

Pentecostal and Neo-Pentecostal “Gay Cure”: Experiences of Lesbian, Gay, and Bisexual Individuals in Northern Brazil

“Cura Gay” Pentecostal e Neopentecostal: Experiências de Lésbicas, Gays e Bissexuais no Norte do Brasil

“Curación” Pentecostal y Neopentecostal: Experiencias de Lesbianas, Gays y Bissexuales en el Norte de Brasil

« Guérison » Pentecôtiste et Néo-Pentecôtiste : Expériences des lesbiennes, des Gays et des Bissexuels dans le Nord du Brésil

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Abstract

“Gay cure” is the term popularly used to refer to Legislative Decree Bill (PDL for short, in Portuguese) 234/11, which sought to repeal portions of Resolution 01/99 of the Brazilian Federal Council of Psychology (CFP for short, in Portuguese). Resolution 01/99 prohibits psychologists from offering “treatments” or “cures” for homosexuality. Despite challenges, the resolution remains in force, and the CFP continues to publish materials in defense of sexual and gender diversity. Even with the prohibition of sexual reorientation therapies, such practices still occur in Brazil through religious conversion efforts, particularly within Pentecostal and Neo-Pentecostal evangelical churches. We refer to this phenomenon as religious “gay cure” and, through a qualitative, descriptive, and exploratory study, investigated how it manifests in Northern Brazil. We sought to understand the outcomes and effects emerging from the experiences narrated by eight young individuals who self-identified as lesbian, gay, or bisexual. The study was grounded in Michel Foucault’s (2004, 2014) assumptions regarding the dispositif of sexuality and subjectivation. Using Thematic Analysis as proposed by Braun and Clarke (2006), five central dimensions of discussion were identified: construction of truths, production of sexuality, attempts at cure, forms of resistance, and effects on mental health. The findings revealed institutional structures and power relations that reinforce compulsory heterosexuality

and negatively affect mental health and processes of self-construction, highlighting the importance of professionals' attentiveness to the diverse ways sexualities have been produced throughout history and to the ethical and political implications involved in professional practice when addressing dissident forms of existence.

Keywords: sexuality, religion, gay healing, evangelicals, psychology.

Resumo

“Cura gay” é como ficou popularmente conhecido o Projeto de Decreto Legislativo (PDC) 234/11, que buscava sustar trechos da Resolução 01/99 do Conselho Federal de Psicologia (CFP), a qual veda aos/as psicólogos/as a oferta de “tratamentos” ou “cura” para as homossexualidades. Apesar das contestações, a Resolução continua em vigor e o CFP permanece fazendo publicações em defesa da diversidade sexual e de gênero. Mesmo com a proibição de terapias de reorientação sexual, essas práticas ainda ocorrem no Brasil por meio de conversões religiosas, com destaque para as igrejas evangélicas pentecostais e neopentecostais. A esse fenômeno, denominamos “cura gay” religiosa, e, através de um estudo qualitativo, descritivo e exploratório, investigamos como essa prática se apresenta no Norte do Brasil. Buscamos compreender os desfechos e efeitos emergentes nas experiências narradas por oito jovens autoidentificados como lésbicas, gays ou bissexuais. Inspiramo-nos nos pressupostos de Michel Foucault (2004, 2014) sobre o dispositivo da sexualidade e subjetivação e, por meio da Análise Temática de Braun e Clarke (2006), foram construídas cinco dimensões centrais de discussão: construção de verdades, produção de sexualidade, tentativas de cura, resistências e efeitos na saúde mental. Os resultados revelaram estruturas institucionais e relações de poder que reforçam uma heterossexualidade compulsória e reverberam negativamente na saúde mental e no processo de construção de si, indicando a importância de que profissionais estejam atentos/as às diferentes formas de produção das sexualidades ao longo da história e às implicações éticas e políticas envolvidas na atuação diante das existências dissidentes.

Palavras-chave: sexualidade, religião, cura gay, evangélicos, psicologia.

Resumen

“Curación gay” es la denominación popular del Proyecto de Decreto Legislativo (PDL) 234/11, que pretendía suspender fragmentos de la Resolución 01/99 del Consejo Federal de Psicología (CFP), la cual prohíbe a los/las psicólogos/as ofrecer “tratamientos” o “curas” para las homosexualidades. A pesar de las impugnaciones, la Resolución continúa vigente y el CFP sigue publicando posicionamientos en defensa de la diversidad sexual y de género. No obstante, la prohibición de las terapias de reorientación sexual, dichas prácticas aún se producen en Brasil a través de conversiones religiosas, con especial énfasis en las iglesias evangélicas pentecostales y neopentecostales. A este fenómeno lo denominamos “curación gay” religiosa y, mediante un estudio cualitativo, descriptivo y exploratorio, investigamos cómo se manifiesta esta práctica en el Norte de Brasil. Buscamos comprender los desenlaces y efectos emergentes en las experiencias narradas por ocho jóvenes autoidentificados/as como lesbianas, gays o bissexuales. Nos apoyamos en los presupuestos de Michel Foucault (2004, 2014) sobre el dispositivo de la sexualidad y la subjetivación y, a través del Análisis Temático de Braun y Clarke (2006), se construyeron cinco dimensiones centrales de discusión: construcción de verdades, producción de la sexualidad, intentos de curación, resistencias y efectos en la salud mental. Los resultados revelaron estructuras institucionales y relaciones de poder que refuerzan una heterosexualidad compulsoria y repercuten negativamente en la salud mental y en el proceso de construcción de sí, lo que señala la importancia de que los/las profesionales estén atentos/as a las distintas formas de producción de las sexualidades a lo largo de la historia y a las implicaciones éticas y políticas involucradas en la actuación frente a las existencias disidentes.

