



The voice of Indonesian gay men who want to have heterosexual orientation ☆



Nanang Khosim Azhari, Herni Susanti*, Ice Yulia Wardani

Faculty of Nursing, Universitas Indonesia, Depok, West Java, Indonesia

Received 13 November 2018; accepted 17 April 2019

Available online 8 July 2019

KEYWORDS

Homosexual;
Heterosexual;
Indonesia;
Motivation;
Sexual orientation

Abstract

Objective: Some homosexuals have a strong desire to change their sexual orientation to a heterosexual one. This study attempted to understand the Indonesian gay men's motivations to change their sexual orientation.

Method: Using a qualitative study design and a snowball sampling approach, we carried out in-depth interviews with six young adult gay men living in two main cities in Indonesia.

Results: We identified three major themes: (1) motivations to change sexual orientation, (2) strategies to change sexual orientation, and (3) internal and external factors related to sexual orientation change.

Conclusions: This study recommends a comprehensive support from mental health services to help individuals address the sexual orientation matters.

© 2019 Elsevier España, S.L.U. All rights reserved.

Introduction

Sexual orientation is a long-lasting emotional state that motivates romantic attraction and the desire for intimate relationships.¹ Sexual orientation is also defined as the attitude and actions related to sexual contact with

others.² Sexual orientation is divided into three categories: heterosexual (opposite-sex attraction), homosexual (same-sex attraction), and bisexual (opposite- and same-sex attraction).^{1,3} While heterosexual orientation is the most common in society at large,⁴ homosexuals and bisexuals are often perceived as sexual orientations with greater health risks.⁵

A person's sexual orientation can be determined by several combinations of factors including genetic, cognitive, hormonal, and environmental factors.⁶ Other determinants of homosexual behavior are categorized according to two approaches: a physiological approach (hormonal involvement) and a psychological approach (individual experience).

☆ Peer-review under responsibility of the scientific committee of the Second International Nursing Scholar Congress (INSC 2018) of Faculty of Nursing, Universitas Indonesia. Full-text and the content of it is under responsibility of authors of the article.

* Corresponding author.

E-mail address: herni-s@ui.ac.id (H. Susanti).

To date, there is no accurate data on the number of homosexuals in the world. It is estimated that approximately 10% of the male population is homosexual.⁶ In Indonesia, while projections exist, there is no exact data of the number of homosexuals. The Ministry of Health of the Republic of Indonesia only provides figures on the number of homosexuals in its estimates and projections of the number of HIV cases from 2011 to 2016, during which the projected gay population increased every year by 15% from the initial figure of 14,532. In addition, Oetomo⁷ stated that the gay population in Indonesia is about 1% of the total Indonesian population.

Homosexuals in Indonesia are in the minority group due to their small numbers and societal rejection based on social and religious norms. For these reason, there have been some formerly homosexual individuals who have subsequently decided to change their orientation to heterosexual, either directly or indirectly, through what is called *reorientation*.⁸ Reorientation is the change in individual sexual orientation from homosexual (i.e., gay or lesbian) or bisexual to heterosexual.⁹ Some informal sources describe having interviewed former homosexuals who recounted the difficult experience of returning to heterosexuality; some individuals successfully returned while most failed.^{8,10,11}

Homosexual behavior is described as a state that exists along a continuum from exclusively heterosexual to exclusively homosexual behavior. A person who initially behaves heterosexually may become homosexual and vice versa.⁶ This means that when an initially heterosexual person decides to become homosexual or vice versa, the person will pass through the stages of behavioral change. The phenomenon of sexual reorientation has been widely studied.^{9,12,13} The motivation to change sexual orientation may derive from the impact of one's interaction with situations experienced.¹⁴

Mental health nursing is an area where human behavioral science as well as psychosocial, biopsychosocial, and personality theories are applied and where self-therapeutic techniques are the primary instruments used in providing nursing care.¹⁵ When individuals are not comfortable with their sexual orientation, it is the duty of nurses to provide them with a sense of comfort in relation to that orientation by providing nursing care in accordance with their needs.

In Indonesia, studies on the motivations for sexual orientation change are scant. Related research was conducted by Fatimah on the self-transformation of former lesbians.¹⁶ However, the study only emphasized efforts made to adopt a heterosexual orientation and the factors behind the change. Hence, there is a gap in the understanding of the motivations behind sexual orientation change from homosexual to heterosexual—understanding that is essential for mental health workers as well as nurses.

