Homosexuality

CMDA affirms the long-accepted and widely held Christian teaching that the appropriate context for sexual relations is solely within marriage, defined as a consensual, exclusive and lifelong commitment between one man and one woman. This is the view reflected throughout the Bible and in Christian texts of all denominations—Protestant, Catholic, and Orthodox—throughout their history and, until recently, a view that was universal and uncontested among Christians. Commitment to this historic Christian view of sexuality benefits individuals, families, and all society.

CMDA recognizes that many individuals experience or struggle with same-sex attraction. In these matters CMDA distinguishes homosexual thoughts and desires from willful homosexual behaviors.

CMDA also recognizes that, in recent years, there has been a sea change in cultural acceptance and legal recognition of homosexuality, including voices that celebrate it and seek to make it conventional. These factors have placed Christian healthcare professionals in the position of being at variance with evolving views of sexual choices and behaviors that may be socially approved but which are contrary to a Christian worldview. Whereas the shift in cultural mores has been rationalized by a strong emphasis on the freedom of personal choice, CMDA believes that personal autonomy is not an absolute principle but one that must be weighed alongside other relevant moral principles. In matters of sexuality the broader impact of individual choices should be considered.

Because we are guided by Christ, who assisted all who sought his help regardless of sexual or social status, CMDA affirms the obligation of Christian healthcare professionals to care for all patients in need, regardless of sexual orientation, gender identification, or family makeup, with sensitivity and compassion, even when we cannot validate their choices.

Recognizing that sexuality has not only bodily but also moral and spiritual significance, CMDA views homosexuality within the following framework:

A. Biblical

- 1. All people are loved by God (John 3:16-17).
- 2. All struggle with moral failure and fall short of God's standards (Romans 3:10-12) and, therefore, need the forgiveness that God provides through Christ alone (John 3:36; Romans 3:22-24; Colossians 1:15-23; 1 Timothy 2:5-6).
- 3. The moral authority of the Bible in matters of sexuality rests in God, who inspired and reliably guided its human authors (Joshua 1:8; Matthew 5:18, 24:35; Luke 16:17; 1 Thessalonians 2:13; 2 Timothy 3:16; Hebrews 4:12; 2 Peter 1:21). The moral teachings of the Scriptures are trustworthy (Psalm 119:86a; John 17:17b), beneficial (Deuteronomy 30:19; Psalm 119:105,133; Luke 11:28), and true for all times (Psalm 119:89; Isaiah 40:8; Hebrews 13:8).
- 4. We live in a fallen world (Genesis 3), and we are all fallen creatures with a sinful nature (Romans 3:9-12). The fall is expressed in nature and in humanity in many ways, including sexuality. Samesex attraction is but one example of the fall, as are also extramarital sexual attractions among heterosexuals, all of which, if indulged, lead to adverse consequences (Romans 1:24-32; Ephesians 5:3).
- 5. Having homosexual thoughts or desires is not itself sinful, but by acting on them one assumes moral responsibility. A lifestyle that is directed by pursuing sexual desires or governed by personal sexual fulfillment misses the divinely ordained purpose of sex, which is for procreation and for facilitating unity in the lifelong commitment of marriage between one man and one woman, which fosters a secure and nurturing environment for children and which reflects the unity of Christ and the church (Exodus 20:1-18; Leviticus 20:10-21; Romans 1; Ephesians 5:23-

33).

- 6. The Scriptures prescribe and promise God's blessing on life-long heterosexual union in marriage, and chastity in all other circumstances (Genesis 39:7-9; Exodus 20:14; Job 31:1; Proverbs 2:16-22, 5; Song of Songs 8:6; 1 Corinthians 7).
- 7. The Scriptures are uniform throughout in forbidding as sinful the practice of homosexuality (Leviticus 18:22, 20:13; 1 Kings 14:24; Mark 10:6; Romans 1:26-27; 1 Corinthians 6:9; Jude 1:7). Same-sex attraction cannot be consummated within God's design for human sexuality and procreation (Genesis 2:24; Ephesians 5). The Scriptures affirm, however, the value of non-erotic same-sex friendships (1 Samuel 20:17).
- 8. It is possible by God's grace for those with same-sex attraction to live a chaste life (Psalm 51:10, 119:9-16; Romans 6:11-14, 12:1-2; 1 Corinthians 6:18, 10:13; 2 Corinthians 7:1; 1 Thessalonians 4:3-5, 5:23-24; Galatians 2:20, 5:16,22-25; Colossians 3:5).

B. Social

- 1. In our current culture, which is saturated with sexual references, there is a prevailing view that personal fulfillment is to be found through abolishing traditional sexual boundaries and following desires and passions that transgress those boundaries. One outcome of this trend is the view that same-sex relationships should be regarded as equivalent to opposite-sex relationships. In our current culture some hold to the erroneous belief that to embrace diversity means to enforce acceptance and affirmation of same-sex relationships while suppressing other viewpoints.
- 2. CMDA believes that, in contrast to the current culture, living out one's sexuality within God's design will result in a healthier and more fulfilled life. CMDA recognizes that this traditional view has become counter-cultural; however, CMDA affirms that God's design transcends culture.
- 3. CMDA recognizes that the causes of same-sex attraction are multifactorial and may include biological, developmental, psychosocial, environmental, and cultural factors that are not of the individual's choosing. Deciding on a same-sex lifestyle and pursuing same-sex fantasies and encounters, however, are voluntary and involve moral responsibility.
- 4. CMDA recognizes that, for individuals who struggle with same-sex attraction, choosing not to act on same-sex erotic desires may be difficult. Similarly, many individuals who are sexually oriented to the opposite sex also struggle with erotic desires that are contrary to the teachings of Scripture.
- 5. Approval of same-sex marriage is harmful to the stability of society, the rearing of children, and the institution of marriage. If the only criterion for marriage were mutual consent or commitment, then there would be no logical grounds to prohibit polygamy, polyandry, or incestuous unions.
- 6. Adoption into homosexual environments puts children at risk. Children need both male and female influences in their social development. Children should not be exposed to the promiscuity that the gay culture promotes, just as they should not be exposed to heterosexual promiscuity. Homosexual relationships are typically brief and successive. Children reared by same-sex couples are at increased risk of later engaging in homosexual activity.

C. Medical

- 1. Among individuals who engage in homosexual acts, there is an increased incidence of drug or alcohol dependence, compulsive sexual behavior, anxiety, depression, and suicide. These consequences are harmful to the health of same-sex patients and are associated with increased medical costs to society.
- 2. Some homosexual acts are physically harmful because they disregard normal human anatomy and function. These acts are associated with increased risks of tissue injury and transmission of infectious diseases.
- 3. Homosexual behavior can be changed, even when desire persists. There is valid evidence that many individuals who chose to abstain from homosexual acts have been able to do so.

CMDA Recommendations for the Christian Community

- 1. A person struggling with same-sex attraction should evoke neither scorn nor enmity, but rather our concern, compassion, help, and understanding. Christians must respond to the complex issues surrounding same-sex attraction with grace, civility, and love.
- 2. Christians should welcome inclusion of same-sex-attracted individuals, affirming them as equal without condoning their sexual choices and behaviors.
- 3. The Christian community and especially the family must resist stereotyping and rejecting individuals who do not fit the popular norms of masculinity and femininity. Parents should guide their children in appropriate gender identity development. For children who are experiencing gender identity confusion, the Christian community should provide appropriate role models and informed guidance.
- 4. The Christian community must help society understand that traditional marriage is good and a part of the natural order. CMDA is concerned that to redefine marriage in a way that includes same-sex relationships will have detrimental spiritual, emotional, cultural, and medical repercussions.
- 5. The Christian community must condemn hatred and violence directed against those involved in homosexual behavior. Love for the person does not equate with support of the decision to engage in a gay or lesbian lifestyle.
- 6. The Christian community must encourage and strongly support those who wish to abandon homosexual behavior.
- 7. CMDA affirms family life in the paradigm of fathers and mothers rearing their own children as well as adoption of children by a married mother and father. However, CMDA cannot affirm the adoption of children by same-sex couples, because such placement deliberately excludes the parental role model of one sex and is thus detrimental to the best interests of the child.
- 8. Christian communities must seek for ways to minister to children in families of same-sex couples in ways that offer them the love of Christ.
- 9. The Christian community is to be a refuge of love for all who are broken including sexually broken not to affirm their sin, nor to condemn or castigate, but to shepherd them to Jesus, who alone can forgive, heal, restore, and redirect to a Godly, honorable, and virtuous way of life. God provides the remedy for all moral failure through faith in Jesus Christ and the life-changing power of the Holy Spirit.

CMDA Recommendations for Christian Healthcare Professionals

- 1. CMDA advocates culturally competent medical care of patients who identify as gay or lesbian. Such care requires our compassion, an open and trusting dialogue, a genuine effort to understand and respond to the patient's psychological distress, and acceptance of the person without necessarily agreeing with the person's sexual views.
- 2. CMDA believes that the appropriate medical response to patients who identify as gay or lesbian should be to support and encourage them in areas we can affirm and to help them understand themselves as people God loves and who are made in his image, even when we cannot validate their lifestyle choices or sexual behaviors.
- 3. A patient's wishes regarding hospital visitation rights and surrogate medical decision-making by a committed same-sex partner should be respected.
- 4. CMDA believes that Christian healthcare professionals should avoid participating in any reproductive technology procedures in which children are brought into a family other than that of a married husband and wife, or in which children at any stage of biological development are marketed as products. This would include surrogacy-for-hire or in vitro procedures for non-married heterosexual couples or same-sex couples.

CMDA Recommendations Regarding Nondiscrimination

1. Christian healthcare professionals, in particular, must care for their same-sex-attracted patients in a non-judgmental and compassionate manner, consistent with the humility Jesus modeled and the

- love Jesus commanded us to show all people.
- 2. Christian healthcare professionals who hold to a biblical or traditional view of human sexuality and marriage should be tolerated in a diverse society and permitted to express their views in civil discourse free from exclusion, oppression, or unjust discrimination. Healthcare professionals who hold the position that same-sex relationships are harmful and inconsistent with the will of God must not be stigmatized or accused of being bigoted, phobic, unprofessional, or discriminatory because of this sincerely held and widely shared belief.
- 3. Healthcare professionals must not be prevented from providing support and counseling to patients who request assistance with abstaining from homosexual behavior.

