Immoralism, Homosexual Unhealth, and Scripture

A Response to Peterson and Hedlund’s
“Heterosexism, Homosexual Health, and the Church”

Part II: Science: Causation and Psychopathology, Promiscuity, Pedophilia, and Sexually Transmitted Disease

by

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I. Introduction

This portion of my response to Peterson and Hedlund’s Critique of my work corresponds to their Part 1 on science, specifically pp. 1-6 where they concentrate their critique of my work. A general presentation of the results below is given in my Part 1.

II. The Association between Homosexuality and Psychopathology

Peterson and Hedlund charge without merit (under their heading “1. The inherent pathology of homosexuality,” p. 1 of Part 1 of their critique) that I made unethical use of two studies regarding the question of whether there is a pathology to homosexuality:

Professor Gagnon states that “there is something pathological about homosexual orientation itself”…. He asserts that two articles and an editorial in a 1999 issue of the Archives of General Psychiatry “support this conclusion” [p. 476]. In fact, the researchers in neither of these studies reported this conclusion. Both articles demonstrated that there is an increased risk of depression and suicidality in homosexuals compared to heterosexuals but contrary to Gagnon’s assertion, neither concluded that this was due to an intrinsic pathology.

In the discussion (not the conclusion) of both articles, the authors speculated about multiple possible causes (which included intrinsic pathology as well as the more likely role of societal hostility) but Gagnon formulated his conclusion quoting only one of the multiple theories of possible causes discussed in the articles and in the editorial. Both of the articles and the editorial made it clear that the methodology did not allow a conclusion to be derived about any cause of the observed differences. But despite this
Gagnon quoted both selectively and out of context from the discussion in order to state the unwarranted conclusion he desired (e.g., quoting a sentence without a following qualifying sentence which discounted its significance). This misrepresentation made homosexuals appear more defective than the studies reported. Therefore, we consider this methodology heterosexist.

Peterson and Hedlund have misrepresented what I wrote and, frankly, even lied about it.

A. What I carefully claim that two studies and a commentary say. Contrary to what Peterson and Hedlund claim, nowhere do I state that the authors of each of these studies concluded that there was an inherent psychopathology to homosexual practice that had nothing to do with societal resistance to homosexual practice. Instead, I cite some results in the study that are not indicative of a primary attribution to social opposition, such as the fact that “there does not appear to be a reduction in [depression and suicidality for homosexual persons] that one might expect given social change in recent years” (Herrell et al.) and the fact that “there was some evidence to suggest small tendencies for the GLB [gay, lesbian, and bisexual] group to have experienced more troubled childhoods” owing to parental separation and “higher exposures to parents with a history of criminal offense” (Fergusson et al.). Indeed, the article by Fergusson et al. twice, once at the beginning and once at the end, expresses reluctance to go with a “homophobia” explanation:

It has been argued that because of a series of social processes that center on homophobic attitudes, GLB youth are exposed to serious personal stresses that increase their likelihood of suicidal behavior. However, a reappraisal of these claims showed them not to be well founded in evidence. . . . Although such findings [as we have found in our study] are frequently interpreted as suggesting the role of homophobic attitudes and social prejudice in provoking mental health problems in GLB youth, alternative explanations are possible. These include. . . the possibility of “reverse causality” in which young people prone to psychiatric disorder are more prone to experience homosexual attraction or contact, and . . . the possibility that lifestyle choices made by GLB young people place them at greater risk of adverse life events and stresses that increase risks of mental health problems. (pp. 876, 880)

I then state quite explicitly:

Commentary in the same issue by J. Michael Bailey (of identical-twin-study fame and himself an advocate of gay rights) followed the two studies, in which Bailey concluded: “These studies contain arguably the best published data on the association between homosexuality and psychopathology.”

All of this is true. There is no deception of the reader here, though Peterson and Hedlund wrongly attempt to misrepresent it as such.

B. On quoting more than one theory. Peterson and Hedlund tell a falsehood when they charge: “Gagnon formulated his conclusion quoting only one of the multiple theories of possible causes discussed in the articles and in the editorial.” First, in the short paragraph immediately preceding my discussion of the two studies I state: “No one can pretend to know all the causes for the current health crisis and pinpoint the exact percentage of ‘blame’ on each cause.” When I discuss Bailey’s views on the two articles I write:
He noted that, although antihomosexual attitudes probably play a part in increased suicidality of homosexuals (“but this remains to be demonstrated,” he admits), other factors were likely to be involved: “developmental error” (there is “a possibility . . . that homosexuality represents a deviation from normal development . . . that may lead to mental illness”); the tendency of effeminate homosexuals to experience female-like types of “neuroticism”; and “lifestyle differences” associated with sexual orientation (especially “receptive anal sex and promiscuity” and the attendant fear of sexually transmitted diseases). [My footnote adds:] Bailey also cites the stress on “physical attractiveness and thinness” in the gay culture, which may explain why male homosexuals are “vastly overrepresented among male patients with eating disorders.”

Now how does this “quote only one of the multiple theories of possible causes”? Obviously I list all the possible causes suggested by Bailey. It was clear from the arguments that Bailey raised that Bailey thought that more than one of these causes was likely. He says as much in the conclusion of his commentary:

It is unlikely that any one of these models will explain all of the differences in psychopathology between homosexual and heterosexual people. Perhaps social ostracism causes gay men and lesbians to become depressed, but why would it cause gay men to have eating disorders? . . . [I]t would be a shame—most of all for gay men and lesbians whose mental health is at stake—if sociopolitical concerns prevented researchers from conscientious consideration of any reasonable hypothesis.

It is obvious what the last comment about “sociopolitical concerns” preventing “researchers from conscientious consideration of any reasonable hypothesis” is aimed at: undue pressures that researchers experience from homosexual advocacy groups not to conclude that there is something beyond societal “homophobia,” something related to homosexuality itself, that accounts for mental health problems among homosexual persons. Bailey’s comment is all the more remarkable in view of the fact that Bailey is generally an apologist for the homosexual cause.