Method

We used qualitative descriptive research method. Research with qualitative methods has the advantage of producing more detailed and richer data about participants and their cases or experiences. Qualitative descriptive research is an approach that aims to understand the phenomena

experienced by research subjects in terms of behavior, perception, motivation, and action in a comprehensive manner and in a descriptive form as well as in a scientific context by utilizing various scientific method.¹⁷

Participant recruitment process

We employed key informants to recruit participants in two major cities in Indonesia, i.e., Semarang and Jakarta, using snowball sampling method. This technique was used because the sample is not easily accessible and the researchers were obliged to maintain the participants' confidentiality.^{18,19} We provided detailed information of the study to the key informants, who then recruited eligible participants (adult male described themselves as a homosexual wishing to change to heterosexual). We followed up the prospective participants to establish rapport and to explain about the study. We allowed them time to ponder their decision before participating in the study. Upon their agreement and signing of informed consent, we started the interview, which lasted for approximately 45–120 min. After interview with six participants, we reached data saturation. In qualitative research, the required number of participants is determined when there is no new data being discovered from added participants—the so-called saturation point.^{18,20}

Ethical clearance was obtained from the Ethics Committee of the Faculty of Nursing, Universitas Indonesia. Three main principles of ethics were applied to prevent a violation of the code of ethics, i.e., beneficence, respect for human dignity, and justice.²⁰ The data in the study was collected from December 2016 until early April 2017. Upon completion of the data collection, the data were transcribed and analyzed, after which the researchers conducted a thematic analysis. Thematic analysis is a flexible method of analysis; thus, it provides a flexible and useful research tool that can provide rich and detailed data complexity.²¹

The credibility of this study was enhanced by including others (i.e., the main researcher's supervisors) to ensure that the research design was properly applied and to obtain feedback on data analysis.^{22,23} For dependability, the main researcher involved his supervisors as independent auditors to help identify the biases and data assumptions.^{23,24} In addition, the researcher increased the transferability of the study by providing a sufficient picture of the research context, process, and participants.^{23,25} Finally, confirmability was attained by ensuring that the interpretation was purely derived from the data and research situation and not from the beliefs, imagination, or biases of the researcher.²⁶

Results

Characteristics of participants

The characteristics of the participants in this study are summarized in [Table 1](#).

Six participants were interviewed in this study. All participants identified themselves as homosexuals who wished to change their sexual orientation to heterosexual. All participants were in the early adult developmental stage. In their childhood, almost all participants perceived themselves as having feminine characteristics and preferred to mingle with

Table 1 Characteristics of participants.

Category	Participant 1	Participant 2	Participant 3	Participant 4	Participant 5	Participant 6
Age	26 years old	29 years old	20 years old	24 years old	27 years old	32 years old
Religion	Islam	Islam	Islam	Islam	Islam	Islam
Ethnicity	Jawa	Minang	Sunda	Bugis	Sunda	Sunda
Sex	Male	Male	Male	Male	Male	Male
Marital status	Single	Single	Single	Single	Single	Married
Education	Bachelor	Master	High school	Diploma	Master	Bachelor
Occupation	Teacher	Government employee	Private employee	Nurse	Government employee	Private employee

female friends. The participants began to accept their identity as gay in their adolescence and all participants hid their homosexual identify. Participants came from different levels of education, from high school to master's degree.

Through performing thematic analysis, three themes were identified: (1) motivation to change sexual orientation, (2) strategies used to change sexual orientation, and (3) internal and external factors inhibiting sexual orientation change.

Motivation to change sexual orientation

This study identified several reasons that motivated the participants to change their sexual orientation, such as the desire to marry a woman, religious values, traumatic experiences between couples, and parental considerations. Here is an example statement from a participant:

... The turning point is somehow the way I look at myself, I also want to have a future and a wife, my parents also keep asking me to marry soon; those are all motivations. I then realize that I have to change (P5)

In the in-depth interviews, the participants revealed their reasons to change their sexual orientation, such as the desire to establish a formal and legal marriage with a member of the opposite sex and to have offspring, since being gay would not enable them to do so. All participants were Muslim, and Islamic teaching prohibits homosexual behavior. The participants considered their sexual orientation to be a test from their Lord that they had to pass by changing their sexual orientation. The participants also revealed the trauma of being cheated on by same-sex partners; as a consequence, changing their sexual orientation seemed a viable coping mechanism to prevent such occurrences in the future. The participants also felt obliged to make their parents happy by being heterosexual, as their parents would not accept them being gay. These are some of the reasons that motivated the participants to change their sexual orientation.