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Annotated References

Biblical References

God's Plan for Sexual Relationships

The LORD God said, "It is not good for the man to be alone. I will make a helper suitable for him." Now the LORD God had formed out of the ground all the beasts of the field and all the birds of the air. He brought them to the man to see what he would name them; and whatever the man called each living creature, that was its name. So the man gave names to all the livestock, the birds of the air and all the beasts of the field. But for Adam no suitable helper was found. So the LORD God caused the man to fall into a deep sleep; and while he was sleeping, he took one of the man's ribs and closed up the place with flesh. Then the LORD God made a woman from the rib he had taken out of the man, and he brought her to the man. The man said, "This is now bone of my bones and flesh of my flesh; she shall be called 'woman,' for she was taken out of man." For this reason a man will leave his father and mother and be united to his wife, and they will become one flesh. Genesis 2:18-24 (NIV)

Condem

Recovery

☐ And that is what some of you were. But you were washed, you were sanctified, you were justified in the name of the Lord Jesus Christ and by the Spirit of Our God. 1 Corinthians 6:11 (NIV)

Temptation, Sin and Forgiveness

□ No temptation has seized you except what is common to man. And God is faithful; he will not
let you be tempted beyond what you can bear. But when you are tempted, he will also provide a
way out so that you can stand up under it. 1 Corinthians 10:13 (NIV)
☐ For all have sinned and fall short of the glory of God Romans 3:23 (NIV)
☐ If we confess our sins, he is faithful and just and will forgive us our sins and purify us from all
unrighteousness. 1 John 1:9 (NIV)

Genetics and Childhood Molestation

Bailey, J.M., Dunne, M.P. and Martin, N.G. (2000) Genetic and Environmental influences on sexual orientation and its correlates in an Australian twin sample. *Journal of Personality and Social Psychology* **78** 524-536.

• In this identical twin study which utilized the Australian twin registry, the authors did not directly calculate the pairwise concordance rates. However, researchers Jones and Yarhouse did in their (2000) publication, *Homosexuality*. The use of scientific research in the church's moral debate, Downers Grove, Illinois: IVP, and found a concordance rate of 14% for lesbians and 11% for gays.

Whitehead Neil, Whitehead, Briar. (2007) authors of *My Genes Made Me Do It! A Scientific Look at Sexual Orientation*, Chapter 10, www.mygenes.co.nz. analyzed what these concordance rates mean in their following comments on this study and the impact of this and other identical twin studies on our understanding of the causes of same sex attraction (SSA) or homosexuality.

- An "11% concordance rate does *not* mean that 11% of identical twins have SSA. Numerous studies of western populations (Chapter 2) have shown that homosexuality is present in something between 2-3% of people, and this, of course, includes twins..."
- ➤ "Nor does 11% concordance mean that homosexuality is genetically inevitable for 11% of the homosexual population."
- ➤ "Eleven per cent concordance simply shows that when one of any number of twins from a general twin registry is (a male) homosexual, his co-twin is homosexual one time in nine, or 11% of the time."
- Dr. Whitehead concludes by saying that, "The predominant cause of SSA both in men and women is individual post-natal random reactions to biological and environmental factors." Ibid. Chapter 10, p.177-180
- Under <u>Summary</u> Dr. Whitehead further adds "One thing seems clear: any genetic contribution to SSA (same sex attraction) is much less than in most traits for which genetic influence has been measured. SSA seems 90% a result of random factors. SSA is in fact a good example of *not* being "born that way"! Ibid. Chapter 10, p. 183.

Bearman, P. S. and Bruckner, H. (2002) Opposite-sex twins and adolescent same-sex attraction. *American Journal of Sociology* **107** 1179-1205.

- The above is a study of adolescent twins in the USA. The researchers found concordance rates of same-sex romantic attraction to be low among monozygotic twins: 7.7% for males and 5.3% for females. Ibid. p. 1199.
- Bearman and Bruckner concluded, "If same-sex romantic attraction has a genetic component, it is
 massively overwhelmed by other factors." They also found "no evidence of intrauterine transfer
 of hormone effects on social behavior." But, they did "find substantial indirect evidence in
 support of a socialization model at the individual level." They also believed that previous work
 (research) was "largely incorrect as a result of reliance on nonrepresentative samples." Ibid.
 pp.1198-1199.

Santtila, P., Sandnabba, N.K., Harlaar, N., Varjonen, M., Alanko, K., von der Pahlen, B. (2007) Potential for homosexual response is prevalent and genetic. *Biological Psychology*. August, doi:10.1016/j.biopsycho.2007.08.006.

Dr. Whitehead, comments below on what this large study revealed: Whitehead, N.E. Latest Twin Study Confirms Genetic Contribution To SSA Is Minor www.narth.com/docs/isminor.html

• This study from Finland is 3 times larger than any previous study. They used a sample of over 9,000. "If one identical twin—male or female—has SSA, the chances are only about 10% that the co-twin also has it. In other words, identical twins usually differ for SSA."

Niklas Långström, Qazi Rahman, Eva Carlström, and Paul Lichtenstein, Genetic and Environmental Effects on Same-sex Sexual Behavior: A Population Study of Twins in Sweden, *Archives of Sexual Behavior*, DOI 10.1007/s10508-008-9386-1, (7 June 2008).

• The above is a Swedish twin study involving 1513 female and 807 male monozygotic pairs. Below is an assessment of what this study found: Of the identical twins in this study where one of the twins engaged in same sex behavior, the other twin also engaged in same sex behavior slightly less than 10% (of the time) for the males and slightly over 12% (of the time) for the females.

Dr. Neil Whitehead and Briar Whitehead note in their continually updated online book *My Genes Made Me Do It! A Scientific Look at Sexual Orientation*, that over the decades the better randomized the study the lower the concordance rate. www.mygenes.co.nz/

Dr. Neil Whitehead and Briar Whitehead in Chapter 10 of their book *My Genes Made Me Do It! A Scientific Look at Sexual Orientation* provide an excellent overview of gene studies and their impact on the origins of same sex attraction as does their summary chapter on the subject. Both are available free online at www.mygenes.co.nz/

<u>People Can Change</u> has an excellent website which includes a survey study of around 200 males who were going through therapy for SSA and were likely to have looked at and considered what possible issues might have contributed to their SSA. They were asked to indicate whether any of about 25 factors played a role in their SSA. They were also asked to indicate which three factors were the most important in causing their SSA. In this regard the factor that was most often picked was their relationship with their father whether or not he was present in the home. www.peoplecanchange.com/.

Maxmen, J., Ward, N., Kilgus, M. *Essential Psychopathology & Its Treatment*, W. W. Norton & Co., New York, 2009, p.468.

• "While many mental health care providers and professional associations have expressed considerable skepticism that sexual orientation could be changed with psychotherapy and also assumed that therapeutic attempts at reorientation would produce harm, recent empirical evidence demonstrates that homosexual orientation can indeed be therapeutically changed in motivated clients, and that reorientation therapies do not produce emotional harm when attempted (e.g., Byrd & Nicolosi, 2002; Byrd et al., 2008; Shaeffer et al., 1999; Spitzer, 2003)."

Journal of Human Sexuality, 1, 2009 What Research Shows: NARTH's Response to the APA Claims on Homosexuality, p.1-121 This is one of the most if not the most comprehensive review of research in this area currently in existence as it has over 600 references.) www.narth.com/.

- This monograph reviewing research dealing with therapy of same sex attraction, lists article after article indicating that shifts towards heterosexual attraction is possible, and that in a significant number of cases exclusive heterosexual functioning has been achieved. They also reveal that even in cases where the individual did not experience a change in their sexual orientation, they often found that the therapy was helpful or a positive experience. (p. 1:9-1:52)
- The authors of the study also note "There is a general consensus in the scientific literature that greater pathology exists among homosexually oriented people than among heterosexuals. In fact, it is difficult to find another group in society with such high risks for experiencing such a wide range of medical, psychological and relational dysfunction."

Whitehead, Neil, Whitehead, Briar. *My Genes Made Me Do It! A Scientific Look at Sexual Orientation*, Chapter 12, www.mygenes.co.nz/.

• In a review of the literature they noted homosexuals and heterosexuals demonstrated spontaneous as well as assisted sexual reorientation. "About one half of those with exclusive SSA (same sex attraction) had at an earlier time been bisexual or heterosexual, and about the same number changed from being exclusively SSA to bisexual or even heterosexual."

Bell, Weinberg and Hammersmith (1981) *Sexual Preference*. Bloomington, Indiana, Indiana University Press.

• They noted that about 2% of the heterosexual population (the heterosexual represents nearly all, or 97% to 98% of the total population) had at one time previously been exclusively homosexual. (Only about 2 to 3% of the population is involved in any same sex sexual activity.)

Schwartz and Masters (1984) The Masters and Johnson Treatment Program for Dissatisfied Homosexual Men, *Am J of Psychiatry* 141:2, February 1984, 173-181.

• As part of the famous Masters and Johnson Institute they wrote an article regarding the institute's work in treating dissatisfied homosexuals who wanted to alter their sexual orientation. Instead of looking at success rates, they chose to look at their failure rate in trying to help homosexuals

establish a heterosexual lifestyle. After the intensive phase of their intervention their failure rate was just 20.9%, and after 5 years it was still just 28.4%.

- (1995) Child Sexual Abuse Prevention: What Offenders Tell Us. Child Abuse and Neglect. 19: 582.
 - > 59% of male child sex offenders had been "victim of contact sexual abuse as a child."
 - > Byne, W., (1994). The Biological Evidence Challenged. Scientific American, 54.
 - ➤ "The incidence of homosexuality in the adopted brothers of homosexuals (11%) was much higher than recent estimates for the rate of homosexuality in the population (1 to 5%)."
 - "Indeed, perhaps the major finding of these heritability studies is that despite having all of their genes in common and having prenatal and postnatal environments as close to identical as possible, approximately half of the identical twins were nonetheless discordant for orientation. This finding underscores just how little is known about the origins of sexual orientation."

Byne, W., Parsons, B. (1993, March). Human Sexual Orientation: The Biologic Theories Reappraised. Archives of General Psychiatry. 50: 228-39 (228).