That Bailey and Fergusson et al. were able to swim against the political tide in their field to suggest causes other than societal opposition is what is truly remarkable here. Now when I say that Bailey thought that “other factors were likely to be involved” besides anti-homosex attitudes in society, I am saying no more and no less than what Bailey himself said at the end of his commentary; namely, that “it is unlikely that any one of these models”—he specifically cites the social-ostracism model—“explain all of the differences in psychopathology between homosexual and heterosexual people.” How, then, am I misrepresenting Bailey’s views?

**C. Inherent deficiencies to homoerotic unions that increase risk for depression.**

Peterson and Hedlund even err when they claim that I say that the psychopathology of emotional problems is “inherent” or “intrinsic.” When I say that “two recent studies . . . support the conclusion that there is something pathological about homosexual orientation itself” I mean exactly what I spelled out in the immediately preceding paragraphs:

Higher rates of depression and suicide attempts are probably exacerbated by the inherent deficiencies of same-sex unions, and not just by societal opposition to such unions. These deficiencies include:
• an endemic dearth of long-term, monogamous relationships (further rejection by members of the same sex)
• an inability to procreate with one’s same-sex partner
• an obsessive centering on self that may occur when sexual intercourse can be obtained without having to learn how to relate to a sexual “other” and when erotic attraction is directed toward the very physique and traits that one shares in common with another
• the dismal association of same-sex intercourse with debilitating, sometimes terminal, sexually-transmitted diseases
• shame and guilt over one’s abnormal and unnatural sexual preference (a realization that stems from visible evidence of same-sex discomplementarity or the inability to relate properly to the opposite sex, not from “internalized homophobia”)

No one can pretend to know all the causes for the current health crisis and pinpoint the exact percentage of “blame” on each cause. Nevertheless, the bottom-line statistics speak for themselves. (The Bible and Homosexual Practice, 475-76)

Apart from sadomasochism, there are no sexual attractions (including polyamorous, incestuous, and even pedophilic) that produce scientifically measurable, intrinsic harm to all participants in all circumstances. Consequently, to require such a demonstration as regards homosexuality is unrealistic. Had Peterson and Hedlund read my work carefully—which I see no evidence of in any of their comments—they would have noticed that I spoke above of “higher rates . . . [being] exacerbated by the inherent deficiencies of same-sex unions.” The deficiencies are inherent: the problematic aspect of being sexually aroused by what one shares in common with another; a structural incapacity to procreate children from the union; and the excesses and gaps of each sex that are compounded in a homoerotic union, thereby making it more difficult to form a long-term and monogamous sexual union and to avoid both sexually transmitted diseases and emotional disorders. Whether or not individuals experience personal distress by these deficiencies is an entirely different question. Indeed, there are pathologies that are expressed in an inability to experience personal distress about one’s desires and behaviors, called “denial.”

D. High rates of mental illness persisting in very tolerant cultures. The really striking thing about the studies that I cited is the fact, acknowledged by Herrell et al., that “there does not appear to be a reduction in [depression and suicidality for homosexual persons] that one might expect given social change in recent years.” If societal opposition is the main culprit for a greater incidence of psychological problems among homosexual persons, then it stands to reason that as opposition to homosexual practice lessens significantly, the incidence of psychological problems should lessen significantly. But that is not what we find. It doesn’t matter to me whether Herrell et al. acknowledge this problem for a social-ostracism theory. Their own personal support for a homosexual agenda, or fear of a backlash in and out of the academy if they don’t tow the politically correct line, may inhibit a connecting of the dots (Fergusson et al. and Bailey are a bit more courageous or at least honest on this score).
Another, more recent study can be cited in connection with this point. A 2001 study of homosexual and heterosexual men and women in the Netherlands concluded that homosexual men were about three times more likely than heterosexual men to experience in the past year mood disorders (39%) and anxiety disorders (32%) and to have two or more DSM-III-R diagnoses (38%), while homosexual women were almost five times more likely than heterosexual women to experience substance abuse disorders (26%). Why are these findings significant? As the authors of the study note: “Compared with other Western countries, the Dutch social climate toward homosexuality has long been and remains considerably more tolerant” (T. Sandfort, et al., “Same-Sex Sexual Behavior and Psychiatric Disorders: Findings From the Netherlands Mental Health Survey and Incidence Study (NEMESIS),” *Archives of General Psychiatry* 58.1 [2001]: 85-91). Yet, despite this significantly greater tolerance, the wide disparities between homosexual and heterosexual persons remain. Bailey himself alludes to the Netherlands study (without explicit citation) as the reason for suggesting in his 2003 book that “societal stigma” as the primary cause for greater psychological problems among homosexual persons “might not be true” (*The Man Who Would Be Queen: The Science of Gender-Bending and Transsexualism* [Washington, D.C.: Joseph Henry Press, 2003], p. 82).

However, Peterson and Hedlund remain convinced, against the evidence, that the problem will be largely fixed if we just simply learn to embrace homosexual practice along the same lines that we embrace heterosexual practice.

**III. The Dearth of Lifelong, Monogamous Homosexual Relationships**

**A. Peterson and Hedlund’s carelessness in reconstructing my argument.** Peterson and Hedlund, under the heading “3. Sexual promiscuity” (pp. 2-5 of Part 1 of their critique) are so careless in representing my position that they begin by splicing material from my book where I suggest factors for “higher rates of depression and suicides attempts” (pp. 475-76) into a discussion of factors that I raise for “The Dearth of Lifelong, Monogamous Homosexual Relationships” (pp. 453-60). They also confusingly state that I “repeatedly characterize homosexuals as afflicted with a rampant sexual promiscuity due to ‘an endemic dearth of long-term monogamous relationship’” (p. 2, emphasis added; the quote is from p. 476 of my book). I do not characterize the disproportionately high rates of sex partners on the part of male homosexuals—a better description than “homosexuals as afflicted with a rampant sexual promiscuity”—as “due to” a dearth of long-term monogamous relationships (surely a tautological point!). Obviously the latter is a result, not a cause, of the former. As we shall see (and as pointed out in my book), the cause has to do with basic biological differences between men and women, here specifically the greater problem that men have with maintaining monogamy, a problem that is exacerbated in an all-male sexual union.