Strategies used to change sexual orientation

The strategies of the participants to change their sexual orientation were having social control by cutting off the interaction with their fellow gay friends and avoiding the circles of gay friends. They also attempted to control the visual stimulation by not watching pornographic content

and averting their gaze from men that attracted them. Subsequently, they exercised spiritual control through reciting the Quran, being closer to God, and doing repentance. Here is an excerpt from a participant:

... Being closer to God, especially when my homosexual upheaval emerged. One of my friends who's Christian did exactly the same thing. He was religious and resorted to God when the desire emerged. (P2)

The last resort of participants was professional assistance. Almost all participants in this study have undergone hypnotherapy. In this study, all participants had a common goal (to change their sexual orientation) and had already made an effort to reach the goal. Participants who had previously engaged in a homosexual lifestyle attempted to change by not making contact with gay friends and leaving social media to remove all existing contacts. However, the temptation also emerged from the internet in the form of pornographic videos and images of attractive men that undermined their transition to heterosexuality. The participants coped with such temptations by controlling their viewing of such material.

Internal and external factors inhibiting sexual orientation change

The most significant factor inhibiting participants' change of sexual orientation found in the course of this study was the existence of homosexuals in the surrounding environment. Participants stated that if they were commuting or traveling, they would meet with fellow homosexuals. The next most significant inhibiting factor was a lack of self-confidence. The existence of pornographic sites was another inhibiting factor, as revealed by the participant below:

... There should be a way to impede pornographic content access, especially threads while browsing; I think the internet plays the major role here (P6)

Discussion

Motivations for changes in sexual orientation

This study discovered that there are certain reasons that can motivate participants to change their sexual orientation, such as the desire to marry, religious values, traumatic experiences with same-sex partners, and parents' views.

Participants expressed their desire to marry and have offspring. A study conducted in Bandung, Indonesia that surveyed views of the gay people on opposite-sex marriage found that interest in marriage among such young gay adults was rather high (i.e., 62.5% of 40 respondents).²⁷ In the present study, we had five out of six participants who expressed their desire to get married and have children. Another participant said that he wanted to be a man like other married heterosexual men.

Religion was also found to be a motivation for gays to change their sexual orientation. A study conducted by Karten, reported that as many as 88% of participants said religion is the greatest motivation in sexual orientation change.²⁸ Research conducted by Shidlo and Schroeder showed similar results, indicating that one of the motivations for orientation changes is religion.²⁹ Various religions, such as the Protestant Church in Western Indonesia, oppose homosexual behavior.³⁰ All participants in this study are Muslim, and Islamic teaching bans homosexual behavior, as narrated in the story of the Prophet Lut.³¹

Traumatic experiences with same-sex partners, such as being cheated on, were also mentioned as the source of motivation for participants to change their sexual orientation.³² Some participants in the current study described same-sex relationships as “just a momentary relationship” that would not last forever. A prior study in Indonesia also indicated that same-sex relationships could not bring true happiness and that such relationship would not last forever as they would run up against the incapability of producing offspring.¹⁶

Strategies for changing sexual orientation

In an attempt to change sexual orientation, the participants reported having executed several strategies, including social control, visual control, spiritual control, and seeking professional assistance. Self-control turned out to be paramount, since the participants were unable to modify their environment to assist them in the process of changing their sexual orientation. Behavior modification can be used to improve the ability to control oneself physically and mentally.³³

Spiritual control was also employed by some participants in an attempt to change sexual orientation. Spiritual control had a considerable degree of success. The participants said that if their sexual upheaval increased, then they would try to get closer to God. This statement is in accordance with the findings from a study conducted by Weiss et al., on the change of sexual orientation through a religious method: 23% of 61 subjects reported successful changes in sexual orientation and heterosexual function.³⁴

A study conducted by Rosyad on 64 health workers and 21 gay participants showed that the homosexuals considered that health workers stigmatized them, for example, by assuming that homosexuality is a deviation from religious norms, customary norms, and human nature and that homosexuality can be contagious.³⁵ This became an encouraging factor for participants to seek help from other professionals, such as hypnotherapists, as the participants in this study did.

Internal and external factors inhibiting sexual orientation change

In this study, the participants expressed that pornography was a significant obstacle to changing their sexual orientation and that there is abundant, accessible pornographic content on the internet. This result parallels the findings of a study conducted by Weiss et al., which reported that homosexuals were struggling to resist pornography in their attempt to change their sexual orientation.³⁴ This means that internet exposure creates considerable difficulties for gay people wishing to change their sexual orientation.