Palabras clave: sexualidad, religión, curación gay, evangélicos, psicología.

Résumé

La « cura gay » est le nom populairement donné au Projet de Décret Législatif (PDC) 234/11, qui visait à suspendre certains passages de la Résolution 01/99 du Conseil Fédéral de Psychologie (CFP), laquelle interdit aux psychologues de proposer des « traitements » ou une « guérison » pour les homosexualités. Malgré les contestations, la Résolution demeure en vigueur et le CFP continue de publier des articles en défense de la diversité sexuelle et de genre. Bien que les thérapies de réorientation sexuelle soient interdites, ces pratiques persistent au Brésil à travers des conversions religieuses, notamment au sein des églises évangéliques pentecôtistes et néo-pentecôtistes. Nous appelons ce phénomène « cura gay » religieuse et, à travers une étude qualitative, descriptive et exploratoire, nous avons étudié la manière dont cette pratique se manifeste dans le Nord du Brésil. Nous cherchons à comprendre les issues et les effets émergents dans les expériences relatées par huit jeunes auto-identifiés comme lesbiennes, gays ou bissexuels. Nous nous sommes inspirés des postulats de Michel Foucault (2004, 2014) concernant le dispositif de la sexualité et la subjectivation et, à travers l'analyse thématique de Braun et Clarke (2006), cinq dimensions centrales de discussion ont été élaborées : construction des vérités, production de la sexualité, tentatives de guérison, résistances et effets sur la santé mentale. Les résultats ont mis en évidence des structures institutionnelles et des rapports de

pouvoir qui renforcent une hétérosexualité obligatoire et ont des répercussions négatives sur la santé mentale ainsi que sur le processus de construction de soi. Ils soulignent l'importance pour les professionnel-le-s de rester attentif-ve-s aux diverses modalités de production des sexualités au fil de l'histoire, ainsi qu'aux implications éthiques et politiques inhérentes à l'intervention auprès des existences dissidentes.

Mots-clés : sexualité, religion, cura gay, évangéliques, psychologie.

In Brazil, since 1999, the provision of "treatment" or "cure" for homosexuality, lesbianism, and bisexuality has been prohibited within psychological practice under Resolution No. 01/99 of the Brazilian Federal Council of Psychology (CFP for short, in Portuguese) (CFP, 1999). However, since its implementation, openly religious social actors, particularly Pentecostal and Neo-Pentecostal evangelicals, have promoted legislative initiatives aimed at enabling attempts at sexual "reorientation" through psychotherapeutic practices. Among these initiatives, Legislative Decree Bill (PDL for short, in Portuguese) No. 234/11 generated widespread media attention and became popularly known as the "Gay Cure" Bill (CFP, 1999; Gonçalves, 2019).

This phenomenon is not confined to public disputes; rather, it unfolds powerfully within micropolitical arenas, such as religious institutions and the everyday lives of those who adhere to their teachings. According to Macedo (2017), beyond controversies surrounding the legalization of psychological practices related to sexual orientation, attempts at sexual "reorientation" through religious conversion take place within Pentecostal and Neo-Pentecostal churches. This process is referred to here as the phenomenon of the religious "gay cure."

Almeida (2021) highlights the existence of numerous Pentecostal traditions in Brazil, encompassing diverse theological and institutional perspectives. Despite this diversity, boundaries have increasingly blurred, rendering doctrines, theologies, and rituals progressively more similar across the dozens of evangelical denominations currently in existence (Cunha, 2008).

The notion of "cure" occupies a central place in Pentecostal and Neo-Pentecostal theologies, reaffirming claims of divine singularity. Mariano (2004) notes that these strands seek to address the physical and/or psychological needs of their followers through adherence to religious prescriptions. From this perspective, homosexuality, lesbianism, and bisexuality are framed as deviations from Christian moral values and are approached through a pathologizing logic, often associated with influences or possessions by evil spirits. Achieving the "cure" proposed by religion entails encouraging the abandonment of one's sexual orientation through the acceptance of God and conversion to the promoted teachings (Natividade, 2006; Garcia & Mattos, 2019; Mesquita & Peruchi, 2016).

Interpreting non-normative sexual orientations as pathologies reflects an outdated model of medical-psychological science rooted in heteronormativity, which established a standard or norm to be followed (Alves & Assunção, 2022). Contemporary scientific consensus on sexual and gender diversity adopts a critical perspective attentive to sociohistorical, political, and cultural contexts, in contrast to essentialist views that naturalize such identities (Kahhale, 2011; CFP, 1999, 2023).