Their attempt to refute the research that I cite on pp. 453-60 boils down to two extraordinarily weak pieces of evidence.
B. Why their citation of Terry Stein doesn’t prove what they think it does. Peterson and Hedlund cite a paragraph by Terry Stein from Kaplan and Sadock’s Comprehensive Textbook of Psychiatry (eds. B. J. Sadock and V. A. Sadock; 7th ed.; Lippencott Williams & Wilkins, 2000), p. 1624 (Stein is the author of the entry on homosexuality):

The majority of gay men and lesbians report being in a committed romantic relationship with surveys indicating that 45 to 80% of lesbians and 40 to 60% of gay men are currently in such relationships. From 8 to 14% of lesbian couples and from 18 to 25% of gay male couples report that they have lived together for more than 10 years. In contrast to stereotypes of gay men and lesbians, they clearly form and maintain intimate same-sex relationships.

Now what does this paragraph tell us?

1. Let’s consider the source. Stein is a known homosexual activist for homosexual causes who has served as a Director of the AIDS Education Project at Michigan State University, Chair of the American Psychiatric Association’s Committee on Gay, Lesbian, and Bisexual Issues, Associate Editor of the Journal of Gay and Lesbian Psychotherapy, and President of the Association of Gay and Lesbian Psychiatrists. Could he have any biases and selectivity in his presentation and interpretation of data?

2. Note the problems with what the first sentence claims. The questionable statistics (what are the studies and how representative were the surveys?) show an extraordinarily high imprecision, “45 to 80% of lesbians” and “40 to 60% of gay men,” for what amounts to be nothing more than a self-reported claim to a “committed relationship,” whatever that means. There is no information provided in the citation as to whether the relationship is “open” to outside partners (a not uncommon phenomenon particularly among male homosexual unions). Nor is there any information about the rate of infidelity in non-open relationships.

For example, consider a 2003 study entitled “Relationship Innovation in Male Couples,” presented at the 2003 American Sociological Association conference by Dr. Barry Adam, a professor of sociology at the University of Windsor and homosexual activist. Adam interviewed 70 homosexual men in Ontario who were part of 60 couples and found that only 25% reported being monogamous; and most of the latter were in a relationship of less than three years duration (note that being in a relationship of at least a year was a qualification for being in the study). According to Adams, “One of the reasons I think younger men tend to start with the vision of monogamy is because they are coming with a heterosexual script in their head and are applying it to relationships with men. What they don’t see is that the gay community has their own order and own ways that seem to work better” (http://www.washblade.com/2003/8-22/news/national/nonmonog.cfm).

3. Furthermore, Stein’s very next sentence undermines any assumption that these relationships are, as a rule, long-term, let alone lifelong. Stein states, in effect, that nine out of ten lesbians and eight out of ten homosexual men have been unable to achieve even a ten-year relationship, let alone a twenty, thirty, forty, or fifty-year sexually intimate relationship.
4. In the final sentence of the quote Stein adds: “They (viz., homosexual persons) clearly form and maintain intimate same-sex relationships.” But whoever questioned whether homosexual persons were able to do that? Certainly not I. What we don’t see here is any evidence that long-term (to say nothing of twenty years, and forget lifetime) and monogamous homosexual unions are anything but an exception to a consistent rule.

C. Their failed attempt at refuting the research cited in my book. The second attempt by Peterson and Hedlund to refute the research that I cite on pp. 453-60 about “the dearth of lifelong, monogamous relationships” has to do with the research that I cite regarding the high numbers of sex partners for homosexual males. They claim that these cited studies “are either out-dated (pre-1973), have small samples, are from studies of patients with AIDS, are from the gay Advocate magazine, or are from some of the most sexually promiscuous population centers in the world.”

There are serious distortions of the data in this statement.

1. Peterson and Hedlund selectively omit mention of the fact that I cite a 1997 study of 2,583 homosexually active men in Australia who are 50 years or older, produced by researchers from Macquarie University (discussed on p. 455 of my book). Only 15% of the men reported having fewer than eleven sex partners to date, while on the other end of the spectrum 15% had over 1000 sex partners. A whopping 82% had over 50 partners and nearly 50% had over 100.

2. The 1992 National Health and Social Life Survey (discussed on pp. 453-54 of my book) conducted mostly by researchers from the University of Chicago (Laumann et al.) had a relatively small sample size of homosexual men but at least it was a random sample and not just a survey of “the most sexually promiscuous population centers in the world.” It indicated that over a five year period homosexual men had 4-5 times the number of sex partners that heterosexual men had.

3. A 1994 Dutch study of 156 “close-coupled” male homosexual relationships found that by the sixth year of the relationship the number of outside sex partners averaged eleven (discussed on p. 456 of my book). Two 1984 American studies that I cite also found that non-monogamous behavior was the norm for nine out of ten homosexual couples.

4. Peterson and Hedlund debunk mention of The Advocate surveys (pp. 455-56) even though these surveys report slightly better figures than the other studies I cite. If anything, the results of these surveys were skewed in favor of, not to the detriment of, a homosexual agenda. The reason why is evident. Here homosexual readers with an obvious vested interest in putting the best face on homosexual practices self-select. They know to what political ends the surveys will be used. Moreover, The Advocate is the largest homosexual magazine in America. It reaches the homosexual “mainstream” and not just the gay bar scene. Despite these factors, the surveys report that nearly 60% of the male homosexual respondents, whose average age was a mere 38 years old, had already had thirty or more sex partners. In the past year alone, two-thirds had more than one sex
partner and the large majority of these had *five or more*. About *half* had engaged in three-way sex in the last five years, a quarter group sex (four or more). Also interesting here is that lesbian respondents come off looking much better than their male counterparts as regards number of sex partners (though worse as regards the longevity of the relationship).

