

Response to Rebecca Davis, “My Homosexuality is Getting Worse Every Day’:
Norman Vincent Peale , Psychiatry, and the Liberal Response to Same-Sex Desires in
Mid-Twentieth-Century America.”

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In this terrific article, Rebecca Davis argues that liberal Protestants claimed mid-century psychiatric truths about homosexuality to promote normative heterosexual marriage and to frame transgressive sexual desires as immature and an obstacle to lifelong happiness. Rather than describing the acts and desires as sinful or contrary to biblical mandate, Davis suggests that liberal Protestants viewed homosexuality as a psychological disorder that could be cured by trained medical experts if the subject was willing to undergo therapy.

This microhistory, a moment recorded in an answer to a letter penned by Dr. Norman Vincent Peale, and found by Davis in the correspondence file in Special Collections at Syracuse University in 2004, offers a glimpse of a transitional moment. In December 1956, Peale wrote before the AIDS crisis effectively linked homosexuality with disease in the minds of many, before the Stonewall Riot (June 1969) connected homosexuality to crime, and before the first Gay Pride parades (soon after in the early 1970s) brought LGBT people and issues to the attention of mainstream media. Peale responded to a query sent to *Look* magazine from a nineteen-year-old man who said he “wanted to be like other boys . . . I hate being this way and I want to do something about my problem if I can.” Rather than encouraging the young man to read biblical passages that condemn homosexuality, pray for healing, or consult with a pastor to overcome sinful or even criminal desires, Peale offered depth psychology as the appropriate cure for his “emotional sickness.” Peale’s printed response, Davis tells us, confirmed for liberal Protestants and the larger reading audience of *Look* magazine that homosexuality was a mental illness that could be cured through psychiatric therapy.

What are we to make of this moment in time? How representative was this printed response of Peale’s own thinking or of mid-century liberal Protestantism? Is this the moment when liberal Protestants granted authority, or at least as Davis believes, deferred authority, to scientific experts in realms they began to deem as more medical than spiritual? I am inclined to agree with Davis but I can imagine some objections to this broad claim. There are no other printed responses to questions about homosexuality, although Davis found 130 letters similar to the young man’s sent to Peale after his response was published. Many of the writers expressed frustration that they had not been cured by psychiatric treatment (as he advised) and at least one person wondered how the lessons of Peale’s best-selling book *The Power of Positive Thinking* might be used to overcome homosexuality. Notably, Peale’s printed response to the original inquiry was one of only three times over the course of five years that he did not offer the prescription of “positive thinking” as part of the cure for what ailed the writer. His response urges therapy, but it is devoid of his signature therapeutic language that typically accompanied his writings. “Ultimately,” Davis explains, “Peale deferred to psychiatry on the question of same-sex desire because the mental illness model of

homosexuality fit his theological worldview.” (360). Peale’s worldview sought mature happiness through heterosexual marriage and family. Any impediment to that progression, such as same-sex desires, needed to be overcome. He, however, was not the man for the job.

This is where the conservative Protestants that I am so familiar with found their niche. As Davis rightly points out, within a decade conservative Protestants would latch on to the medical (mostly behavioral) models of curing homosexuality and combine those with, in Davis’ words, “a robust theology of sin” (361). While liberal Protestants continued to follow the beat of the medical drum as it changed its tune on scientific views of homosexuality, conservative Protestants embraced the earlier theories and created their own counseling centers, published their own books on therapeutic approaches to homosexuality, and developed their own courses on pastoral counseling regarding this sensitive topic. Similar to Peale, conservative Protestants understood that the cornerstone of mature happiness was heterosexual marriage and family. Unlike Peale, prayer and bible study became the hallmark of their approach to a cure for same-sex desires. The goal of heterosexual marriage, according to conservative Protestants, was not worldly happiness, but rather eternal happiness through following God’s plan for all of creation.

Conservative Protestants by the mid-1970s typically included a question and answer section in the back of marriage manuals that, among other issues, addressed the concern of same-sex desires. By the 1980s books would begin to be published by conservative Christian publishers specifically on the topic of homosexuality. The early question and answer sections found in marriage manuals in the 1970s are a good place to highlight the similarities and differences in the use of therapy to overcome same-sex desires. Over time, liberal Protestants will follow the lead of medical professionals and, for the most part, discard a view of “curing” homosexuality. But at the moment in time that Davis explores, Peale has some things in common with the conservative Protestant approach to homosexuality that will increasingly depend on the belief in a diagnosis and a cure.

One of the striking similarities to me is the reliance on personal will to effect a cure. Peale assures the inquirer, “If you want to get over your trouble and [if you] have the will to follow directions, I feel sure you can become a normal person.” (351). Change, for Peale, was a matter of the will. The same held true for conservative Protestants. Clearly, they would invest much time and energy on blaming poor parenting (the “smother mother” is my personal favorite) and learned behavior for same-sex desires. But beneath the blame is the will of the individual to choose to change. In other words, there are discernible reasons that explain why individuals desire love and affection from members of the same sex. This desire, according to conservative Protestants, is unnatural and against biblical principles. But, a solution is possible. Similar to Peale, conservative Protestants like Tim LaHaye argued that “The answer to this question [homosexuality] lies in the individual being willing to accept Jesus Christ as personal savior. If such a person is willing, a cure is possible.” (LaHaye, *The Act of Marriage*, 1976, 1998, p. 358). In the words of Peale, “If you want to get over your trouble and [if you] have the will to follow directions, I feel sure you can become a normal person.” Of course for conservative Protestants it is not just the individual but also the Holy Spirit

or God's indwelling power that allows this to happen. Nonetheless, the will to change remains the necessary component for a therapeutic cure.

Davis' article has led me to wonder anew about the vexed relationship among scientific theories, sexualities, and Protestants. It seems to me that the use of scientific theories to explain social or theological questions more often leads to harm than good. Peale wasn't responding to what he believed was a theological question, but many of the unpublished letter writers craved a spiritual response. What about prayer? What about the Bible? To harness scientific or quasi-scientific theories in support of scripture and theological views of human nature and purpose can cause heart-wrenching spiritual and psychological damage that no power of positive thinking may ever overcome. Liberal and conservative Protestants know this and yet they continue to use science, medical expertise, research, empirical studies, you name it, to validate their theological and social positions. This moment that Davis explores can help us think about the question of why Protestants, who as a group are so wedded to the notion of the power of the will and individual agency, are simultaneously driven over and over again to accept the authority of leading cultural experts (whether it changes their minds or supports their opinions) in matters of theological or spiritual concern? Why do they routinely refer to outside knowledge sources as they affirm the authority of the individual's will? Liberal and conservative Protestants from Peale to today have used science in multiple ways to explain and shape human sexuality. A question to consider is what happens when the individual through their own will acknowledges that their experience of sexual desires contradicts the authority of medical science and Protestant clergy? Will this be heresy or a reformation?