"It is imperative that clinicians and behavioral scientists begin to appreciate the complexities of sexual orientation and resist the urge to search for simplistic explanations, either psychosocial or biologic."
☐ "Critical review shows the evidence favoring a biologic theory to be lacking."
☐ "Although identical twins have the same genetic code, non-identical twins and regular siblings share the same proportion of genetic material. Therefore, the genetic theories should show a similar amount of homosexual concordance between non-identical twins and regular siblings."
☐ "First, they point out the fact that the study rests on the assumption that the relevant
environment is the same for identical twins and non-identical twins. Then, the effects of potential
bias in the sample is called into question, as Bailey and Pillard recruited their homosexual
research subjects by advertising in various homosexually-oriented publications."
□ "Third, there was no way to separate the intermingling of environmental and genetic effects,
since all sets of twins in the study had been raised together and presumably subject to most, if not
all, of the same environmental effects."
The most interesting question, however, is that if there is something in the genetic code that
makes a person homosexual, why did not all of the identical twins become homosexual, since
they have the exact same genetic code?"
"While all behavior must have an ultimate biologic substrate, the appeal of current biologic explanations for sexual orientation may derive more from a dissatisfaction with the current status of psychosocial explanations than from a substantiating body of experimental data. Critical review shows the evidence favoring a biologic theory to be lacking. In an alternative model, temperamental and personality traits interact with the familial and social milieus and the individual's sexuality emerges."
n B Brannock I (1987) Proposed model of lesbian identity development. An empirical

Chapman, B., Brannock, J. (1987) Proposed model of lesbian identity development. An empirical examination. Journal of Homosexuality. 14:69-80.

 \Box 63% of lesbians surveyed stated that they had chosen to be lesbians, 28% felt they had no choice, and 11% did not know why they were lesbians.

Elliott, D.M., Brier, J. (1992, February). The Sexually Abused Boy: Problems in Manhood. Medical Aspects of Human Sexuality. 26 (2): 68-71.

☐ Boys who were sexually molested have subsequently "a higher incidence of homosexuality."
Friedman, Richard, Downey, Jennifer. (1993) Neurobiology and Sexual Orientation: Current Relationships, 5. J. Neuropsychiatry & Clinical Neurosciences 131, 139.
□ "Some typical childhood factors related to homosexuality are: feeling of being different from other children; parent, sibling, peer relationships; perception of father as being distant, uninvolved, unapproving; perception of parental perfection required; perception of mother as being too close, too involved; premature introduction to sexuality (such as child abuse or incest); gender confusion; defensive detachment, reparative drive, same-sex ambivalence; unmet affection needs; diminished/distorted masculinity, femininity." □ "homosexual men are more likely to become sexually active at much younger ages than heterosexual men. The average age of homosexual males at their first sexual encounter was 12.7, versus 15.7 for heterosexual males." □ "This evidence may suggest that abuse and early sexual experiences can contribute to homosexuality, perhaps because of familiarity with sexual acts, and in some cases because of an initial sexual experience with someone of the same gender."
Golwyn, D., Sevlie, C. (1993) Adventitious change in homosexual behavior during treatment of social phobia with phenelzine. Journal of Clinical Psychiatry. 54, 1:39-40.
$\ \square$ "We conclude that social phobia may be a hidden contributing factor in some instances of homosexual behavior." (p. 40)
Harry, J. (1989) Parental physical abuse and sexual orientation in males. Archives of Sexual Behavior. 18, 3:251-261.
☐ "These data suggest that some history of childhood femininity is almost always a precursor of adolescent homosexual behavior." (p. 259)
Herrell, R., et al. (1999, October). Sexual Orientation and Suicidality: a Co-Twin Control Study in Adult Men. Archives of General Psychiatry. 56 (10): 867-874.
☐ This study of male twins who were Vietnam veterans found that male homosexuals were 5.1 times more likely to experience suicidal thoughts and behaviors than were their heterosexual twins.
Hockenberry, S., Billingham, R. (1987) Sexual orientation and boyhood gender conformity: Development of the boyhood gender conformity scales (BGCS) Archives of Sexual Behavior. 16, 6:475-492.
"the absence of masculine behaviors and traits appeared to be a more powerful predictor of later homosexual orientation than the traditionally feminine or cross-sexed traits and behaviors." (p. 475)
Horgan, J., (1995) Gay genes, revisited: Doubts arise over research on the biology of homosexuality. Scientific American. Nov.: 28. Hubbard, Ruth, Wald, Elijah (1993). Exploring the Gene Myth 6.
☐ "The myth of the all-powerful gene is based on flawed science that discounts the environmental context in which we and our genes exist."

☐ "A gene does not determine a phenotype [noticeable trait] by acting alone; a gene cannot act by itselfEach gene simply specifies one of the proteins involved in the process."
Jefferson, D.J., (1993, August 12). Studying the Biology of Sexual Orientation Has Political Fallout. Wall Street Journal. 1A.
Lisak, D., Luster, L. Educational, occupational, and relationship histories of men who were sexually and/or physically abused as children. J Trauma Stress. 1994 Oct; 7(4): 507-23.
☐ Nearly one in four young men report sexual abuse as a child resulting in significant life difficulties (as compared to non-abused males).
McGuire, T., (1995) Is homosexuality genetic? A critical review and some suggestions. Journal of Homosexuality. 28, 1/2: 115-145.
☐ "Even if we knew absolutely everything about genes and absolutely everything about environment, we still could not predict the final phenotype of any individual." (p. 142)
Nimmons, David. (March 1994). Sex and the Brain, Discover, 64-71.
"It is important to stress what I didn't find. I did not prove that homosexuality is genetic, or find a genetic cause for being gay. I didn't show that gay men are born that way, the most common mistake people make in interpreting my work. Nor did I locate a gay center in the brain. INAH 3 is less likely to be the sole gay nucleus of the brain than a part of a chain of nuclei engaged in men and women's sexual behavior Since I looked at adult brains, we don't know if the differences I found were there at birth, or if they appeared later."
Pollak, M. Male Homosexuality in Western Sexuality: Practice and Precept in Past and Present Times, ed P. Aries and A. Bejin, 40-61, cited by Joseph Nicolosi in Reparative Therapy of Male Homosexuality. Northvale, NJ: Jason Aronson Inc., 1991), 124-125.
Tomeo, M.E., et al. (2001, October). Comparative data of childhood and adolescence molestation in heterosexual and homosexual persons. Archives of Sexual Behavior. 30 (5): 535-541.
□ 942 nonclinical adult participants, gay men and lesbian women reported a significantly higher rate of childhood molestation than did heterosexual men and women. Forty-six percent of the homosexual men in contrast to 7% of the heterosexual men reported homosexual molestation. Twenty-two percent of lesbian women in contrast to 1% of heterosexual women reported homosexual molestation.
Whitehead, Neil, Whitehead, Brian. (1999) My Genes Made Me Do It! A Scientific Look at Sexual Orientation, 158-159.
□ "Neil Whitehead tabulated other twin studies on other topics and those traits' heritability: lying43%, anorexia nervosa44%, fear of the unknown46%, psychological inpatient care-47%, extroversion50%, depression50%, altruism50%, divorce52%, racial prejudice, bigotry70%.
☐ "(Dean) Hamer's genetic sequences have been calculated to affect about 5% of the homosexual population, so even if he is correct, there must be some other explanation for what causes the vast majority of homosexuality."

☐ "If a hormonal imbalance was responsible for homosexuality, then perhaps a simple dose of hormones to an adult would cure homosexuality. This is not the case, as has been demonstrated several times."
Wolf, C. Homosexuality and American Public Life, Spence Publishing Co., Dallas, 1999, p. 70-71.
Homosexually-assaulted males identified themselves as subsequently becoming practicing homosexuals almost 7 times as often as bisexuals and almost 6 times as often as the non-assaulted control group. 58% of adolescents reporting sexual abuse by a man prior to puberty revealed either homosexual or bisexual orientation (control group 90% heterosexual). Age of molestation was 4-14 years. "Nearly half of men who have reported a childhood experience with an older man were currently involved in homosexual activity." A disproportionately high number of male homosexuals were incestuously molested by a homosexual parent. Conclusion was that the experience led the boy to perceive himself as homosexual based on his having been found sexually attractive by an older man.
Social Factors
Bem, Daryl J. (1986) Exotic Becomes Erotic: A Developmental Theory of Sexual Orientation, 103 Psychol. Rev. 320.
□ Daryl Bem's "Exotic Becomes Erotic" theory states that "what is exotic to children becomes erotic to them as adolescents." For example, "boys who play with girls mostly instead of other boys, and who tend to like the way girls play, become familiar and comfortable with femininity. Male behavior and males become exotic, and thus erotic later in life."
Burtoft, L. (1994). Behind the Headlines: Setting the Record Straight – What Research Really Says About the Social Consequences of Homosexuality. Colorado Springs, CO: Focus on the Family.
Fisher, S., Greenberg, R. (1996) Freud Scientifically Reappraisal. NY: Wiley & Sons.
□ "Fisher analyzed the 58 studies and reported that a large majority supported the notion that homosexual sons perceive their fathers as negative, distant, unfriendly figures." "There is not a single even moderately well controlled study that we have been able to locate in which male homosexuals refer to father positively or affectionately." (p. 136)
Fitzgibbons, R., (1999) The origins and therapy of same-sex attraction disorder. (in Wolfe, C. Homosexuality and American Public Life. Spence) 85-97.
□ "the second most common cause of SSAD [same sex attraction disorder] among males is mistrust of women's love Male children in fatherless homes often feel overly responsible for their mothers. As they enter their adolescence, they may come to view female love as draining and exhausting." (p. 89) □ "Experience has taught me that healing is a difficult process, but through the mutual efforts of the therapist and the patient, serious emotional wounds can be healed over a period of time." (p. 96)

Friedman, Richard, Downey, Jennifer. (1993) Neurobiology and Sexual Orientation: Current Relationships, 5. J. Neuropsychiatry & Clinical Neurosciences 131, 139.