In fact, Peterson and Hedlund conveniently fail to mention that all the studies mentioned in my book that report on both male and female homosexual behavior, from the Bell and Weinberg study of the San Francisco Bay area in 1970 to studies in the 1990s, indicate that lesbian women do far better than homosexual males in keeping down the numbers of sex partners (with rates approximating those of heterosexual males, not heterosexual females). It is hard to attribute this primarily to societal “homophobia” since both male and female homosexuals face societal opposition.

**D. Fundamental biological differences between male and female sexuality.** Peterson and Hedlund refuse to acknowledge the obvious; namely, that male sexuality is far more given to non-monogamous behavior than female sexuality. This is a cross-cultural phenomenon. A recent study of over 16,000 persons around the globe, first world and third world, industrial and tribal societies, concluded that, on average, men want more sex partners than women do and are far more willing to have sex with persons whom they have known for only a short time. Cf. David P. Schmitt et al., “Universal sex differences in the desire for sexual variety: Tests from 52 nations, 6 continents, and 13 islands,” *Journal of Personality and Social Psychology* 85 (2003): 85-104. It is studies like this one that rightly generate the wry observation, “What would we do without experts?” Of course, men and women are significantly different as regards sexual arousal patterns. Of course, when two men are paired in a sexual relationship they typically act like men—without a restraining female influence. Women on average manufacture only about one-seventh the amount of the sex-hormone testosterone each day that men do. It doesn’t take a scientist to figure out what kind of effect that is going to have on male sexuality. Male sexuality is simply more given to visual stimulation and genital focus than is female sexuality, which partly explains why pornography is such a booming industry among males but much less so among females.

Evolutionary psychologists have replicated studies over and over again that demonstrate that men are far more inclined to consider having sex with persons that they know only marginally well than are women. See: David M. Buss, *The Evolution of Desire: Strategies of Human Mating* (New York: Basic Books, 1994); and, for a textbook, Linda Mealey, *Sex Differences: Development and Evolutionary Strategies* (San Diego: Academic Press, 2000). For example, Mealy summarizes sex differences in mating strategies across species, noting that “males are typically more sexually available than females,” “males are typically more easily aroused than females,” and “males are typically more likely to seek multiple sexual partners than are females.” In *The Bible and Homosexual Practice* (p. 460) I have a long footnote on Donald Symons’ *The Evolution of Human Sexuality* (Oxford University Press, 1979). Symons argues that homosexual males do not exhibit different tendencies in sexual behavior than heterosexual males. The problem, rather, is that male homosexual relationships simply lack the restraints imposed
by female partnership (pp. 292-300). Putting two males together in a sexual union is not a recipe for lifelong, or even long-term, monogamy.

One could cite further research but it suffices to cite the conclusions of J. Michael Bailey (cited above), at the time chair of the department of psychology at Northwestern University, in his chapter on “Gay Masculinity” in *The Man Who Would Be Queen*:

Because of fundamental differences between men and women, the social organization of gay men’s sexuality will always look quite different from that of heterosexual men’s. Regardless of marital laws and policies, there will always be fewer gay men who are romantically attached. Gay men will always have many more sex partners than straight people do. Those who are attached will be less sexually monogamous. And although some gay male relationships will be for life, these will be many fewer than among heterosexual couples. . . . I suspect that regardless of the progress of gay rights, gay men will continue to pursue happiness in ways that differ markedly from the ways that most straight people do. This will be true even as society becomes increasingly tolerant of them. Both heterosexual and homosexual people will need to be open minded about social practices common to people of other orientations. (pp. 101-102).

Do Peterson and Hedlund get the point? It is not primarily because of societal “homophobia” that homosexual males average such high numbers of sex partners. Rather the evidence suggests that the prime culprit can be traced to “fundamental differences between men and women.” Bailey tries to assure his readers that this development of high numbers of sex partners among homosexual males is not so bad because, in part, “men feel much less psychic conflict than women about casual sex.” The more the male homosexual life is normalized, the more society will have to accommodate to homosexual lifestyle differences, which in turn will further erode heterosexual standards of monogamy and permanence. As Bailey himself notes, society will need to become more “open minded” about typical male homosexual practices.

It is clear here, then, that Peterson and Hedlund are really not interested in hearing the truth about male homosexuality. They are quite willing to deny, or overlook, basic biological differences between men and women in order to achieve an ideological end by any means necessary. Could they not be expected to read carefully the following statement in my book, if only to get their facts straight about my position:

One could argue, I suppose, that the inability of male homosexuals in particular to form enduring monogamous unions is due to society’s ongoing disapproval of homosexual relationships and to the denial of a right to civil marriage. Undoubtedly, some portion of the imbalance can be attributed to such things. Yet the ratios are so disproportionate that two other significant factors must be involved. One is the obvious fact that homosexual unions do not produce children (though adoption is increasingly becoming an option) and children (especially one's own biological children) can be a stabilizing factor in a relationship. However, this factor, like society's disapproval, does not explain why lesbians have far fewer sexual partners on average than homosexual men (though still higher than their heterosexual female counterparts). The most important factor probably has to do with the nature of male sexuality. As a general rule, men who are left to their own devices are incapable of forming enduring monogamous relationships. Men need to be “civilized” and “domesticated” into such unions by women. In general, because men are for the most part sexually stimulated by sight (rather than by a caring relationship, as with women), men are more easily aroused, more often aroused, and hence more likely to
succumb to that arousal. For the same reason, men are more likely to cheat on their wives than the reverse. In short, to put two males together in an erotic relationship is not exactly a recipe for long-term fidelity. Exceptions to the rule will always exist but the consistent pattern confirms the divine wisdom of prohibiting homoeroticism. (*The Bible and Homosexual Practice*, 459-60)

As noted above, Bailey would make a similar observation of couple of years later in *The Man Who Would Be Queen*, minus of course the negative assessment of this reality about the nature of male sexuality. His chapter on “Gay Masculinity” contends that homosexual males, as regards sexual stimulation patterns, remain very much . . . well, male. Like heterosexual men and in contrast to women generally, homosexual men show a greater interest in casual sex, manifest a higher response to visual sexual stimuli (hence, more likely to seek out pornography), invest greater significance in a prospective partner’s physical attractiveness, show a stronger preference for younger partners, and are less driven to have and raise children. Pair a man with another man and what do you get? Very little of the balancing effect that comes from pairing a man with a woman.