Nevertheless, the provision of sexual "reorientation" through religious "cure" practices persists. Within Pentecostal and Neo-Pentecostal institutions, lesbian, gay, and bisexual individuals are advised to "reverse" their sexual orientations and may be subjected to cleansing rituals, exorcisms, ministrations, and other actions intended to free them from what is construed as deviation from God's path (Alves & Assunção, 2022; Natividade & Oliveira, 2013).

Such practices occur in a context marked by the continued expansion of evangelical Christianity in Brazil. Data from the most recent Brazilian Institute of Geography and Statistics (IBGE for short, in Portuguese) Census indicate an increase in the evangelical population from 21.6% in 2010 to 26.9% in 2022, corresponding to more than 47 million people (IBGE, 2022). The Northern region follows this trend and presents the highest proportion of evangelicals in the country, at 39% of the population (Balloussier, 2020). Historically, the region has been a stronghold of Pentecostalism, with Belém recognized as one of the pioneering cities to host the Assembly of God Church, founded in 1911 (Costa, 2021).

The effects of the rise of Pentecostal and Neo-Pentecostal evangelicalism are gradual and diffuse, and the influence of religious leadership over followers is heterogeneous. Distinctions exist between the positions held by religious leaders and those adopted by their followers, and generalizations must therefore be approached with caution. Nonetheless, investigating these effects is socially and scientifically relevant, as churches can shape modes of subjectivity production in accordance with their dogmas (Casarões, 2020; Valério, 2004).

Souza and Souza (2020) showed that lesbian, gay, and bisexual individuals socialized in religious environments that disapprove of their sexual orientations experience dilemmas and tensions regarding their self-expression in the world. In conservative religious families, lower levels of acceptance are observed, potentially culminating in rejection, violence, and even expulsion from the family circle (Campos & Guerra, 2016; Frazão & Rosário, 2008). Moreover, these experiences extend beyond sexual orientation alone, and an intersectional perspective enables a broader understanding of the multiple dimensions that traverse bodies and their social markers (CFP, 2023).

Accordingly, this study aimed to investigate how the religious “gay cure” manifested in the experiences of lesbian, gay, and bisexual individuals in Northern Brazil. The objectives were to identify the effects of Neo-Pentecostal religious discourse on the production of subjectivities; to examine events shaped by religious discourse within the life trajectories of the interviewees; and to understand the relations of knowledge, power, and subjectivation involved in this process. Drawing on Michel Foucault’s theoretical assumptions (2004, 2014), sexualities are approached as the product of a complex *dispositif* that, through relations of knowledge and power, traverses bodies, inscribes itself upon them, and produces distinct modes of subjectivation. Within this framework, the thematic analysis of experiences revealed five central dimensions: i) the construction of truths for the control of bodies; ii) the production of sexuality; iii) attempts at “cure”; iv) forms of resistance; and v) effects on mental health.

Method

This qualitative, descriptive, and exploratory study included eight young individuals who self-identified as lesbian, gay, or bisexual, aged between 21 and 27 years, residing in Northern Brazil, and who had experienced religious “gay cure” practices within Pentecostal or Neo-Pentecostal settings or institutions.

Participants were recruited through social media platforms, including X (formerly Twitter) and Instagram. Posts presenting the study, inclusion criteria, and a link to a Google Forms questionnaire for contact information were shared. Because of the qualitative nature of the research, the sample size was not determined using probabilistic criteria; instead, priority was given to depth, scope, and diversity in understanding participants’ narratives (Minayo, 2017). Theoretical saturation was adopted as the sampling criterion, and interviews were concluded when the data showed substantial repetition in relation to the study objectives.

In addition to its use for participant screening, the online form included a socioeconomic questionnaire designed to collect information on sexual orientation, gender identity, age, state of residence, race/skin color, social class, and religious institutions attended. A semi-structured interview guide with predefined questions was developed to support open-ended inquiry, allowing participants to elaborate on the proposed topics. Additional questions were introduced when deemed necessary during the interviews (Minayo, 2010).

Interviews were conducted remotely via Google Meet and had an average duration of approximately 90 minutes. All interviews were audio-recorded and transcribed verbatim. The resulting material was subjected to thematic analysis (TA) following the approach proposed by Braun and Clarke (2006). This analytical method enables the identification of patterns and similarities across the data, facilitating a comprehensive understanding of the phenomenon under investigation. The analytical steps comprised: i) familiarization with data; ii) generation of initial codes; iii) searching for themes by identifying and organizing themes and subthemes; iv) reviewing themes; v) defining and naming themes; and vi) producing the final report. Data interpretation was informed by Michel Foucault’s concepts of the *dispositif* of sexuality and subjectivation (2004, 2012).

The study adhered to all required ethical standards and was approved by the Research Ethics Committee under Opinion No. 5,531,587. Participants selected their own pseudonyms to ensure confidentiality and foster a sense of autonomy. Beyond formal ethical requirements, the research was guided by a broader ethical commitment to the narrated experiences and their interpretation, acknowledging that the knowledge produced cannot be fully separated from the researchers’ own positionality and implications (Minayo & Guerriero, 2014). These implications are scientific, political, and affective, as the researchers identify as LGBTI+ individuals residing in Northern Brazil.