□ "Some typical childhood factors related to homosexuality are: feeling of being different from other children; parent, sibling, peer relationships; perception of father as being distant, uninvolved, unapproving; perception of parental perfection required; perception of mother as being too close, too involved; premature introduction to sexuality (such as child abuse or incest gender confusion; defensive detachment, reparative drive, same-sex ambivalence; unmet affection needs; diminished/distorted masculinity, femininity." □ "homosexual men are more likely to become sexually active at much younger ages than heterosexual men. The average age of homosexual males at their first sexual encounter was 12. versus 15.7 for heterosexual males." □ "This evidence may suggest that abuse and early sexual experiences can contribute to homosexuality, perhaps because of familiarity with sexual acts, and in some cases because of a initial sexual experience with someone of the same gender."	t); .7,
Newman, L. (1976) Treatment for the parents of feminine boys. American Journal of Psychiatry. 133, 6683-687.	5:
□ "Experiences of being ostracized and ridiculed may play a more important role than has bee recognized in the total abandonment of the male role at a later time." (p. 687) □ "Feminine boys, unlike men with postpubertal gender identity disorders seem remarkably responsive to treatment." (p. 684)	'n
Nicolosi, J. Byrd, A., Potts, R. (1998) Towards the Ethical and Effective Treatment of Homosexuality. Encino CA: NARTH.	
□ Nicolosi surveyed 850 individuals and 200 therapists and counselors – specifically seeking individuals who claim to have made a degree of change in sexual orientation. Before counseling or therapy, 68% of respondents perceived themselves as exclusively or almost entirely homosexual, with another 22% stating they were more homosexual than heterosexual. After treatment only 13% perceived themselves as exclusively or almost entire homosexuality, while 33% described themselves as either exclusively or almost entirely heterosexual, 99% of respondents said they now believe treatment to change homosexuality can be effective and valuable.	ıg
Phillips, G., Over, R. (1992) Adult sexual orientation in relation to memories of childhood gender conforming and gender nonconforming behaviors. Archives of Sexual Behavior. 21, 6: 543-558.	
"The 16-item discriminate-function yielded correct classification of 94.4% of heterosexumen and 91.8% of the homosexual men. These results indicate that heterosexual and homosexumen can be classified with equivalent accuracy on the basis of recalling having had or not have had gender conforming (masculine) experiences in childhood." (p. 550)	ıal
Stephan, W., (1973) Parental relationships and early social experiences of activist male homosexuals armale heterosexuals. Journal of Abnormal Psychology. 82, 3: 506-513.	nd
"homosexuals reported experiencing their first orgasm at a younger age than the heterosexuals." 24% of homosexuals' first orgasms occurred during homosexual contacts versu 2% of heterosexuals. (p.511)	us

Zucker, K., Bradley, S. (1995) Gender Identity Disorder and Psychosexual Problems in Children and Adolescents. NY: Guilford.

" we feel that parental tolerance of cross-gender behavior at the time of its emergence is instrumental in allowing the behavior to develop" (p. 259) " In general we concur with those (e.g. Green 1972; Newman 1976; Stoller, 1978) who believe that the earlier treatment begins, the better." (p. 281) "It has been our experience that a sizable number of children and their families can achieve a great deal of change. In these cases, the gender identity disorder resolves fully, and nothing in the children's behavior or fantasy suggests that gender identity issues remain problematic All things considered, however, we take the position that in such cases clinicians should be optimistic, not nihilistic, about the possibility of helping the children to become more secure in their gender identity." (p. 282)
Physical Health
(1993). STD Treatment Guidelines: Proctitis, Proctocolitis, and Enteritis. (Centers for Disease Control and Prevention). Available at: www.ama-assn.org/special/std/treatmnt/guide/stdg3470.htm .
☐ GBS problems such as proctitis, proctocolitis, and enteritis as "sexually transmitted gastrointestinal syndromes."
(1998). Hepatitis C: Epidemiology: Transmission Modes. Mortality and Morbidity Weekly Report (Centers for Disease Control and Prevention). Available at: www.cdc.gov/nidod/diseases/hepatitis/c/edu/1/default.htm .
 □ Men who have sex with men who engage in unsafe sexual practices remain at an increased risk for contracting hepatitis C. (1998, September 4). Mortality and Morbidity Weekly Report (Centers for Disease Control and Prevention). p. 708. □ "Outbreaks of hepatitis A among men who have sex with men are a recurring problem in many large cities in the industrialized world."
(1999, December). Table 9. Male Adult/Adolescent AIDS Cases by Exposure Category and Race/Ethnicity. Centers for Disease Control and Prevention: Division of HIV/AIDS Prevention. Available at www.cdc.gov/hiv/stats/hasr1102/table9 .
☐ "Men who have sex with men" and "men who have sex with men and inject drugs" together accounted for 64 percent of the cumulative total of male AIDS cases.
(1999, January 29). Increases in unsafe sex and rectal gonorrhea among men who have sex with men – San Francisco, California, 1994-1997. Mortality and Morbidity Weekly Report (Centers for Disease Control and Prevention). p. 45.
 □ According to the Centers for Disease Control and Prevention (CDC), from 1994 to 1997 the proportion of homosexuals reporting having had anal sex increased from 57.6 percent to 61.2 percent, while the percentage of those reporting "always" using condoms declined from 69.6 percent to 60 percent. □ The proportion of men reporting having multiple sex partners and unprotected anal sex increased from 23.6 percent to 33.3 percent.
(1999, January 29). Mortality and Morbidity Weekly Report (Centers for Disease Control and Prevention). p. 48.

☐ Male rectal gonorrhea is increasing among homosexuals amidst an overall decline in national gonorrhea rates.
(2000, November 14). Young People at Risk: HIV/AIDS among America's Youth. Divisions of HIV/AIDS Prevention (Centers for Disease Control). Available at: www.cdc.gov/hiv/pubs/facts/youth.htm .
"At least half of all new HIV infections in the United States are among people under twenty-five, and the majority of young people are infected sexually." By the end of 1999, 29,629 young people aged thirteen to twenty-four were diagnosed with AIDS in the United States. MSM were the single largest risk category: in 1999, for example, 50 percent of all new AIDS cases were reported among young homosexuals.
(2000, September 29). Viral Hepatitis B – Frequently Asked Questions. National Center for Infectious Diseases (Centers for Disease Control and Prevention). Available at: www.cdc.gov/ncidod/diseases/hepatitis/b/faqb .
☐ Men who have sex with men are at increased risk for hepatitis B.
Increases in unsafe sex and rectal gonorrhea among men who have sex with men – San Francisco, California, 1994-1997. Journal of the American Medical Association. 281 (8): 696-697.
☐ Interviews of 21, 850 males: Increasing percentages of men who have sex with men reported engaging in unprotected anal intercourse. There was an Increase in rectal gonorrhea rates.
The Centers for Disease Control and Prevention: Morbidity and Morality Weekly Report. 51 (33): 733-736.
$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $
The Center for Disease Control Fact Sheet (2014): Reported STDs in the United States, archived at: http://www.cdc.gov/std/stats14/std-trends-508.pdf
 19,999 cases of syphilis reported in 2014 represented a 15.1% increase since 2013. Men who had sex with men accounted for 74.7% of cases of syphilis.
Beral, et al., op cit.; Corey, Lawrence, and King K. Holmes. (1980, February 21). Sexual Transmission of Hepatitis A in Homosexual Men. The New England Journal of Medicine. 302: (8) 435-438.
Bradford, J. (2002, July 10). Lesbian and bisexual health: an overview for healthcare providers. Journal Watch Women's Health [On-line], Available: womens-health.jwatch.org .
☐ Lesbian and bisexual women have higher reported rates of risk for cancer and cardiovascular disease as well as obesity and High rates of human papilloma virus infection.
Calabrese, L. Harris, B., Easley, K. (1987) Analysis of variables impacting on safe sexual behavior

among homosexual men in the area of low incidence for AIDS. Paper presented at the Third International

Conference for AIDS. Washington DC. (in Stall 1988)

	□ Sample of gay men living outside of the large coastal gay communities, found that neither attendance at a safe sex lecture, reading a safe sex brochure, receiving advice from a physician about AIDS, testing for HIV antibodies, nor counseling at an alternative test site was associated with participation in safe sex.
wome	on, M.J. et al. (2001, March 1). Blood-borne and sexual transmission of human herpesvirus 8 in en with or at risk for human immunodeficiency virus infection. The New England Journal of cine. 344 (9): 637-743.
	☐ "Human herpesvirus 8 (HHV-8), the causal agent of Kaposi's sarcoma, is transmitted sexually among homosexual men."
	ran, S.D. et al. (2001 April). Cancer-related risk indicators and preventive screening behaviors ag lesbians and bisexual women. American Journal of Public Health. 91 (4); 178-81.
	ng, J.R. et al. (1987, October 15). Sexual practices, sexually transmitted diseases, and the incidence all cancer. The New England Journal of Medicine. 317 (16): 973-977.
	☐ Anal cancers were strongly associated with a history of male homosexual activity.
	ers, K. et al. (2000, July). Sexually Transmitted Infections and Risk Behaviors in Women Who Have with Women. Sexually Transmitted Infections. p. 345.
	☐ Women who have sexual relations with women are at significantly higher risk for certain sexually transmitted diseases: "BV (bacterial vaginosis), hepatitis C, and HIV risk behaviors in WSW as compared with controls."
Frieb p. 21	erg, P. (2001, January 12). Study: Alcohol Use More Prevalent for Lesbians. The Washington Blade.
	□ Lesbian women consume alcohol more frequently, and in larger amounts, than heterosexual women. Lesbians were at significantly greater risk than heterosexual women for both binge drinking (19.4 percent compared to 11.7 percent), and for heavy drinking (7 percent compared to 2.7 percent).
	h, M.F. et al. (1997, November 6). Sexually transmitted infection as a cause of anal cancer. The New and Journal of Medicine. 337 (19): 1350-1358.
	☐ In a study of 324 women and 93 men with invasive or in situ anal cancer, findings supported the previously recognized association between anal cancer and homosexual contact.
	o, J. (2000, July 18). Gay and Bisexual Men Less Likely to Disclose They Have HIV. Gay Health s. Available at www.gayhealth.com/templates/0/news?record=136 .
	 □ Thirty-six percent of homosexuals engaging in unprotected oral, anal, or vaginal sex failed to disclose that they were HIV positive to casual sex partners. □ 45 percent of homosexuals reporting having had unprotected anal intercourse during the previous six months did not know the HIV serostatus of all their sex partners. 68 percent did not know the HIV serostatus of their partners.