**E. Respectable male homosexual opposition to monogamy.** Even respectable male homosexual activists have long been making the point that the principle of monogamy is too stifling. For example, Andrew Sullivan, a senior editor at *The New Republic* and a well-known columnist (and a homosexual man), wrote in his book *Virtually Normal: An Argument about Homosexuality* (Random House, 1996):

> There is more likely to be greater understanding of the need for extramarital outlets between two men than between a man and a woman; and again, the lack of children gives gay couples greater freedom. . . . Marriage should be made available to everyone. . . . But within this model, there is plenty of scope for cultural difference. There is something baleful about the attempt of some gay conservatives to educate homosexuals and lesbians into an uncritical acceptance of a stifling model of heterosexual normality. (pp. 200-204)

Similarly, Marvin Ellison, professor of Christian ethics at Bangor Theological Seminary and an ordained minister in the Presbyterian Church (USA) (and homosexual man), calls for a “broader debate” on the subject of multiple partners in his recent book *Same-Sex Marriage? A Christian Ethical Analysis* (Pilgrim Press, 2004):

> Should marriage, as the legal sanctioning of an intimate sexual affiliation, be limited to two and only two persons . . . ? Should religious communities bless multiple coexisting sexual partnerships? Surely one concern with polyamorous affiliations is exploitation, or what feminist critics of polygamy have called an “excess of patriarchy.” But how exactly does the number of partners affect the moral quality of the relationship? This question requires a serious answer. Could it be that limiting intimate partnerships to only two people at a time is no guarantee of avoiding exploitation, and expanding them to include more than two parties is no guarantee that the relationship will be exploitative? (p. 155)

He also asks, “How might it be possible to break with compulsory monogamy and make marriage genuinely elective, as a vocation (or calling) for some but not all?” (p. 154).

Ellison is, incidentally, a member of the The Gay Men’s Issues in Religion Group in the American Academy of Religion. (For the uninitiated, the American Academy of Religion is the U.S. umbrella organization for professors of religion—church historians,
theologians, ethicists, and scholars in world religions.) This group adopted as a theme for one of their two sessions at the 2003 Annual Meeting of the AAR “Love Is a Many Splendored Thing: Varied Views on Polyamory.” Essentially this was an advocacy session for polyamory, even going so far as to use the Trinity as a model for such. Not that this Group is monolithic in its concerns. The theme for one of their two sessions in the following year’s national meeting was “Power and Submission, Pain and Pleasure: The Religious Dynamics of Sadomasochism.” One paper, for example, advocated that “sadomasochistic homoerotic desire is part of what makes the spectacle of the crucifixion attractive and desirable.” For a fuller description go to http://www.robgagnon.net/AARGayMen'sGroup.htm.

Consider, too, these words by L. William Countryman, professor of New Testament at The Church Divinity School of the Pacific (an Episcopal seminary of the Graduate Theological Union in Berkeley, Calif.) and homosexual man, in his book Dirt, Greed, and Sex: Sexual Ethics in the New Testament and Their Implications for Today (Fortress Press, 1988): “The gospel allows no rule against the following, in and of themselves: . . . bestiality, polygamy, homosexual acts,” or pornography. As regards such matters we are not free to “impose our codes on others” (pp. 243-45). With respect to incest, Countryman conveniently avoids the subject of incest between adults. Although he seems finally to draw a line against adult-child incest, Countryman is the only biblical scholar that I know who argues that society’s “taboo” against adult-child incest is too high (pp. 257-58). Countryman was also one of the featured speakers at a conference of homosexual activists on Apr. 10-13, 1997 at All Saints Episcopal Church in Pasadena, California, called “Beyond Inclusion.” In response to a question about how the church should respond to nonmonogamous homosexual relationships, Countryman said: “I would be distressed if the drive toward blessing gay unions merely applied Reformation understandings of heterosexual unions to gay unions.”

The Metropolitan Community Churches bill themselves as “a worldwide fellowship of Christian churches with a special outreach to the world’s gay, lesbian, bisexual and transgender communities” and “the world’s largest gay and lesbian spirituality organization.” Their 2005 General Conference in Calgary (Alberta, Canada, July 21-26) included the following presentations or workshops:

**Building Closets or Opening Doors (Polyamory),** Hyatt: Imperial Ballroom 3, Fran Mayes. Have we who know the freedom of coming out to live without fear or shame created our own MCC closets? The stories of some of us who love and/or partner with more than one other person will be presented as told to me for my dissertation “Polyamory and Holy Union in UFMCC”. Chosen families in light of the Bible, a theology of sexuality, history, and worldwide practice.

**Our Gay Gaze: Using Your Eyes in Whole New Ways to Get What You Want,** Hyatt: Imperial Ballroom 7, Dave Nimmons. From glances to gaydar, lingering stares to winks, gay men have made eye contact an art form, with its own power, language, rituals, and conventions. . . . Whether you’re cruising for sex, intimacy, or spirit, this experiential, intimate session will open your eyes about how to use your gaze to get what you most need. You won’t ever see gay men the same way again.
Requiem for a Bitchy Queen: An inquiry to a new ethical archetype. Hyatt: Imperial Ballroom 8, Dave Nimmons. The tart-tongued, trash-talkin’ Bitchy Queen, equal parts camp and competition, is as much a part of gay male socializing as brunch. . . . An intimate, provocative, personal encounter with the she-bitch within. Funeral attire optional.