Secondary inhibiting factor was low tolerance for change. The participants were not confident and felt they did not have the ability to change their homosexual behavior. This was almost identical to the results of research conducted by Darojah, which indicated that the perception of the difficulty of ceasing unwanted behaviors was one of the factors inhibiting subjects from stopping.³⁶

This research has several limitations. While the aim of the study was to explore the motivations of homosexuals who had a desire to change their sexual orientation, the research failed to recruit women participants (lesbians), so the findings pertained solely to gay males. We also had difficulty in obtaining more participants due to the nature of the gay community in the research setting, which was small in number and secretive.

Conclusions

This investigation into the motivations for changing sexual orientation among homosexuals in Indonesia involved six participants and revealed three themes: motivation for sexual orientation change, strategies used to change sexual orientation, and internal and external inhibiting factors. In general, the findings echoed the discoveries of other studies worldwide. Nevertheless, the current investigation underlines that religious values remain an essential consideration for homosexuals in the country interested in transforming their sexual orientation. Further, such values were shown to be quite influential to drive the homosexuals to execute religious activities in order to manage their unwanted homosexual behaviors. Spiritual control through being closer to God was considered to enable the participants to strengthen their confidence in the possibility of changing their sexual orientation. This spiritual approach was considered more beneficial than professional help, which was only offered to the participants through the assistance of hypnotherapists. The results of this study are expected to be the basis of developing a comprehensive nursing care program to understand and help clients who want to change their sexual orientation by addressing their various motivations and identifying potential approaches as well as considering the obstacles in the Indonesian context.

In addition, the results of this study indicate that the greatest obstacle to changing sexual orientation was access to pornographic content on the internet, especially that related to same-sex relations. Governmental institutions that make policy for and oversee this area, such as the Ministry of Communication and Information, should pay

more attention to the use of the internet, with its abundant and easily accessible pornography.

Conflict of interests

The authors declare no conflict of interest.

Acknowledgements

This work is supported by Hibah PITTA 2017 funded by DRPM Universitas Indonesia No. 378/UN2.R3.1/HKP.05.00/2017.