American Family Physician. 47: 598-608. Hogg, R.S. et al. (1997). Modeling the impact of HIV disease on mortality in gay and bisexual men. International Journal of Epidemiology. 26 (3): 657-661. ☐ "Life expectancy at age 20 years for gay and bisexual men is 8 to 20 years less than for all men. If the same pattern of mortality were to continue, we estimate that nearly half of gay and bisexual men currently aged 20 years will not reach their 65th birthday." Hoover, D., Munoz, A., Carey, V., Chmiel, J., Taylor, J., Margolick, J., Kingsley, L., Vermund, S. (1991) Estimating the 1978-1990 and future spread of human immunodeficiency virus type 1 in subgroups of homosexual men. American Journal of Epidemiology. 134, 10:1190-1205. ☐ "The overall probability of seroconversion [from HIV- to HIV+] prior to age 55 years is about 50%, with seroconversion still continuing at and after age 55. Given that this cohort consists of volunteers receiving extensive and anti-HIV-1 transmission education, the future seroconversion rates of the general homosexual population may be even higher. Jaffe, et al., op cit.; Quinn, Thomas C., et al. (1983, September 8). The Polymicrobial Origin of Intestinal Infections in Homosexual Men. The New England Journal of Medicine. 309: (10) 576-582. Judson, F.N. et al. (1980). Comparative Prevalence Rates of Sexually Transmitted Diseases in Heterosexual and Homosexual Men. The American Journal of Epidemiology. 112: 836-843. Laughon, B.E., Druckman, D.A., et al., (1988). Prevalence of enteric pathogens in homosexual men with and without acquired immunodeficiency syndrome. Gastroenterology. 94: 984-993. Miles, A.J. et al. (1993, March). Effect of anorreceptive intercourse on anorectal function. Journal of the Royal Society of Medicine. 83: (3) 144-147. Morris, M., Dean, L., (1994) Effects of sexual behavior change on long-term human immunodeficiency virus prevalence among homosexual men. American Journal of Epidemiology. 140, 3: 217-232. Osmond, D., Page, K., Wiley, J., Garrett, K., Sheppard, H., Moss, A., Schrager, K., Winkelstein, W., (1994) HIV infection in homosexual and bisexual men 18 to 29 years of age: The San Francisco young men's health study. American Journal of Public Health. 84, 12: 1933-1937. ☐ Household survey of unmarried men 18 through 29 years of age found that of 328 homosexual men 20.1% tested positive tested for HIV. Pauk, J., et al. (2000, November 9). Mucosal shedding of human herpesvirus 8 in men. The New England Journal of Medicine. 343: 1369-1377. ☐ Human herpesvirus 8 (HHV-8) is likely the cause of Kaposi's Sarcoma. Its prevalence in men who have sex with men is much higher than in the general population.

Quinn, T.C. (1984). Gay bowel syndrome. The broadened spectrum of non-genital infection. Postgraduate

Medicine. 76: 197-198, 201-210.

Hastings, G.E., Weber, R.W. (1993). Inflammatory bowel disease: Part I. Clinical features and diagnosis.

Rotello, G. (1997). Sexual Ecology: AIDS and the Destiny of Gay Men. NY: Dutton.
□ "Who wants to encourage their kids to engage in a life that exposes them to a 50 percent chance of HIV infection? Who even wants to be neutral about such a possibility? If the rationale behind social tolerance of homosexuality is that it allows gay kids an equal shot at the pursuit of happiness, that rationale is hopelessly undermined by an endless epidemic that negates happiness." (p. 286)
Roundy, B. (2000, December 8). STD's Up Among Gay Men: CDC Says Rise is Due to HIV Misperceptions. The Washington Blade. Available at: www.washblade.com/health/a .
☐ "A San Francisco study of Gay and bisexual men revealed that HPV infection was almost universal among HIV-positive men, and that 60 percent of HIV-negative men carried HPV.
Schwabke, J.R. (1991, April). Syphilis in the 90s. Medical Aspects of Human Sexuality. 44-49.
☐ Syphilis and gonorrhea are rising in the homosexual and bisexual population.
Shehan, D.A. et al. (2003). HIV/STD Risks in Young Men Who Have Sex with Men Who Do Not Disclose Their sexual Orientation. The Centers for Disease Control and Prevention: Morbidity and Mortality Weekly Report. 52: 81-86.
☐ Young MSM who do not disclose their sexual orientation (non-disclosers) are thought to be at particularly high risk for human immunodeficiency virus (HIV) infection because of low selfesteem, depression, or lack of peer support and prevention services that are available to MSM who are more open about their sexuality (disclosers).
Smith, T.W. (1991, May/June). Adult Sexual Behavior in 1989: Number of Partners, Frequency of Intercourse and Risk of AIDS. Family Planning Perspectives. 23: (3) 102-107 (Table 2, 104).
Valleroy, L.A. et al. (2000, July 12). HIV prevalence and associated risks in young men who have sex with men. Journal of the American Medical Association. 284 (2): 198-204.
☐ Men who have sex with men were found to have a 100 to 700 times greater prevalence rate of HIV infection than primarily heterosexual men who applied for service in the U.S. military. Men who have sex with men were also found to have a high prevalence of hepatitis B viral markers (10.7%). High HIV rates were correlated with anal sex and having had sex with 20 or more men.
Zavodnick, J.M. (1989, January). Detection and Management of Sexual Abuse of Boys. Medical Aspects of Human Sexuality. 80-90.
$\ \square$ "Sixteen percent of adult men in the general population have said they were sexually abused as children."
Zmuda, R. (2000, August 17). Rising Rates of Anal Cancer for Gay Men. Cancer News. Available at: cancerlinksusa.com/cancernews-sm/Aug2000/081700analcancer .
☐ "Most instances of anal cancer are caused by a cancer-causing strain of HPV through receptive anal intercourse. HPV infects over 90 percent of HIV-positive gay men and 65 percent of HIV-negative gay men, according to a number of recent studies."

Mental Health & Substance Abuse

Aaron, D.J., Markovic, N., Danielson, M.E., et al. (2001). Behavioral risk factors for disease and preventive health practices among lesbians. American Journal of Public Health. 91 (6): 972-975.
☐ Lesbians were more likely to report cigarette use, alcohol use, and heavy alcohol use.
Bailey, J.M. (1999, October). Homosexuality and Mental Illness. Archives of General Psychiatry. 56: 883-884.
"Homosexual people are at a substantially higher risk for some forms of emotional problems, including suicidality, major depression and anxiety disorder. Gay, lesbian, or bisexual people were at an increased lifetime risk for suicidal ideation and behavior, major depression, generalized anxiety disorder, conduct disorder, and nicotine dependence."
Beitchman, J., Zucker, K., Hood, J., DaCosta, G., Akman, D. (1991) A review of the short-term effects of child sexual abuse. Child Abuse & Neglect. 15:257-556.
□ "Among adolescents, commonly reported sequalae (of child sexual abuse) include sexual dissatisfaction, promiscuity, homosexuality, and an increased risk for re-victimization." (p. 537) □ "A review of studies reporting symptomology among sexually abused adolescents revealed evidence for the presence of depression, low self-esteem, and suicidal ideation." (p. 544)
Bradford, J. et al. (1994). National Lesbian Health Care Survey: Implications for Mental Health Care. Journal of Consulting and Clinical Psychology. 62: 239, cited in Health Implications Associated with Homosexuality, p. 81.
☐ More than half of lesbians had felt too nervous to accomplish ordinary activities at some time during the past year and over one-third had been depressed.
Bradley, S., Zucker, K. (1997) Gender identity disorder: A review of the past 10 Years. Journal of the American Academy of Child and Adolescent Psychiatry. 34, 7:872-880.
□ "Girls with GID [Gender Identity Disorder]have difficulty connecting with their mothers, who are perceived as weak and ineffective. We see this perception as arising from the high levels of psychopathology observed in these mothers, especially severe depression and borderline personality disorder." (p. 877) □ "In our female adolescents with GID, a history of sexual abuse or fears of sexual aggression has appeared commonly." (p. 878)
Cochran, S.D., Mays, V.M. (2000). Relation between psychiatric syndromes and behaviorally defined sexual orientation in a sample of the US population. American Journal of Epidemiology. 151 (5): 516-523.
☐ Homosexually active men were more likely than other men to have evidence of major depression and panic attack syndromes. Homosexually active women were more likely than other women to be classified with alcohol or drug dependency syndromes. Both men and women reporting any same-gender sex partners were more likely than others to have used mental health services.

Diamant, A.L., Wold, C., Sritzer, K., Gelberg, L. (2000, November-December). Health Behaviors, Health Status, and Access to and Use of Health Care. Archives of Family Medicine. 9: 1043-1051.		
☐ Lesbians and bisexual women were more likely than heterosexual women to use tobacco products and to report any alcohol consumption, but only lesbians were significantly more likely than heterosexual women to drink heavily.		
ergusson, D., Horwood., L., Beautrais, A. (1999) Is sexual orientation related to mental health problem and suicidality in young people? Archives of General Psychiatry. 56, 10:876-888.		
□ The gay, lesbian, bisexual subjects have significantly higher rates of: suicidal ideation (67.9%/29.0%), suicide attempt (32.1%/7.1%), and psychiatric disorders age 14-21 – major depression (71.4%/38.2%), generalized anxiety disorder (28.5%/12.5%), conduct disorder (32.1%11.0%), nicotine dependence (64.3%/26.7%), other substance abuse/dependence (60.7%/44.3%), and multiple disorders (78.6%/38.2%) than the heterosexual sample. (p. 879) □ Findings support recent evidence suggesting that gay, lesbian, and bisexual young people are at increased risk of mental health problems, with these associations being particularly evident for measures of suicidal behavior and multiple disorder.		
Fifield, L., Latham, J., Phillips, C. (1977) Alcoholism in the Gay Community: The Price of Alienation, Isolation and Oppression, A Project of the Gay Community Service Center, Los Angeles, CA.		
\square "an alarming number of gay men and women (31.96%) are trapped in an alcohol-centered lifestyle."		
Garafolo, R., Wolf, R., Kessel, S., Palfrey, J., DuRant, R., (1998) The association between health risk behaviors and sexual orientation among a school-based sample of adolescents: Youth risk behavior survey. Pediatrics. 101, 5:895-903.		
□ "Gay and bisexual teenagers may take more risks, and engage in risky behavior earlier in life, than teenagers who describe themselves as heterosexual. GLB [gay, lesbian, bisexual] teenagers were more likely to consider or attempt suicide, abuse alcohol or drugs, participate in risky sexual activity, or be victimized, and to initiate these behaviors earlier."		
Gilman, S.E., Cochran, S.D., Mays, V.M., et al. (2001) Risk of psychiatric disorders among individuals reporting same-sex sexual partners in the National Comorbidity Survey. American Journal of Public Health. 91 (6): 933-939.		
☐ Higher 12-month prevalences of anxiety, mood, and substance use disorders and of suicidal thoughts and plans than did respondents with opposite-sex partners only. Homosexual orientation, defined as having same-sex sexual partners, is associated with a general elevation of risk for anxiety, mood, and substance use disorders and for suicidal thoughts and plans.		
Herrell, R. et al. (1999, October). Sexual Orientation and Suicidality: a Co-Twin Control Study in Adult Men. Archives of General Psychiatry. 56 (10): 867-874.		
☐ This study of male twins who were Vietnam veterans found that male homosexuals were 5.1 times more likely to experience suicidal thoughts and behaviors than were their heterosexual twins.		