Now when I indicate that normalizing homosexual practice is ultimately going to erode the monogamy principle and other sexual standards Peterson and Hedlund accuse me of inciting others to violence against homosexual persons. And yet here are highly respected persons and groups within the homosexual communities espousing exactly such things. The gamble of Peterson and Hedlund and others is that by making homosexual unions acceptable they can curtail and largely eliminate its “excesses.” It seems to me more likely that the opposite will occur.

F. The structural link between monogamy and binary sexual differentiation. Peterson and Hedlund shouldn’t be surprised that a monogamy principle is threatened by societal affirmation of homosexual unions. For this principle of restricting a sexual relationship to two persons at a time is predicated on a structural consideration of human physical makeup that Peterson and Hedlund want us to ignore: the twoness or binary character of the sexes. Because there are essentially two and only two sexes, the presence of a male and female in a sexual relationship is both necessary and sufficient for reconstituting a sexual whole, so far as the number of persons in the union is concerned. A third party is neither needed nor desirable. Jesus recognized the significance of sexual duality for marital monogamy and indissolubility when he cited Genesis 1:27 and 2:24 back-to-back as normative and prescriptive for human sexual behavior: “For this reason,” namely, because God “made them male and female,” “a man . . . will be joined to his woman/wife and the two will become one flesh.” He implicitly extended the logic of the twoness of the sexes that had always been incumbent on women (polyandry was unknown) to men as well, closing a loophole that Moses had granted due to human (chiefly male) “hardness of heart” for sexual relationships involving more than two persons. And he did so by appeal to “the beginning of creation” (Mark 10:5-8 par. Matt 19:4-5, 8). A society that maintains an other-sex sexual prerequisite may overlook or ignore the implications of two sexes for multiple-partner unions, as did ancient Israel and nineteenth-century Mormonism. However, it is difficult to see how a society can long maintain a strong monogamy standard apart from grasping its implications. This is particularly the case as regards modern Western society where patrilineal concerns have receded in significance.

If society repeals a male-female prerequisite, there no longer remains any logical or nature-based reason for society to withhold approval from multiple-partner sexual unions, whether fashioned in the mold of traditional polygyny or in a form characterized by greater egalitarianism and/or bisexuality. The major counterarguments to this assertion do not hold up. For instance, if someone argues that a person can truly love only one other person at a time, another can counter that parents have no difficulty loving all their children equally intensely and fully. Why should being in a sexual union with two or more persons be any different, especially since advocates of homosexual unions make their case from claims to love and commitment and resist any restrictions on what they perceive to be nonexploitative sexual behavior? If someone contends that multiple-
partner unions are not a necessity of sexual life in the way that same-sex partnerships are for homosexually oriented persons, another can respond that there are surely at least as many people (especially men) who experience dissatisfaction with monogamy that is as intense, and as “hard-wired,” as any dissatisfaction with other-sex partners experienced by homosexual persons. Finally, if someone makes the point that multiple-partner unions are less stable configurations than monogamous unions, another could retort that homosexual unions on the whole have shown themselves to be even less stable and characterized by more partners lifetime than traditional polygamous arrangements. In the end, only an insistence on the male-female dimension of sexuality enables a consistent stance against various “plural” unions.

The existence of “intersexed” (hermaphroditic) persons does not significantly undermine the binary model of sexual relations, since the former phenomenon involves overlapping features of the two existing sexes, not distinct features of a third sex. Moreover, extreme sexual ambiguity is very rare, encompassing only a tiny fraction of 1% of the general population. Usually an allegedly intersexed person has a genital abnormality that does not significantly straddle the sexes; for example, females with a large clitoris or small vagina, or males with a small penis or one that does not allow a direct urinary stream. The category of the “intersexed” no more justifies an elimination of a binary model for human sexuality than some fuzziness around the edges of defining “close blood relations” and “children” justifies the elimination of standards against incest and pedophilia. Of course, too, homosexual persons who seek to discard a binary model for sexual relations do not claim, for the most part, to be other than male or female. Thus they, at least, remain logically and naturally bound to a binary model for mate selection.

### G. The problem with female homosexuality

We have seen some of the evidence for a disproportionately high rate of non-monogamous behavior in male homosexual activity. What about female homosexuality? Are there any special problems associated with lesbian relationships? While homosexual females, for their part, do not experience anything near the number of sex partners lifetime or rate of sexually transmitted disease averaged by homosexual males, they are not without their own special problems. Studies to date suggest that female homosexual unions are of even shorter-term duration than male homosexual unions. For example, a 2004 study of divorce rates for same-sex registered partnerships in Sweden from 1995 to 2002 indicates that female homosexual couples were twice as likely to divorce as male homosexual couples (see also the discussion in the Institute for Marriage and Public Policy). Even the quote that Peterson and Hedlund give from Stein, cited above in III.B., indicates that lesbian unions are twice as likely to dissolve before reaching the ten-year mark as even male homosexual unions.

Moreover, relative to both heterosexual females and homosexual males, homosexual females experience a higher level of some psychiatric disorders such as major depression and substance abuse. Stanton Jones and Mark Yarhouse compare the “National Lesbian Care Survey” by J. Bradford et al. (Journal of Consulting and Clinical Psychology 62 [1994]: 228-42) and the work of L. Robins et al. (Psychiatric Disorders in America [Free Press, 1991]) to show that lesbian women show a threefold increase in the incidence of serious personal distress as compared to heterosexual women (Homosexuality: The Use
How do we explain these two special problems associated with lesbian relationships, shorter-term relationships and higher levels of mood disorders such as major depression? An explanation that takes into consideration basic biological/psychological differences between men and women probably provides the answer—consistent with the fact noted above that mood disorders and anxiety disorders are also twice as high among heterosexual women as among heterosexual men. On average women tend to expect significantly more of a sexually intimate relationship than do men in terms of communication and relational responsibilities (does anyone not know this?) and thus place greater demands on a partner to meet personal needs. John Gray has made a bundle of money on this common recognition of a male-female difference in his aptly titled book, *Men Are from Mars, Women Are from Venus: A Practical Guide for Improving Communication and Getting What You Want in Your Relationships* (San Francisco: HarperCollins, 1993). To have two women with this higher needs index in a sexual relationship puts additional strains on the relationship, which probably contributes markedly to more problems and breakups that then impact mental health.