Results and Discussion

We begin by introducing the participants who, through the fundamental act of sharing their experiences, made this study possible. The main characteristics of the young participants are presented in Table 1.

Table 1*Participant characteristics*

Name	Age	Gender	Sexual orientation	Race/Skin color	Social class	Church
Vinícius	24	Male	Bisexual	White	Middle	Assembly of God (Pentecostal)
Lúcia	24	Female	Bisexual	White	Middle	Assembly of God (Pentecostal)
Juliana	21	Female	Bisexual	White	Middle	Assembly of God (Pentecostal)
Letícia	25	Female	Homosexual	Black	Middle	Evangelical Assembly of God of Madureira Church (Neo-Pentecostal)
Anieli	27	Female	Homosexual	Brown	Middle	Foursquare Church; Evangelical Community Assembly of Christ Church; International Revival Ministry Church (Pentecostal)
Suellen	27	Female	Bisexual	Brown	Lower-middle	Assembly of God (Pentecostal); Universal Church of the Kingdom of God (Neo-Pentecostal)
Carol	22	Female	Bisexual	Brown	Lower-middle	Christian Congregation of Brazil (Pentecostal)
Lucas	27	Male	Homosexual	Black	Lower	Pentecostal Church of God of Brazil (Pentecostal)

Vinícius and Lúcia were raised in families that practiced Catholicism regularly. Both were exposed to Pentecostal and Neo-Pentecostal evangelical contexts through members of their extended families (e.g., grandparents, aunts and uncles, cousins) who attended the Assembly of God Church. Although they were not deeply involved in evangelical institutions themselves, they experienced intense attempts at religious “gay cure” mediated by their converted family members.

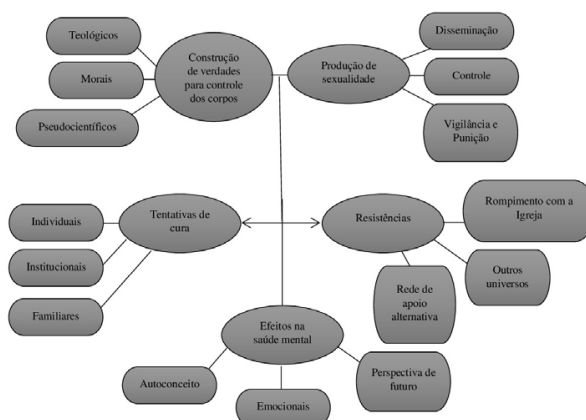
Juliana, Anieli, Suellen, Letícia, and Carol grew up in families devoted to Pentecostal and/or Neo-Pentecostal evangelical Christianity. They were immersed in religious institutions from early childhood and were deeply engaged in their theological and institutional dynamics. Lucas was the only participant who did not encounter religion through his family but rather through a neighbor who attended church. Nevertheless, like the other participants, he was inserted into and actively engaged in this religious environment from childhood.

Two main settings were identified as spaces of “conversion” for the participants: churches and their surrounding environments, and the family and its relational networks, both of which contribute to the formation of the dispositif of sexuality. These experiences were examined across three interrelated dimensions: the domains of knowledge to which they refer; the systems of power that regulate their practices; and the forms of subjectivation through which the participants constitute themselves as subjects. Institutional practices are embedded within a collective project of Pentecostal and Neo-Pentecostal processes of subjectivation (Ferreira, 2017).

Figure 1 presents the analytical themes and subthemes and illustrates how the experience of religious “gay cure” manifested for the participants. In the life trajectories of the interviewees, these situations occurred in an intertwined manner, and their effects were experienced simultaneously. The figure therefore serves to refine the analytical reading by providing a synoptic representation of the complex network that constitutes this phenomenon, situated within the concept of the dispositif of sexuality. In the first thematic axis — *Construction of truths for the control of bodies* — we identified shared subthemes related to dogmas underpinning Pentecostal and Neo-Pentecostal understandings of sexual diversity.

Figure 1

Conceptual map of themes and subthemes involved in participants' experiences of religious “gay cure.”



Construction of Truths for the Control of Bodies

The construction of truths aimed at controlling bodies is concealed in these settings as religious teaching and consists of Pentecostal and Neo-Pentecostal forms of knowledge that, through specific power relations, became intertwined with the participants' experiences in multiple ways. Three main types of precepts were identified:

1) Theological

"The pastor said: the worst sins in the world are killing someone and men having sex with men" (Letícia).

"In church, we learn that being gay means having the devil inside your body" (Suellen).

"(...) if you felt desire, you should not act on it; you were supposed to repress it" (Carolina).

2) Moral

"Homosexuality was something dirty, something for people who like debauchery" (Suellen).

"Being homosexual is on the same level as being a rapist or a murderer" (Letícia).

3) Pseudoscientific

"They linked it to the fact that I did not have a good relationship with my father (...)" (Lucas).

"Gays were gay because of the prostate; the prostate produced a hormone that made them like it and become addicted to it" (Anieli).

"(...) they use the term 'homosexuality' to imply disease" (Juliana).