Jorm, A.F. et al. (2002). Sexually orientation and mental health: results from a community survey of young and middle-aged adults. British Journal of Psychiatry. 180: 423-427.
☐ The bisexual group was highest on measures of anxiety, depression and negative affect, with the homosexual group falling between the other two groups. Both the bisexual and homosexual groups were high on suicidality.
McKirnan, D.J., Peterson, P.L., (1989). Alcohol and drug use among homosexual men and women: epidemiology and population characteristics. Addictive Behavior. 14 (5): 545-553.
☐ "This paper presents the findings of a large (n-3400) survey of the homosexual populationSubstantially higher proportions of the homosexual sample used alcohol, marijuana, or cocaine than was the case in the general population."
Moran, N. (1996, May). Lesbian health care needs. Canadian Family Physician. 42: 879-884. Lesbians were found to smoke, drink alcohol and use caffeine more than other women.
Mulry, G., Kalichman, S., Kelly, J. (1994) "Substance use and unsafe sex among gay men: Global versus situational use of substances. Journal of Sex Educators and Therapy. 20, 3: 175-184.
"men who never drank prior to sex were very unlikely to have engaged in unprotected anal intercourse, whereas 90% of men who had at least one occasion of unprotected anal intercourse also drank at least some of the time prior to sexual intercourse." "a virtual absence of individuals who did not drink but did engage unprotected anal intercourse." (p. 181)
Parris, J., Zweig-Frank, H., Guzder, J. (1995) Psychological factors associated with homosexuality in males with borderline personality disorders. Journal of Personality Disorders. 9, 11: 56-61.
□ The rate of homosexuality in the BPD [Borderline Personality Disorder] sample was 16.7%, as compared with 1.7% in the non-BPD comparison group. The homosexual BPD group had a rate of overall Childhood Sexual Abuse of 100% as compared to 37.3% for the heterosexual BPD group. "It is interesting that 3 out of 10 homosexual borderline patients also reported father-son incest." (p. 59)
Remafedi, G. (1999, October). Suicide and Sexual Orientation. Archives of General Psychiatry. 56: 885-886.
□ The 1989 Report of the Secretary's Task Force on Youth Suicide concluded that "gay youth are 2 to 3 times more likely to attempt suicide than other young people. They may comprise up to 30% of completed youth suicides annually. To date, at least 10 peer-reviewed studies have found unusually high rates of attempted suicide, in the range of 20% to 42% among young bisexual and homosexual research volunteers. All have found a clinically and statistically significant association between suicide attempts and homosexuality, strongest among males.
Ritter, Malcolm (May 1999) Study: Some Gays Can Go Straight, Associated Press.
□ "Perhaps the most significant study to date was reported by Robert L. Spitzer, MD at the American Psychiatric Association. In his research, Dr. Spitzer studied 200 men and women who had participated in gender affirmative therapy. He concluded that 66% of the men and 44% of the women had arrived at what he called good heterosexual functioning. In addition, 89% of the men

feelings." Rogers, C., Roback, H., McKee, E., Calhoun, D. (1976) Group psychotherapy with homosexuals: A review. International Journal of Group Psychotherapy. 31, 3: 3-27 ☐ "In general, reports on the group treatment of homosexuals are optimistic; in almost all cases the therapists report a favorable outcome of therapy whether the therapeutic goal was one of achieving a change in sexual orientation or whether it was a reduction in concomitant problems." (p.22)Saghir, J., Robins, E. (1973) Male and Female Homosexuality: A Comprehensive Investigation. Baltimore MD: Williams & Wilkins. □ 30% of the homosexuals in their sample reported excessive drinking or alcohol dependence. ☐ The average male homosexual live-in relationship lasts between two and three years (p. 225) Sandfort, T.G., de Graaf, R., Bijl, R.V., Schnabel, P. (2001, January). Same-Sex Sexual Behavior and Psychiatric Disorders: findings from the Netherlands mental health survey and incidence study. (NEMESIS). Archives of General Psychiatry. 58: 85-91. □ A Dutch study of 5998 heterosexual and homosexual men and women showed that "psychiatric disorders were more prevalent among homosexually active people compared with heterosexually active people...On a lifetime basis, homosexual women had a significantly higher prevalence of general mood disorders and major depression than did heterosexual women...Lifetime prevalence of both alcohol and other drug dependence was also significantly higher in homosexual women than in heterosexual women." Skegg, K. et al. (2003, March). Sexual orientation and self-harm in men and women. American Journal of Psychiatry. 160 (3): 541-546. □ New Zealand study of 770 heterosexual men and women and 172 men and women who experienced different degrees of same sex attraction, the authors found: That attempts to inflict self harm increase with the degree of homosexual attraction. There were elevated rates of substance abuse in both sexes experiencing same sex attraction. This was particularly prominent in lesbians. Valamis, B.G., Bowen, D.J., Bassford, T., et al. (2000, September-October). Sexual Orientation and Health. Archives of Family Medicine. 9: 843-853. ☐ Lesbian and bisexual women more often used alcohol and cigarettes, exhibited other risk factors for reproductive cancers and cardiovascular disease, and scored lower on measures of mental health and social support. Whitehead, Neil, Whitehead, Brian. (1999) My Genes Made Me Do It! A Scientific Look at Sexual Orientation, 158-159. □ Neil Whitehead tabulated other twin studies on other topics and those traits' heritability: lying--43%, anorexia nervosa--44%, fear of the unknown--46%, psychological inpatient care--47%,

and 95% of the women said they were bothered slightly, or not at all, by unwanted homosexual

extroversion50%, depression50%, altruism50%, divorce52%, racial prejudice, bigotry70%.
☐ "(Dean) Hamer's genetic sequences have been calculated to affect about 5% of the homosexual population, so even if he is correct, there must be some other explanation for what causes the vast majority of homosexuality."
☐ "If a hormonal imbalance was responsible for homosexuality, then perhaps a simple dose of hormones to an adult would cure homosexuality. This is not the case, as has been demonstrated several times."
Zubenko, G., George, A., Soloff, P., Schulz, P. (1987) Sexual practices among patients with borderline personality disorder. American Journal Psychiatry. 144, 6: 748-752.
□ "Homosexuality was 10 times more common among the men and six times more common among the women with borderline personality disorder than in the general population or in a depressed control group." (p. 748)
<u>Pedophilia</u>
Male Intergenerational Intimacy. The Journal of Homosexuality. 20 (1-2).
□ One writer claims that pedophilia offers "companionship, security and protection" (162) that neither his parents nor peers are able to provide, and urges parents to value their son's pedophile lover "not as a rival or competitor, not as a thief of their property, but as a partner in the boy's upbringing, someone to be welcomed into their home" (164). In the same issue, Gerald Jones, seeking to legitimize his ideology in academic jargon, claims that "same-sex intergenerational intimacy (i.e., pedophilia) may be developmentally functional," refers to studies indicating "benign or even beneficial results in boys who wereinvolved with men," and contends that pedophilia is a morally neutral behavior. (279-280). □ Regarding the prevalence of pedophilia amongst homosexuals, literature discussing the history of homosexuality (see David F. Greenberg, The Construction of Homosexuality [Chicago: The University of Chicago Press, 1988]), quasi-scholarly journals (PAIDIKA, The Journal of Paedophilia, Amsterdam, Netherlands), as well as current materials published by the North American Man-Boy Love Association (NAMBLA) reveal that erotic relationships with children are a significant element in the homosexual community.
(March 1992). Editorial, No Place for Homo-Homophobia, S.F. Sentinel (on file with author.)
"Leading mainstream homosexual newspapers and magazines such as the Advocate, Edge, Metroline, The Guide, and The San Francisco Sentinel have not only published pro-NAMBLA articles and columns but also many have editorialized in favor of NAMBLA and sex with children. The editor of The Guide, Ed Hougen, stated in an interview with Lambda Report, "I believe they [NAMBLA] are generally interested in the right of young people to be sexualI am glad there is a group like NAMBLA that is willing to be courageous." The San Francisco Sentine was more blunt: "NAMBLA's position on sex is not unreasonable, just unpopular. [W]hen a 14-year-old gay boy approaches a man for sex, it's because he wants sex with a man."
http://www.abidingtruth.com/.
☐ "Incredibly the pro-pedophile group, North American Man Boy Love Association (NAMBLA), which calls itself a homosexual group, wrote a letter to the national Scout office urging 'the Boy Scouts of America to cease its discrimination against openly gay or lesbian

persons in the appointment of its scout masters and scouters and in its membership. This will permit scouts to be exposed to a variety of lifestyles and will permit more of those individuals who genuinely wish to serve boys to do so.""