**H. Conclusion.** The different problems experienced by male homosexual unions and female homosexual unions provide ample testimony of the significance of male-female differences and hence of the healthy balancing effect of a male-female pairing on the excesses of each sex. In a sexual bond between persons of the same sex the extremes of one’s sex are not moderated and gaps are not filled. It is this reality that contributes in a significant way to the disproportionately high rate of problems associated with homosexual practice, at significantly different rates for male homosexual relationships and female homosexual relationships. Only those who choose to be blind to sexual realities can deny this obvious point.

**I. The demagoguery of the left.** Instead of acknowledging the obvious, Peterson and Hedlund take a page from a demagogic piece by David Balch of Brite Divinity School and accuse me of language that inflames people to violence against homosexual persons (pp. 4-5). I have already responded at length to Balch’s ludicrous claims at my website (go to [http://www.robgagnon.net/articles/homoBalchFalseWitness.pdf/](http://www.robgagnon.net/articles/homoBalchFalseWitness.pdf/)). Balch draws together a pastiche of quotations out of context from various parts of a 500-page book and utterly ignores the numerous exhortations made in the book to loving homosexual persons and not responding in hate. For example: the reference to “depraved sexuality” on p. 244 is an accepted translation of the term *koitai* in Rom 13:13, a rubric that for Paul clearly included homosexual practice (cf. Rom 1:24-27; *arsenokoitai*, “men who lie with males,” in 1 Cor 6:9). References to “self-debasing conduct” on p. 263 and to “self-degradation” and Paul’s “visceral response” on p. 269 are, in context, precise characterizations of Paul’s own description of homosexual practice in Romans 1:24-27 as stimulated by self-
“dishonoring” or self-“degrading” desires and as “indecent conduct.” The reference to “heinous” is on p. 311 where I note that for Philo of Alexandria, as undoubtedly for Paul, “the first and most heinous stage of feminization [of the passive male sexual partner] occurred in the act of sexual penetration.” This too is true. Have Peterson and Hedlund ever read Philo? Do they want to make the absurd argument that Philo did not regard such behavior as heinous? The reference to “particularly revolting sin” again occurs in a statement that refers to Paul’s views on the matter: “It seems clear that Paul regarded homoerotic actions as particularly revolting sin that should be avoided.” This is obviously an accurate interpretation of Paul’s remarks in Romans 1:24-27. The comparisons with incest, adultery, and even bestiality are all made both in Scripture and in early Jewish literature (as I noted, bestiality is considered worse even than same-sex intercourse). Does Balch, or Peterson and Hedlund, want to argue that the historical facts are otherwise? And, again, my exhortations to love and not to hate are repeated throughout the book but are conveniently ignored by these critics in order to present a slanderous portrait that serves their ideological agenda. The ends apparently justify the means for such critics. For example (boldface added):

I deplore attempts to demean the humanity of homosexuals. . . . The person beset with homosexual temptation should evoke our concern, sympathy, help, and understanding, not our scorn or enmity. Even more, such a person should kindle a feeling of solidarity in the hearts of all Christians, since we all struggle to properly manage our erotic passions. . . . Thus a reasoned denunciation of homosexual behavior . . . is not, and should not be construed as, a denunciation of those victimized by homosexual urges, since the aim is to rescue the true self created in God’s image for a full life. (pp. 31-32)

[As the parable of the Good Samaritan in Luke 10:28-35 indicates] Christians should treat the homosexual as a friend to be converted over to the path of life, not as an enemy to be consigned to the path of death. . . . The church can and should recapture Jesus’ zeal for all the “lost” and “sick” of society, including those engaged in homosexual practice. Concretely, this means visiting their homes, eating with them, speaking and acting out of love rather than hate, communicating the good news about God’s rule, throwing a party when they repent and return home, and then reintegrating them fully into communities of faith. (pp. 227-28)

Far from being an unloving act, a sensitive refusal to condone homosexual conduct is the responsible and loving thing to do. . . . To simply assert that God loves us and forgives us as we are, without holding out the necessity and hope of a life conformed to the will of God, is to deny “God’s power to do for us what we cannot do for ourselves. . . .” The church must not shirk its duty to effect the costly work of reconciliation that liberates persons from bondage to a sinful self. . . . The church should reject the notion that the only alternatives are to affirm homosexual behavior or to hate and harass homosexuals. Rather, the church must affirm a third option: to love the homosexual by humbly providing the needed support, comfort, and guidance to encourage the homosexual not to surrender to homosexual passions. (pp. 484-85)

With regard to church, practicing, self-affirming homosexuals should be treated as any other persons engaged in persistent, unrepentant acts of immoral sexual behavior. They should be loved and ministered to; the church of God must struggle along with them and share in the groanings of the Spirit. They should also be called to a higher standard of behavior. . . . The final word on the subject of homosexuality is and should always be: love God and love the homosexual “neighbor.” The homosexual
and lesbian are not the church’s enemy but people in need of the church’s support for restoring to wholeness their broken sexuality through compassion, prayer, humility, and groaning together for the redemption of our bodies. . . . To denounce same-sex intercourse and then stop short of actively and sacrificially reaching out in love and concern to homosexuals is to have as truncated a gospel as those who mistake God’s love for “accepting people as they are” and who avoid talk of the gospel’s transformative power. It is to forget the costly and self-sacrifician work of God in our own lives, past and ongoing.

The policy stances that the church must take toward same-sex intercourse do not diminish the believer’s call to love the individual homosexual. Indeed, a keener understanding of the theological, social, and physical consequences of same-sex intercourse can potentially perform the salutary task of helping our “love abound still more and more in knowledge. . . (Phil 1:9-11). An ill-informed love can be just as destructive as hatred. It is not enough to want to love. . . . At the same time, it is not enough to know what is right. Knowledge can “puff up” or “inflate” the ego. It can become a weapon for exalting oneself over others in a smug attitude of moral superiority. It can turn into a tool for “depersonalizing” others. Love must be wedded with knowledge, faith must express itself in love. . . .