From a theological perspective, participants' homosexualities were framed as "sin" and as "demonic action," requiring religious conversion as a means of liberation, as reported by Letícia, Suellen, and Carolina. According to Dias (2019) and Machado and Piccolo (2010), understanding homosexuality as sin is a common feature across different Christian religious traditions.

The interpretation of homosexuality as a demonic manifestation, as described by Suellen, is specific to Pentecostal and Neo-Pentecostal evangelical theologies, particularly the Theology of Spiritual Warfare. In this framework, God and the devil are engaged in a spiritual battle for control over humanity, in which the believer's body becomes a site of dispute, and the "faithful" must side with God by repressing manifestations of the devil in the earthly realm (Natividade, 2006). Within this worldview, homosexuality represents worldly pleasure and signals the presence of demons in the body of the believer who experiences what are considered "inappropriate" affective-sexual desires (Fátima, 2018).

Participants also reported moral judgments articulated by religious leaders regarding their sexual orientations, categorizing them as "immorality" and "depravity" and equating them with criminal behaviors, as evidenced in the accounts of Letícia and Suellen. Moreover, the religious teachings embedded in these experiences reinforced a pathologizing logic toward dissident sexual orientations, a finding that aligns with previous studies (Garcia & Mattos, 2019; Gama, 2019).

Religious leaders mobilized pseudoscientific explanations to account for the origins of homosexuality. These explanations invoked pathological parent-child relationships during childhood or biological rationales involving addiction, disease, or compulsion. As noted by Macedo (2017), discourses endorsed by the "psy" sciences (psychology, psychoanalysis, and psychiatry) are appropriated within religious debates to reinforce prohibitions and erase dissidence. In sum, insofar as this discourse authorizes only what is deemed "true," it enforces conformity and negates diversity, thereby producing symbolic and material forms of exclusion (Portella, 2007).

As "truths," these teachings carry an inherent dimension of power, producing norms, constraints, and regulatory mechanisms that sustain power relations capable of controlling and disciplining bodies (Foucault, 1999). In the following section, we discuss the institutional organization and power relations through which these religious teachings produce specific forms of sexuality.

Production of Sexualities

Religious institutions are embedded within the complex network that constitutes the dispositif of sexuality and are capable of producing subjects and sexualities under the control of their codes and strategies (Valério, 2004). In the experiences shared by the participants, we identified the production of sexualities aligned with the aforementioned religious teachings, expressed through three interrelated subthemes: i) dissemination; ii) control; and iii) surveillance and punishment.

1) Dissemination

"If I were to count all the times I heard people talking about homosexuality, I would spend the entire afternoon here" (Juliana).

"I read books that explained their view of homosexuality and how the devil acts in a person's body" (Suellen).

"I went to a youth camp and a conference where they talked a lot about sexuality..." (Anieli).

2) Control

"I was not allowed to miss church events, even if there were family events" (Juliana).

"I made a great effort to attend retreats and church events" (Letícia).

3) Surveillance and punishment

"At events there was always a woman watching me and reporting what I did to my discipler" (Anieli).

"If I did something wrong, I felt very bad and felt the need to tell my leadership" (Carol).

"The pastor called me and said that if I didn't stop, she would ask me to leave the church; there would be no way to sustain homosexual people there" (Letícia).

"Everyone assumed my sexuality because I was no longer the leader of the theater group (...) it was something I loved, and I felt the weight of having it taken away from me" (Lucas).

Based on these accounts, it can be inferred that the background of relationships between religious leaders and participants encompasses discourses, institutions, laws, and scientific and moral statements that are articulated in a network to produce subjects and sexualities. According to Foucault (2014), it is socially authorized institutions, such as scientific, religious, and legal ones, that produce norms, disseminate "truths," and discipline conduct through relations of knowledge and power throughout history, a process the author terms disciplinary power.

In Costa's (2007) interpretation, the disciplinary power described by Foucault is a continuation of pastoral power, centered on the figure of a leader, specifically the pastor, who guides the flock with the aim of instituting a model of subjectivity through individualized control of bodies. In line with the experiences of Anieli, Carol, Letícia, and Lucas, a logic of operation emerges in which leaders are granted authority to determine where believers should go, guiding them toward salvation. By mediating the figure of God, this perspective assumes that only the pastor knows the path to the salvation of the sheep and therefore leads them (Costa, 2007, p. 87).

The dissemination of religious teachings that frame non-normative sexual orientations as sin, possession, disease, and immorality occurs through religious activities and communication channels that convey evangelical dogma. Sermons, television programs, gospel literature, retreats, and spiritual conferences functioned as key vehicles for propagating these teachings, as reported by Suellen, Juliana, and Anieli. Within this context, the organization of such events and the attempt to discipline bodies also reveal manifestations of disciplinary and pastoral power relations (Foucault, 1987).

Participants highlighted the requirement for isolation, through camps, retreats, and immersive activities, as well as the division into distinct groups following a binary logic, aimed at teaching what it means to be a man or a woman according to Pentecostal and Neo-Pentecostal Christian precepts. For Foucault (1987), disciplinary power operates insofar as it organizes space through the distribution of individuals and controls activity through the regulation of time. Alves and Assunção (2022) note that time-control strategies are common in evangelical churches, with the goal of distancing young people from anything deemed "immoral."