References

- American Psychological Association. Answer to your question: for a better understanding of sexual orientation and homosexuality [Internet]; 2008.
- DiLorio C, Dudley WN, Soet JE, McCarty F. Sexual possibility situations and sexual behaviors among young adolescents: the moderating role of protective factors. *J Adolesc Health*. 2004;35:528, <http://dx.doi.org/10.1016/j.jadohealth.2004.02.013>, e11–20
- Carroll LJ. *Sexuality Now: Embracing diversity*. 4th ed. USA: Belmont: Thomson Learning Inc.; 2012.
- Stuart GW. *Principles and practice of psychiatric nursing*. Missouri: Elsevier Mosby; 2013.
- Ott MA. Examining the development and sexual behavior of adolescent males. *J Adolesc Health*. 2010;46 4 Suppl.:S3–11.
- Sanrock, J.W. *Adolescence: Perkembangan Remaja (edisi keenam)*. (Penerj. Shinto B. Adelar, Sherly Saragih; Ed. Wisnu C, Kristiaji, Yati Sumiharti). Jakarta: Erlangga; 2003.
- Oetomo D. *Memberi Suara pada yang Bisu*. Yogyakarta: Galang Press; 2001.
- Oktavia S. Wawancara Eksklusif Mantan Lesbian Yang Sudah Sembuh!!! [internet]; 2015 [cited on 19 September 2016]; Available from: <http://indonesiaone.org/wawancara-eksklusif-mantan-lesbian-yang-sudah-sembuh/>
- Flenjte AM. *Experiences of ex-ex-gay individuals: is there a relationship between sexual reorientation therapy and psychological functioning?* United State: Proquest; 2012.
- Siraaj. Kisah Nyata Taubat Seorang Gay: Ketika Saya Menemukan Diri Saya Seorang Gay; 2012 [internet] [cited 07 December 2016]; 2012 taubat. Available from: <https://www.arahmah.com/read/2012/06/06/20742-kisah-nyata-seorang-gay-ketika-saya-menemukan-diri-saya-seorang-gay.html>
- Peduli Sahabat. SSA (same sex attraction) di Diri Ku; 2015 [internet]. [cited 18 September 2016]; 2015. Available from: <http://pedulisahabat.org/?p=28>
- Weiss EM, Morehouse J, Yeager T, Berry T. A qualitative study of ex-gay and ex-ex-gay experiences. *J Gay Lesbian Mental Health*. 2010;14:291–319, <http://dx.doi.org/10.1080/19359705.2010.506412>
- Flenjte A, Heck NC, Cochran BN. Experiences of ex-ex-gay individuals in sexual reorientation therapy: reasons for seeking treatment, perceived helpfulness and harmfulness of treatment, and post-treatment identification. *J Homosexual*. 2014;61:1242–68, <http://dx.doi.org/10.1080/00918369.2014.926763>
- Siagian. *Teori Motivasi dan Aplikasinya*. Jakarta: PT Rineka Cipta; 2004.
- Videbeck S. *Psychiatric-mental health nursing*. Lippincott Williams & Wilkins; 2013.
- Fatimah PN. *Upaya-upaya Pemulihan Diri Mantan Lesbian*. [unpublished thesis]. Yogyakarta: Universitas Ahmad Dahlan Yogyakarta; 2012.
- Moleong LJ. *Metode Penelitian Kualitatif Edisi Revisi*, 6. Bandung: Remaja Rosdakarya, hlm; 2012.
- Creswell JW. *Qualitative inquiry & research design, choosing among five approaches*. 3rd ed. Los Angeles: Sage Publication, Inc.; 2013.
- Afiyanti Y, Rachmawati IM. *Metodologi Penelitian Kualitatif Dalam Riset Keperawatan*. Jakarta: PT Raja Grafindo Persada; 2014.
- Polit DF, Beck CT. *Nursing research generating and assessing evidence for nursing practice*. 9th ed. Philadelphia: Lippincott Williams & Wilkins; 2012.
- Braun V, Clarke V. Using thematic analysis in psychology. *Qual Res Psychol*. 2006;3:77–101.
- Patton MQ. *Enhancing the quality and credibility of qualitative analysis*. *Health Serv Res*. 1999;34 5 Pt 2:1189–208.
- Morrow SL. Quality and trustworthiness in qualitative research in counseling psychology. *J Counsel Psychol*. 2005;52:250–60.
- Tobin GA, Begley CM. Methodological rigour within a qualitative framework. *J Adv Nurs*. 2004;48:388–96, <http://dx.doi.org/10.1111/j.1365-2648.2004.03207.x>
- Mays N, Pope C. Assessing quality in qualitative research. *BMJ*. 2000;320:50–2, <http://dx.doi.org/10.1136/bmj.320.7226.50>
- Mays N, Pope C. Qualitative research: rigour and qualitative research. *BMJ*. 1995;311:109–12, <http://dx.doi.org/10.1136/bmj.311.6997.109>
- Guion LA, Diehl DC, McDonald D. *Conducting an in-depth interview*. University of Florida Cooperative Extension Service. Institute of Food and Agricultural Sciences, EDIS; 2001. Oct 15.
- Cahyo ID. *Gambaran Intensi Menikah Dengan Lawan Jenis Pada Gay Dewasa Awal Di Bandung* [unpublished thesis]. Bandung: Universitas Padjajaran; 2016.
- Karten EY, Wade JC. Sexual orientation change efforts in men: a client perspective. *J Men's Stud*. 2010;18:84–102, <http://dx.doi.org/10.3149/jms.1801.84>
- Shidlo A, Schroeder M. Changing sexual orientation: a consumers' report. *Prof Psychol: Res Pract*. 2002;33:249, <http://dx.doi.org/10.1037/0735-7028.33.3.249>
- Titaley JA, Messakh, Thobias A, Jersika SR. *Gereja dan Homoseksualitas Suatu Analisa Tentang Sikap Gereja Protestan di Indonesia bagian Barat (GPIB) Terhadap Homoseksualitas dan Faktor-Faktor Pendukungnya* [unpublished thesis]. Salatiga: Universitas Kristen Satya Wacana; 2013.
- Razak S. *LGBT dalam perspektif agama*. AL-IBRAH. 2016;1:50–68.
- Wayler R. *Then & now: how my sexual attractions have changed*. Virginia, USA: Bookbaby; 2015.
- King LA. *Psikologi Umum: Sebuah Pandangan Apresiatif*. Jakarta: Salemba Humanika; 2010.
- Weiss EM, Morehouse J, Yeager T, Berry T. A qualitative study of ex-gay and ex-ex-gay experiences. *J Gay Lesbian Mental Health*. 2010;14:291–319, <http://dx.doi.org/10.1080/19359705.2010.506412>
- Rosyad YS, Savitri W, Purwaningsih S. *Persepsi Gay Terhadap Stigmatisasi Gay Oleh Petugas Kesehatan*. *Media Ilmu Kesehatan*. 2015;4:24–9, <http://dx.doi.org/10.30989/mik.v4i1.38>