(April 23, 1994). Letter from Roy Radow, NAMBLA, What People are Saying About NAMBLA and Man/Boy Love, at http://qrd.tcp.com/qrd/orgs/NAMBLA/quotes .
☐ "Gay authors and leaders such as Allen Ginsberg, Gayle Rubin, Larry Kramer (founder of ACT-UP), Pat Califia, Jane Rule, Michael Kearns, and Michel Foucault have all written in favor of either NAMBLA or man-boy relationships."
(July 1995). The Real Child Abuse, The Guide, (on file with author).
□ "In 1995, the homosexual magazine Guide stated: 'We can be proud that the gay movement has been home to the few voices who have had the courage to say out loud that children are naturally sexual, that they deserve the right to sexual expression with whoever they choose[w]e must listen to our prophets. Instead of fearing being labeled pedophiles, we must proudly proclaim that sex is good, including children's sexualityWe must do it for the children's sake."
(1990) Encyclopedia of Homosexuality 964, Wayne Dynes ed.
"'Mainstream' homosexual conferences commonly feature speeches about intergenerational sex as it is now called. For example, at one of the nation's largest homosexual gatherings, the annual National Gay Lesbian Task Force convention, featured a workshop at its 2001 confab entitled, 'Your Eyes Say Yes But the Law Says No', which included a speech by an S&M activist about laws affecting intergenerational sex. The convention also featured another workshop entitled Drag '101: How to Turn Kids in Make-up into Kings and Queens'."
Abel, Eugene et al, Self-Reported Sex Crimes of Nonincarcerated Pedophiliacs, 2 J. Interpersonal Violence 3, 5 (1987).
□ "Child molestation, by comparison, was a relatively infrequent crime, occurring from an average of 23.2 times by a pedophile (non-incest) with female targets to an average of 281.7 times by a pedophile (non-incest) whose targets were males." □ "homosexuals sexually molest young boys with an incidence that is five times greater than the molestation of girls."
Beitchman, J., Zucker, K., Hood, J., DaCosta, G., Akman, D. (1991) A review of the short-terms effects of child sexual abuse. Child Abuse & Neglect. 15:257-556.
□ "Among adolescents, commonly reported sequalae (of child sexual abuse) include sexual dissatisfaction, promiscuity, homosexuality, and an increased risk for re-victimization." (p. 537) □ "A review of studies reporting symptomology among sexually abused adolescents revealed evidence for the presence of depression, low self-esteem, and suicidal ideation." (p. 544)
Bell, A.P., Weinberg, M.S., Homosexualities: A Study of Diversity Among Men and Women (New York: Simon and Schuster, 1978), pp. 308, 9; see also Bell, Weinberg & Hammersmith, Sexual Preference (Bloomington: Indiana University Press, 1981).
☐ 45% of white male homosexuals had sex with 500 or more partners, with 28% having 1,000 or more sex partners.

 □ "This study involved interviews with 1,500 gay men and women." □ "25% of white gay men have had sex with boys 16 years old and younger."
Blanchard, Ray, et al., (2000). Fraternal Birth Order and Sexual Orientation in Pedophiles. Archives of Sexual Behavior. 20: 464, 471.
□ The best epidemiological evidence indicates that only 2 to 4% of men attracted to adults prefe men (ACSF Investigators, 1992; Billy et al., 1993; Fay et al., 1989; Johnson et al., 1992); in contrast, around 25 to 40% of men attracted to children prefer boys (Blanchard et al., 1999; Gebhard et al., 1965; Mohr et al., 1964). Thus, the rate of homosexual attraction is 6 to 20 times higher among pedophiles. □ Divided 260 pedophile participants into three groups: "152 heterosexual pedophiles (men with offenses or self-reported attractions involving girls only), 43 bisexual pedophiles (boys and girls) and 65 homosexual pedophiles (boys only)."
Bradford, J., et al., (1988). The Heterogeneity/Homogeneity of Pedophilia. Psychiatric Journal of the University of Ottawa. 13: 225.
☐ "According to the literature, findings of a two-to-one ratio of heterosexual to homosexual pedophiles have been documented."
Cameron, P. (1985). Homosexual Molestation of Children/Sexual Interaction of Teacher and Pupil. Psychological Reports. 57: 27-36.
Decrescenzo, Teresa. Helping Gay and Lesbian Youth: New Policies, New Program, New Practice (1994).
☐ GLASS's founder and former executive director, Teresa DeCrescenzo, edited a book that helps youth discover their homosexuality.
DeJong, A.R. Emmett, GA, Hervada, AR. Sexual abuse of Children. Sex-, race-, and age-dependent variations. Am J Dis Child. 1982 Feb; 136(2): 129-34.
 □ The 72 male victims (vs. 344 girls) were significantly younger (median, 7 years) and sustained more violence and trauma. Doll, L.S., Joy, D., Batholow, B., Harrison, J., Bolan, G., Douglas, J., Saltzman, L., Moss, P., Delgado, W. (1992) Self-reported childhood and adolescent sexual abuse among adult homosexual and bisexual men. Child Abuse & Neglect. 18:825-864.
□ 42% of a sample of 1,001 homosexual men reported childhood experiences that met the criteria for sexual abuse. □ 1,001 adult homosexual and bisexual men attending sexually transmitted disease clinics were interviewed regarding potentially abusive sexual contacts during childhood and adolescence. Thirty-seven percent of participants reported they had been encouraged or forced to have sexual contact before age 19 with an older or more powerful partner; Median age of the participant at first contact was 10; median age difference between partners was 11 years. Fifty-one percent involved use of force; 33% involved anal sex. 93% of participants reporting sexual contact with an older or more powerful partner were classified as sexually abused.

Erickson, W.D., et al., Behavior Patterns of Child Molesters, 17 Archives of Sexual Behavior 1, 83 (1988).

$\hfill\Box$ "Research confirms that homosexuals molest children at a rate vastly higher than heterosexuals"
Freund, et al. (1984, Fall) Pedophilia and Heterosexuality vs. Homosexuality. Journal of Sex and Marital Therapy. 10: (3) 197.
Freund, K., Watson, R.J. (1992, Spring). The Proportions of Heterosexual and Homosexual Pedophiles Among Sex Offenders Against Children: An Exploratory Study. Journal of Sex and Marital Therapy. 18: 91) 34-43.
□ "In a 1992 study published in the Journal of Sex and Marital Therapy, sex researchers K. Freud and R.I. Watson found that homosexual males are three times more likely than straight mento engage in pedophilia and that the average pedophile victimizes between 20 and 150 boys before being arrested." □ "The incident in Los Angeles involving group homes operated by the Gay and Lesbian Adolescent Social Services (GLASS) exemplifies this danger (of homosexual contact with minors). GLASS receives taxpayer monies to take in troubled youth referred to them by the social service departments of various southern counties in California." □ "The proportional prevalence of offenders against male children in this group of 457 offenders against children was 36 percent." See also, Kurt Freund, et al., "Heterosexuality, Homosexuality, and Erotic Age Preference." "Approximately one-third of these individuals had victimized boys and two-thirds had victimized girls. This finding is consistent with the proportions reported in two earlier studies," p. 107.
Geissinger, Steve. Scouts Remove 1,800 Scoutmasters for Suspected Abuse Over Two Decades, Assoc. Press, Oct. 14, 1993 (on file with author).
□ "This unprecedented glimpse into the world of Scout pedophiles revealed that thousands of boys had been molested by Scout leaders and other volunteers between 1971 and 1991 resulting in the expulsion of over 1,800 Scout volunteers for pedophile activity. The documents show that some Scout leaders molested over forty boys before getting caught and that many, once caught, simply moved to a different Scout troop and continued abusing boys."
Graupner, H., (1999). Love Versus Abuse: Crossgenerational Sexual Relations of Minors: A Gay Rights Issue? Journal of Homosexuality. 37: 23, 26.
☐ "Man/boy and woman/girl relations without doubt are same-sex relations and they do constitute an aspect of gay and lesbian life." Graupner argues that, as such, consensual sexual relations between adult homosexuals and youths as young as fourteen qualifies as a "gay rights issue".
Greenberg, D.M., Bradford, J.M.W., Curry, S. (1993). A Comparison of Sexual Victimization in the Childhoods of Pedophiles and Hebephiles. Journal of Forensic Sciences. 38 (2): 432-436.
☐ A total of 42% of pedophiles and 44% of hebephiles reported being sexually victimized in their own childhoods. Both groups appear to choose their age specific victims in accordance with the age of their own experience of sexual victimization.

Haverkos, H.W., et al., (1989, July 28). The Initiation of Male Homosexual Behavior. The Journal of the American Medical Association. 262: 501.

☐ A study of 279 homosexual/bisexual men. "More than half of both case and control patients reported a sexual act with a male by age 16 years, approximately 20 percent by age 10 years."
Jay, K., Young, A. The Gay Report: Lesbians and Gay Men Speak Out about Sexual Experiences and Lifestyles (New York: Summit Books, 1979) p. 275.
$\hfill\Box$ "73% of homosexuals surveyed had at some time had sex with boys sixteen to nineteen years of age or younger."
Marshall, W.L., Barbaree, H.E., Butt, J. (1998, March). Sexual offenders against male children: Sexual preferences. Behaviour Research and Therapy. 26 (5): 383-391.
$\ \square$ Child molesters responded with moderate sexual arousal (20-40% of full erection) to the nude males of all ages. Non-offenders showed no response to the male stimuli.
Parris, J., Zweig-Frank, H., Guzder, J. (1995) Psychological factors associated with homosexuality in males with borderline personality disorders. Journal of Personality Disorders. 9, 11: 56-61.
□ The rate of homosexuality in the BPD [Borderline Personality Disorder] sample was 16.7%, as compared with 1.7% in the non-BPD comparison group. The homosexual BPD group had a rate of overall Childhood Sexual Abuse rate of 100% as compared to 37.3% for the heterosexual BPD group. "It is interesting that 3 out of 10 homosexual borderline patients also reported father-son incest." (p. 59)
Savage, Lee. (March 1994). Must Men Who Love Boys Be Guilty of Sexual Misconduct? BLK Magazine, 7-11. Smith, J. (1988) Psychopathology, homosexuality, and homophobia. Journal of Homosexuality. 15, 1/2: 59-74
☐ "Pedophilia may be a cultural label rather than anything inherently medical or psychiatric; anthropological findings support this view." (p. 68)
Thorstad, D. (1990). Man/boy love and the American gay movement. Journal of Homosexuality. 20 (1-2) 251-274.
□ As the gay movement has retreated from its vision of sexual freedom for all in favor of integration into existing social and political structures, it has sought to marginalize cross-generational love as a "non-gay" issue. The two movements continue to overlap, amid signs of mutual support as well as tension. □ "Boy-lovers were involved in the gay movement from the beginning, and their presence was tolerated. Gay youth groups encouraged adults to attend their dances… There was a mood of tolerance, even joy at discovering the myriad of lifestyles within the gay and lesbian subculture."
Zebulon, A., et al., Sexual Partner Age Preferences of Homosexual and Heterosexual Men and Women. p 73.
☐ The study compared the sexual age preferences of heterosexual men, heterosexual women, homosexual men, and lesbians. Marked contrast to the other three categories, "all but 9 of the 48 homosexual men preferred the youngest two male age categories," which included males as young as age fifteen.