Another disciplinary technology permeating participants' experiences within religious institutions was constant surveillance, which targets bodies by regulating gestures, activities, learning processes, and everyday life (Foucault, 1987). For Letícia, clothing constituted the primary object of control and surveillance, whereas for Lucas, gestures and vocal intonations perceived as effeminate were identified and harshly reprimanded. Failure to comply with the heteronormative rules prescribed by religion resulted in warnings and exclusion, including the removal from institutional roles, as reported by Lucas.

According to Foucault (1987), within pastoral logic, punishment and surveillance are mechanisms used to discipline and train individuals to conform to institutional norms. Disciplinary power exerts control over bodies by erasing differences and fitting them into a standardized social model. Sanctions impose rules and micro-penalties of various kinds: those related to time (lateness, absences, interruptions), activity (inattention, negligence, lack of diligence), discourse (verbosity, insolence), the body (incorrect attitudes, nonconforming gestures, impurity), and sexuality (immodesty, indecency).

This form of power is not grounded in overt violence or direct coercion, but in the ways individuals are governed through disciplinary practices aimed at guiding and directing conduct. It constitutes a subtle and often invisible form of authority that operates through technologies such as confession, counseling, catechesis, and preaching, all of which seek to shape believers' behavior according to institutional religious principles (Barros, 2020; Valério, 2004). Participants were expected to internalize surveillance through practices of self-examination, confess sins, and adhere to the guidance of religious leadership, thereby sustaining power relations. In this sense, Foucault (1999) argues that power does not reside in a single point or person but is distributed across social relations and embedded in everyday practices and discourses.

Power permeates all social spheres and is constructed and maintained through a set of practices that shape subjectivities, behaviors, and modes of thought. As Ferreira (2017) notes, one of the effects of power is subjectivity itself, produced and transformed over time through different forms of power, from continuous surveillance to the internalization of shared practices and values, as well as through processes of subjection or resistance within attempts at religious "cure," which will be addressed in the following section.

Attempts at "Cure"

When confronted with religious teachings about sexuality, rigidly transmitted to the participants, different strategies emerged in attempts to "free" or "cure" themselves of homoaffective desires. Efforts to conform to church-established

norms, referred to as “cure,” gave rise to three subthemes: i) individual; ii) institutional; and iii) familial.

1) Individual

“I fasted, prayed, tried to live in holiness. I tried to do everything right, and the demon would not leave” (Suellen).

“We were taught to fast and pray to get what we want, so I thought I could stop liking women that way” (Letícia).

2) Institutional

“They said I had a problem and that I needed to treat it (...) I went through a process of ministration, which only later did I understand was this ‘gay cure’” (Lucas).

“She put her hand on my forehead and started praying, saying: I rebuke every spirit of homosexuality, every spirit of prostitution” (Letícia).

3) Familial

“My family would come together to do prayer campaigns in my name, going to church (...) to remove the demon from my life. They came to my house without my consent, and this missionary even hit me to cast out demons and break chains” (Anieli).

“My uncle tried to convince me that I could convert and stop being bisexual” (Lúcia).

By internalizing the teachings encountered within the church, participants underwent processes of subjection. Individual attempts at “cure” involved the performance of religious rites and self-surveillance, characterized by efforts to rid themselves of homoaffective desires through prayer, fasting, and isolation from social relationships outside the church, as described by Suellen and Letícia. These practices also included examinations of conscience, such as monitoring thoughts to control desire. Such accounts indicate that participants internalized norms imposed through pastoral and disciplinary power, whereby specific techniques of discipline shape subjugated subjectivities and identities (Barros, 2020; Costa, 2007; Foucault, 1987, 2014).

This internalization was not only imposed by religious leadership but was also exercised autonomously. Costa et al. (2018) note that exposure to negative experiences, combined with normative controls framing homosexuality as wrong or sinful, can lead to self-harming behaviors and the pursuit of sexual “reorientation” as a means of escaping suffering.

Among institutional attempts at cure, Lucas was the only participant who “voluntarily” sought help from religious leaders to deal with his homoaffective desires, leading him to undergo a process referred to as “ministration.” In his experience, occurring one to two times per week in moments described as intimacy with God, the religious leader combined biblical readings with moral and pseudoscientific teachings to explain the origins of his homosexuality. Fasting and prayer were also imposed as conditions for achieving “cure.” Letícia and Anieli did not seek leadership intervention upon recognizing their homoaffective desires; nevertheless, they were subjected to attempts at “cure” and “liberation,” including rites such as exorcism practices that involved physical aggression.

According to Gonçalves (2019), religious “gay cure” practices are publicly presented by their proponents as forms of “freedom” for young people who voluntarily wish to “abandon” homosexuality. However, the experiences analyzed here reveal a structure operating under the norm of compulsory heterosexuality, a concept articulated by Judith Butler (1990) and Adrienne Rich (2012). This norm functions as a political institution that subjugates bodies that do not conform to heterosexuality, rendering them socially dehumanized and abject. From this perspective, it can be argued that this norm, reproduced within the reported religious teachings, directly interferes with the construction of subjectivities by positioning dissident existences as deviant, hateful, or invisible (Rich, 2012).

