60%. Ejaculation and orgasm of erection occurred.

**October 26, 2021. The 9<sup>th</sup> session of hypnosuggestive therapy was conducted.** Its structure was the same as of the 8<sup>th</sup> one, only without programming of sensations felt during masturbation. In the process of modelling of sexual intercourse with the ideal girl, during the preliminary period the expression of sexual desire was 50%, voluptuous sensations 40%, sexual excitement 50%, erection 60%. During the basic period of sexual intercourse the expression of sexual desire was 60%, voluptuous sensations 50%, sexual excitement and erection 60%.

**November 2, 2021.** For the period after the 9<sup>th</sup> session of hypnosis he masturbated twice every day. In such cases he used video plots with naked wrestling women. Then his sexual desire was expressed by 100%, voluptuous sensations by 80%, sexual excitement by 80%, erection by 95%. Orgasm, which occurred in ejaculation, was expressed by 80%. The proportion of his homosexual and heterosexual components of libido was, respectively, 40 and 60%. That is, versus the previous consultation, further positive shifts were registered.

**November 2, 2021. The 10<sup>th</sup> session of hypnosuggestive therapy was conducted;** to a considerable degree it corresponded to the previous one. When sexual intercourse with the ideal girl was modelled, the following characteristics of its parameters were present. During the preliminary period the sexual desire was expressed by 60-70%, voluptuous sensations by 70%, sexual excitement and erection by 70%. When the basic period of sexual intercourse was modelled, the expression of sexual desire, voluptuous sensations, sexual excitement and erection was 80% (for all listed parameters). The patient also informed that in case of sexual intercourse modelling the true (actual) erection achieved 70%. In addition it was suggested (programming) that from that moment during heterosexual masturbation with use of last video plots all its parameters (sexual desire, voluptuous sensations, sexual excitement, erection and orgasm) would be expressed by 100%.

**November 9, 2021.** During the period after his previous visit he masturbated with the same rate using a video plot with a naked masturbating girl. In those cases his sexual desire, voluptuous sensations, sexual excitement, erection and orgasm, which occurred in ejaculation, were expressed by 100%. The expression of his heterosexual and homosexual components of libido was, respectively, 90 and 10%. Analysis of the dynamics of changes, which took place in the structure of sexual desire, is given below.

The presented table demonstrates how during the correction process an increase in the heterosexual component of libido, which finally achieved a very high level, took place. The above clinical material shows dynamics in the strengthening of expression of separate sexual manifestations in heterosexual masturbation. One of interesting moments consists in the fact that ejaculation and orgasm occurred only after the 5<sup>th</sup> session of hypnosis and everyday heterosexual masturbation. If during its performance from the moment of appearance of ejaculation accompany-

**Changes in the proportion of the homosexual and heterosexual components of libido in the process of correction**

	Homosexual component of libido (%)	Heterosexual component of libido (%)
Before treatment	90–95	5–10
After the 1st session of hypnosis	85	15
After the 2nd session of hypnosis	70	30
After the 3rd session of hypnosis	70	30
After the 4th session of hypnosis	65	35
After the 5th session of hypnosis	60	40
After the 6th session of hypnosis	60	40
After the 7th session of hypnosis	60	40
After the 8th session of hypnosis	50	50
After the 9th session of hypnosis	40	60
After the 10th session of hypnosis	10	90

ing orgasm the latter was expressed by 40%, after the 10<sup>th</sup> session of hypnosis it achieved 100%.

**November 9, 2021. The 11<sup>th</sup> session of hypnosuggestive therapy was conducted.** Its structure was the same as after the 10<sup>th</sup> session, but that time without programming of hundred-percent intensity of separate sensations felt in heterosexual masturbation. When sexual intercourse with the ideal girl was modelled, the following facts were observed. During the preliminary period his sexual desire, voluptuous sensations, sexual excitation and erection were expressed by 80% (each of the components listed). As for the basic period, the intensity of each above

characteristic of the sexual intercourse was 100%, and the real (actual) erection during modelling was 70-80%.

**November 9, 2021.** The treatment was completed. It should be considered that complete normalization of the patient's health took place after 10 sessions of hypnosuggestive correction (programming, modelling) and retraining masturbation. The patient remained absolutely satisfied with the achieved results.

This clinical observation once again demonstrates the possible effectiveness of conversion therapy with absence of any complications. Here we should emphasize that such therapy can be given only on the voluntary basis.

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**REFERENCES**

- Germany passed a law banning the «treatment» of homosexuality.
- Kocharyan G.S. (2020). Bisexuality: general data and clinical observation. *Health of Man*, 2, 71–80.
- Kocharyan G.S. (2009). Greek love: get tested for homosexuality. M.: Eksmo, 288 p.
- Kocharyan G.S. (2008). Homosexuality and modern society. Kh.: EDENA, 240 p.
- Kocharyan G.S. (2020). Conversion Therapy. Pros and Cons. Discussion. *Health of Man*, 1, 43–49.
- Kocharyan G.S. (2016). Experience of using hypnosuggestion in the conversion of the homosexual component of libido. *Psychological Counseling and Psychotherapy*, 2(6), 39–55.
- Kocharyan G.S. (2010). Psychotherapy homosexuals which reject their sexual orientation: the modern analysis of the problem. *Psychiatry and medical psychology*, 1–2, 131–141.
- Kocharyan G.S. (2021). Hypnosuggestion in Correction of Homosexual Desire: A Case from Clinical Practice. *Psychological Counseling and Psychotherapy*, 16, 45-52.
- Lysov V.G. (2019). Information and analytical report. Rhetoric of the homosexual movement in the light of scientific facts, Krasnoyarsk: Research and Innovation Center, 750p.
- “Malta bans ‘gay cure’ conversion therapy
- Nicolosi J, Byrd A.D, Potts R.W. (2000). Retrospective self-reports of changes in homosexual orientation: a consumer survey of conversion therapy clients. *Psychol Rep*, 86 (3 Pt 2), 1071–1088.
- Sullins D.P., Rosik C.H., Santero P. (2021) Efficacy and risk of sexual orientation change efforts: a retrospective analysis of 125 exposed men, *F1000Research*. 10,