Promiscuity

Beitchman, J., Zucker, K., Hood, J., DaCosta, G., Akman, D. (1991) A review of the short-terms effects of child sexual abuse. Child Abuse & Neglect. 15:257-556.
□ "Among adolescents, commonly reported sequalae (of child sexual abuse) include sexual dissatisfaction, promiscuity, homosexuality, and an increased risk for re-victimization." (p. 537) □ "A review of studies reporting symptomology among sexually abused adolescents revealed evidence for the presence of depression, low self-esteem, and suicidal ideation." (p. 544)
Bell, A.P., Weinberg, M.S., Homosexualities: A Study of Diversity Among Men and Women (New York: Simon and Schuster, 1978), pp. 308, 9; see also Bell, Weinberg & Hammersmith, Sexual Preference (Bloomington: Indiana University Press, 1981).
\square 45% of white male homosexuals had sex with 500 or more partners, with 28% having 1,000 or
more sex partners. "This study involved interview with 1,500 gay men and women." "25% of white gay men have had sex with boys sixteen years and younger."
Fay, R.E., Turner, C.F., Klassen, A.D., Gagnon, J.H. (1989, January 20). Prevalence and Patterns of Same-Gender Sexual Contact Among Men. Science. 28: (4) 491-519.
Fethers, K., et al. (2000, July). Sexually Transmitted Infections and Risk Behaviors in Women Who Have Sex with Women. Sexually Transmitted Infections. p. 345.
☐ Women who have sexual relations with women are at significantly higher risk for certain sexually transmitted diseases: "BV (bacterial vaginosis), hepatitis C, and HIV risk behaviors in WSW as compared with controls."
Harry, J. (1989) Parental physical abuse and sexual orientation in males. Archives of Sexual Behavior. 18, 3:251-261.
☐ "These data suggest that some history of childhood femininity is almost always a precursor of adolescent homosexual behavior." (p. 259)
McWhirter, D., Mattison, A., The Male Couple, How Relationships Develop. (Englewood Cliffs, New Jersey: Prentice Hall, 1984).
□ 75% of homosexual men report their first homosexual experience to have been prior to age 16. □ Study of 156 males in homosexual relationships lasting from one to thirty-seven years only seven couples have a totally exclusive sexual relationship.
Male Homosexuality. Western Sexuality: Practice and Precept in Past and Present Times, edited by P. Aries and A. Bejin, pp. 40-61, cited by Joseph Nicolosi in Reproductive Therapy of male Homosexuality (Northvale, New Jersey: Jason Aronson Inc., 1991), pp. 124, 125.
$\hfill\Box$ "Few homosexual relationships last longer than two years, with many men reporting hundreds of lifetime partners."
Smith, T.W. (1991, May/June). Adult Sexual Behavior in 1989: Number of Partners, Frequency of Intercourse and Risk of AIDS. Family Planning Perspectives. 23: (3) 102-107 (Table 2, 104).

Van de Ven, P., Rodden, P., Crawford, J., Kippax, S. (1997). A comparative demographic and sexual profile of older homosexually active men. Journal of Sex Research. 34 (4): 349-360.		
□ Study of 2,585 homosexually active men in Australia showed that more men over 50 years old reported they had 101-500 lifetime partners than any other category involving numbers of sexual partners. Only 2.7% reported just one lifetime sexual partner.		
Violence		
Greenwood, G.L. et al. (2002, December). Battering Victimization Among a Probability-Based Sample of Men Who Have Sex With Men. American Journal of Public Health. 92 (12): 1964-1969.		
☐ Intimate partner battering victimization to be 39.2% among men who had sex with men during the last 5 years.		
Groth, A.N., Burgess, A.W. (1980, July). Male Rape: Offenders and Victims. American Journal of Psychiatry. 137 (7): 806-810.		
☐ This study analyzes 22 cases of male rape and the impact it had on the rapists and their male victims.		
Lie, G.Y., Gentlewarrier, S. (1991). Intimate Violence in Lesbian Relationships: Discussion of Survey Findings and Practice Implications. Journal of Social Service Research. 15: 41-59.		
☐ "Slightly more than half of the [lesbians] reported that they had been abused by a female lover/partner."		
Lockhart, L., et al. (1994, December). Letting out the Secret: Violence in Lesbian Relationships. Journal of Interpersonal Violence. 9: 469-492.		
□ 90% of the lesbians surveyed had been recipients of one or more acts of verbal aggression from their intimate partners during the year prior to this study, with 31% reporting one or more incidents of physical abuse.		
<u>Parenting</u>		
(February 26, 2002). European Court of Human Rights. Case of Frette v. France.		
☐ "Many of the European Union States did not allow single persons to apply for adoption, while others subjected the possibility to restrictive conditions because adoption by homosexuals, living alone or with a partner, gave rise to serious misgivings as to whether that was in the child's best interests."		
☐ "In the Court's opinion there is no doubt that the decisions to reject the applicant's application for authorization pursued a legitimate aim, namely to protect the health and rights of children who could be involved in an adoption procedure, for which the granting of authorization was, in principle, a prerequisite."		
Biblarz, Timothy J., Judith Stacey, (How) Does the Sexual Orientation of Parents Matter? 66 Am. Soc. Rev. 159-61.		

	□ "Describing themselves as 'personally oppos[ing] discrimination on the basis of sexual orientation', they challenge the predominant claim that sexual orientation of parents does not matter at all and agree 'that ideological pressures constrain intellectual development in this field."		
	□ "Stacey and Biblarz also noted 'at least 15 intriguing, statistically significant differences in gender behavior and preference among childrenin lesbian and heterosexual single-mother homes."		
	Cameron, P., Cameron, K., (1997) Did the APA Misrepresent the Scientific Literature to Courts in Support of Homosexual Custody? The Journal of Psychology. 131 (3): 313-332.		
	☐ Children of homosexuals are more likely to become homosexual than are children of traditionally married couples. Adding together various studies suggests that they are at least 3 times more apt to become homosexual than are children who are raised by traditional married couples.		
•	Dailey, Timothy J., Breaking the Ties That Bind: The APA's Assault of Fatherhood. Insight, Feb. 18, 2000, 12.		
	□ "Describing same-sex parenting research as 'compromised by methodological flaws and driven by political agendas instead of an objective search for truth." □ "Another study found that 'children of lesbians became active lesbians themselves [at] a rate which is at least four times the base rate of lesbianism in the adult female population." □ "Fidelity rates among committed homosexual couples also appear to be much less than that of heterosexual couples."		
Morgar	n, P. (2002). Children as trophies? North Melbourne, Victoria: News Weekly Books.		
	□ Considers 144 academic papers including 50 on same-sex parenting. "If public policy is based on clear research, there is no case for changing the adoption law to allow same-sex couples or unmarried couples to be able to adopt children."		
edited b Homos	, M. Male Homosexuality. Western Sexuality: Practice and Precept in Past and Present Times, by P. Aries and A. Bejin, pp. 40-61, cited by Joseph Nicolosi in Reproductive Therapy of male exuality (Northvale, New Jersey: Jason Aronson Inc., 1991), pp. 124, 125. — "Few homosexual relationships last longer than two years, with many men reporting hundreds of lifetimes partners."		
	kos, S. (1996). Children in three contexts: Family, education and social development. Children ia. 21 (3): 23.		
	Data from studies including children of married heterosexual couples, cohabiting heterosexual couples and homosexual couples, and examines the extent to which these children differ with regard to scholastic achievement and aspects of social development. It shows that in the majority of cases, the most successful are children of married couples, followed by children of cohabiting couples and finally by children of homosexual couples.		

Marriage

Contemporary Family Law §§ 2:37, 2:04, 2:12 & 4 Am. Jur. 2D. Annulment of Marriage §§27-33 (2000).

□ "State legislatures often make distinctions in the law, denying benefits to some while granting them to others. Marriage laws, for instance, not only require a couple to be of the opposite sex, but also impose age requirements, requirements of a mental and even physical capacity, and proscriptions against polygamy or polyandry."
(2001) Marriage Law Project, Major World Religions on the Question of Marriage at http://marriagelaw.cua.edu/religion.htm (last updated Jan. 2001).
☐ "In the U.S. 98.2% of those in the five major religions affirm marriage, while 1.7% support same-sex marriage. Worldwide, 99.9% affirm marriage, while .1% support same-sex marriage."
William C. Duncan (2001) Reaffirming Marriage: A Presidential Priority, 24 Harv. J.L. & Publ. Pol'y 623, 639.
□ "Similarly, if the courts allow same-sex marriages, what basis would there to be to prohibit polygamous or incestuous relationships? Or, to take it a step further, what basis would there be t prohibit marriage between man and animal? In truth, there would be none." □ "If one removes th[e] core concept [of marriage as the union of man and woman][I]nstead of a unique community, marriage becomes one more relationship. And why should this relationship be so special? If it has no necessary connection to children, or even to sex, what makes it different from an ordinary friendship? Friendships are multiple; why limit marriage to two persons? Sexual relationships can be multiple; why promote exclusivity? Relationships can come and go, and reasonably so; why promote permanence? If marriage is a freely chosen relationship unconnected to sex, children, exclusivity or permanence, why have legal marriage a all?"
Miller, Robyn Cheryl (2001) Marriage Between Persons of Same Sex, 81 A.L.R. 5th 1 (summarizing same-sex marriage cases decided to date).
☐ "In truth, every court that has addressed the issue has rejected the right to same-sex marriage under both the Equal Protection and Due Process Clauses of the Fourteenth Amendment."

Other

(1994, June 14). The Advocate. P. 16.

(April 2, 2002) Centers for Disease Control and Prevention HIV/AIDS Surveillance Reports, available at http://www.cdc.gov/hiv/pubs/facts.htm#Surveillance (last updated Apr. 12, 2002.)

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