Resistance

For Foucault (2004), resistance refers to the strategies and tactics that subjects develop to evade or counteract the effects of power. In the participants’ narratives, three forms of resistance were identified, corresponding to the following subthemes: i) rupture with the church; ii) alternative support networks; and iii) engagement with other social worlds.

1) Rupture with the church

“I decided that I needed to leave the church, otherwise I was going to do something, I was going to die” (Lucas).

“They were interfering too much in my life, and I decided to leave” (Anieli).

“I couldn’t be two things at the same time; to assume my relationship, I had to leave” (Carol).

2) Alternative support networks

“I found more love outside the church than inside (...) when I arrived at church, I felt excluded; now, when I’m in a place with LGBT people, I am embraced” (Letícia).

3) Other social worlds

“Leaving the church and entering university was transformative for me. At university, through studying, I realized that I could indeed be a lesbian” (Letícia).

“I knew that what they said about gay people wasn’t true. I always had friends who were gay and knew they weren’t the monsters they made them out to be” (Anieli).

According to Ferreira (2017), resistance is not the opposite of power but rather a continuous negotiation of social reality. Resistance may manifest through social movements, counter-hegemonic practices, disobedience, and subversion, representing the possibility of reconfiguring subjectivity in relation to power. At different moments and in distinct ways, all participants reported engaging in resistance.

Rupture with the church emerged first in the narratives of Anieli, Carol, Juliana, Vinícius, and Lúcia, who did not restrict their relationships to the social circle established by the institution and reported greater questioning of religious teachings. After gaining a clearer understanding of their sexual orientations, they invested less in individual attempts at "cure," although they still experienced institutional and familial pressures that ran counter to their wishes. In contrast, Lucas, Suellen, and Letícia reported fewer challenges to religious teachings and tended to isolate their social relationships within heteronormative frameworks or those established inside religious institutions. This specific form of "obedience" may have further limited their horizons of subjectivation, shaping more violent forms of self-construction. Nevertheless, even these participants ultimately broke with the religious institution through acts of resistance.

Silva et al. (2008) demonstrated that religious teachings can be deeply internalized by Pentecostal and Neo-Pentecostal believers. In the resistance processes described here, breaking away from the religious institutions participants attended also marked their entry into other social worlds, such as university, work, and friendship networks. Expanding these networks enabled contact with more diverse modes of subjectivation, capable of providing greater acceptance and support. In this sense, rupture with religious institutions functioned as a survival tactic, oriented toward the search for more welcoming and inclusive environments.

Engaging with other social worlds that offer acceptance and care is particularly important in the experiences of lesbian, gay, and bisexual individuals, given that various public and private spaces may operate as dispositifs of erasure, prohibition, and violence against those who deviate from cisheteronormative logics (Cantelli, 2016; Tagliamento et al., 2020). Conservative interpretations of Christian moral and doctrinal codes exerted a powerful influence in the narratives analyzed, resulting in suffering and increased vulnerability in mental health (Natividade & Oliveira, 2013; Silva & Menandro, 2016; Souza & Souza, 2020).

From this same perspective, inhabiting new social worlds and building support networks can generate positive effects on mental health by creating forms of support capable of mitigating the harms produced by experiences of religious "gay cure." The support networks found within religious institutions were described as conditional upon adherence to heterosexuality and became increasingly fragile as participants moved closer to affirming their sexual orientations and subjective expressions in the world. Duarte and Oliveira (2021) demonstrate that social isolation from support networks can exacerbate preexisting mental health conditions, such as loneliness, depression, anxiety, and suicidal ideation.

Effects on Mental Health

Experiencing religious "gay cure" practices proved to be a significant source of vulnerability to mental health harm among participants. The reported effects were organized into three subthemes: i) self-concept; ii) emotional experiences; and iii) future perspectives.

1) Self-concept

"I believed I was Satan's daughter, an abomination" (Carol).

"I thought I was the worst person in the world. If they needed a bad person for a sacrifice, that person would be me" (Letícia).

"I always thought I was strange (...) when I look back, the reason is religion. I don't see anything else" (Anieli).

2) Emotional experiences

"I felt a lot of shame; I didn't tell anyone what I felt" (Carol).

"I lived in this constant cycle of confessing, asking for forgiveness, and feeling guilty" (Lucas).

"The fear of dying, the fear of going to hell, was overwhelming, and I cried" (Suellen).

"So I was vulnerable, and they came at me with everything (...) that's when I was exhausted. If I don't leave here, I'm going to die; I'm going to kill myself" (Lucas).

"And that changes the meaning of killing yourself. Because maybe I had thought about killing myself before, but I didn't because of the church. Now, that would be possible" (Anieli).

3) Future perspectives

"I would have to fight forever; it was my thorn in the flesh, it would always be there with me" (Lucas).

"God does not forgive suicide or homosexuality... I think I will never receive forgiveness" (Letícia).

"I was trapped in the thought that I was doomed to hell, to everything bad" (Lucas).

"If now I was going to be condemned, I no longer wanted to live" (Anieli).

In contemporary society, religion continues to function as a regulatory instance of values, disseminating notions of right and wrong that often operate as mechanisms of social control (Meneses & Santos, 2013). Even among heterosexual youth involved

in evangelical pastoral contexts, religion exerts significant influence over sexual initiation. Pentecostal and Neo-Pentecostal churches frequently construct environments in which sex and sexuality are treated as taboo, emphasizing heterosexuality, virginity, and sex after marriage, with measurable impacts on sexual and reproductive behavior (Verona & Regnerus, 2014).

The truths internalized by participants produced negative effects on their self-concept, fostering self-devaluation and perceptions of themselves as “aberrant” or inherently “bad.” Cerqueira-Santos et al. (2017) demonstrated that high levels of religiosity are correlated with elevated levels of internalized LGBTphobia. The repercussions of religious teachings and attempts at “cure” were profoundly harmful to identity construction and generated mental health vulnerabilities, as also reported by Alves and Assunção (2022).

Experiencing behaviors condemned by the church triggered feelings of guilt, anxiety, sadness, fear, and shame, which, in turn, motivated the pursuit of religious “gay cure” practices, as reflected in the narratives of Carol, Lucas, Suellen, and Anieli. It is important to emphasize that these negative emotional experiences stem from discrimination within religious environments, and the recurrence of distress was observed regardless of individual life trajectories. In this sense, Ceccarelli (2008) argues that suffering among lesbian, gay, and bisexual individuals arises more from prejudice than from sexual orientation itself.

Beyond the emotional suffering described, participants reported suicidal ideation. Consistent with findings by Souza and Souza (2020), Gibbs and Goldbach (2015), and Rosa and Esperandio (2022), the present study identified a significant influence of religiosity and church-promoted stigma on the mental suffering of lesbian, gay, and bisexual individuals, including an increased risk of suicidal ideation.

Participants also described negative future outlooks shaped by Pentecostal and Neo-Pentecostal teachings, according to which they were considered “afflicted” by evil forces and thus destined for suffering, as illustrated in Anieli’s account and discussed by Fátima (2018). Their futures were envisioned as perpetual struggles between their sexual orientations and religious heteronormative prescriptions, characterized by an endless cycle of sinning, guilt, and repentance.

Following Zanello’s (2018) perspective, mental health must be understood as structured through societal dispositifs. It is insufficient to merely state that lesbian, gay, and bisexual individuals who have experienced religious environments hostile to their sexual orientations are more susceptible to psychological distress and suicidal ideation. It is also necessary to expose, analyze, and denounce the structures of meaning underlying these effects.

Thus, by perpetuating stereotypes and prejudice against homosexuality, religious institutions may contribute to psychological suffering among lesbian, gay, and bisexual individuals. Although religiosity can, in some contexts, function as a protective psychological and social factor (Dahl & Galliher, 2012), the experiences analyzed here reveal the opposite dynamic. Participants’ self-concept, emotional lives, and future perspectives were shaped by a compulsory heterosexuality imbued with tension and suffering.

Final Considerations

Based on participants’ experiences, the phenomenon of religious “gay cure” manifested through the construction of truths aimed at controlling bodies. These “truths” were embedded in religious teachings that framed homosexuality, bisexuality, and lesbianism as sin, immorality, demonic possession, and pathology. Conversion to religion and submission to its norms, through the regulation of time, relationships, and conduct, were presented as necessary conditions for achieving “cure.”

The study also identified institutional structures that circulate these teachings and sustain power relations between religious leaders and followers, producing sexualities and subjectivities aligned with compulsory heterosexuality. Within this framework, participants’ processes of subjectivation unfolded through subjection, as well as through physical and symbolic violence embedded in ritualized practices of “cure.”

In processes of resistance, the construction of alternative support networks, engagement with other social worlds, and rupture with religious institutions emerged as positive markers in participants’ experiences of their own sexual orientations. Nevertheless, having undergone religious “gay cure” practices generated lasting negative effects on mental health, producing suffering and harm to self-concept, emotional well-being, and future outlooks.

This study is limited by its small number of participants, and further research is needed to deepen understanding of this phenomenon within a religious institution that continues to expand in Brazil. As a qualitative study, its findings are not generalizable. However, despite the singularity of each experience and its inscription in specific realities, the results offer insight into broader dynamics operating in this field.

The aim of this study was not to issue moral judgments regarding the theological perspectives of Pentecostal and Neo-Pentecostal evangelical traditions, but rather to critically examine the effects of their teachings and practices on human sexuality as lived by lesbian, gay, and bisexual individuals in Northern Brazil. We sought to underscore the importance of reflecting on the different forms of knowledge that produce sexualities within our historical context, particularly when considering the psychological suffering of lesbian, gay, and bisexual populations.

Finally, this study aims to contribute to academic and practical implications for psychology that are ethically and politically committed to sexual and gender diversity, both in clinical practice and in the development and implementation

of public policies. It also supports the promotion of spaces for discussion that, beginning in professional training, prioritize debate and intervention possibilities in relation to dissident existences. In this way, we propose a pathway toward practices that welcome and validate diversity, in line with the guidelines of CFP (2023), and that break with the historical logic of marginalization, discrimination, and pathologization of LGBTI+ individuals.

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