This book has been aimed at showing that affirming same-sex intercourse is not an act of love, however well meaning the intent. That road leads to death: physically, morally, and spiritually. Promoting the homosexual “rights” agenda is an awful and harmful waste of the church’s energies and resources. What does constitute an act of love is befriending the homosexual while withholding approval of homosexual behavior, working in the true interests of the homosexual despite one’s personal repugnance for same-sex intercourse, pursuing in love the homosexual while bearing the abuse that will inevitably come with opposing homosexual practice. It is the harder road to travel. It is too hard for many people to live within that holy tension. Yet it is the road that leads to life and true reconciliation; it is the calling of the church in the world. (pp. 489-93)

Accordingly Peterson and Hedlund, like Balch, commend violence against promiscuous persons, adulterous persons, and incestuous persons. Rather than speak out against violence to such persons, they merely try to disassociate homosexual males from such groups. Or perhaps Balch, Peterson, and Hedlund think that no forms of behavior should any longer be considered really sinful, because to do so would inspire violence against persons who commit such behavior. My book repeats over and over again the importance of showing compassion to persons engaged in homosexual behavior, just as we should show compassion to any persons engaged in any form of sinful behavior, sexual or otherwise. In this I try to take the approach of Jesus who, for example, in the case of the adulterous woman forgave her but also urged her to “go and sin no longer” lest (by inference) “something worse befall you,” i.e., the eternal judgment of God (compare John 8:11 with 5:14). Only persons such as Peterson, Hedlund, and Balch, persons determined to misrepresent my work to others, could ignore this important facet of my argument. In other words, their misrepresentation appears to be willful and deliberate. Lacking the capacity to mount substantive arguments, they resort to malicious ad hominem attacks.

IV. The Problem of Pedophilia

Peterson and Hedlund claim that I misrepresent the evidence as regards the disproportionate rates of homosexual pedophilia (“The problem of pedophilia,” pp. 1-2).
Unfortunately, they do not bother to refute the evidence that I put forward. Instead, Peterson and Hedlund repeatedly talk past the evidence that I provide. (Note: Consistent with European usage and some American usage I used the term pedophilia to refer to sex between adults on the one hand and prepubescent and/or adolescent children on the other.)

A. Cautions. At the outset, let me make clear that I do not argue that the majority of homosexual persons are pedophiles or promote publicly the acceptance of pedophilia. Rather, as I say in my first book:

A second negative effect of societal endorsement of homosexuality has to do with the problem of pedophilia and its role in “recruiting” homosexuals into the fold. There can be little doubt that affirmation of a same-sex lifestyle will increase the incidence of pedophilic activity, regardless of society's attempt to distinguish the two. The greater the latitude given to sexual expression, the more likelihood there will be of people crossing the line into illicit conduct. Indeed, a substantial body of literature emanating from the homosexual community entertains the morality of adult-adolescent sex. The gay community as a whole has not vigorously and swiftly rejected this development. Indeed, homosexual groups in other countries have been at the forefront of efforts to lower the age for sexual consent.

Although the majority of homosexuals are not pedophiles and do not publicly promote pedophilia, the incidence of same-sex pedophilic behavior is disproportionately high. . . .

I also doubt that lowering barriers to pedophilia constitutes the most important negative side-effect associated with the endorsement of homosexual practice (although I could be wrong in thinking this). Note, as just one example, my remark on p. 480: “A third negative effect arising from affirmation of homosexuality, perhaps far more dangerous than that of pedophilia, is greater permissiveness as regards sexual promiscuity.” Nevertheless, the ramifications of homosexual endorsement for the issue of pedophilia are a significant problem and need to be mentioned. I give it significantly more attention in this article not because it is significantly more important than other concerns addressed herein but rather because I give it so little attention in my book (half a page each on pp. 479-80) that there is now a need for more documentation of my points.

B. Pro-pedophilic literature coming from homosexual circles. As the block quotation above states, a significant body of literature coming from homosexual and bisexual activists entertains the morality of adult-adolescent or even adult-prepubescent sex. One can start as early as Alfred Kinsey, a known bi-/homosexual sex researcher in the 1940s and 1950s who worked vigorously to present homosexuality to society as a normal and acceptable variant of human sexuality. As Dr. Judith Reisman puts it in her heavily documented critique of Kinsey’s work, Kinsey, Crime and Consequences (go to http://www.drjudithreisman.com/chapter7.pdf for an online copy of ch. 7), Kinsey’s

Sexual Behavior in the Human Male included 23 chapters of supposedly scientific data and analysis. Perhaps the most baleful was Chapter 5, “Early Sexual Growth and Activity,” where Kinsey claimed to show that the tiniest of infants have the “capacity” for orgasm. He contended that his data confirmed that sexual activity is natural to the human “animal” from birth, and that human children are therefore unharmed by sexual activity even from birth. (p. 132)
Furthermore, according to Reisman, Kinsey solicited and encouraged pedophiles—at home and abroad—to sexually violate from 317 to 2,035 infants and children for his alleged data on normal “child sexuality.” Many of the crimes against children (oral and anal sodomy, genital intercourse and manual abuse) committed for Kinsey's data are quantified in his own graphs and charts. For example, “Table 34” on page 181 of Kinsey's Male volume, claims to be a “scientific” record of “multiple orgasm in pre-adolescent males.” Here, infants as young as 5 months are timed with a stop watch for “orgasm” by Kinsey's “technically trained” aides, with one 4-year-old, tested 24-hours around the clock for an alleged 26 orgasms. These child “data” are commonly quoted by sex educators, pedophiles and their advocates to prove children's innate need for sexual satisfaction. The claim of a legitimate need by children for a satisfactory sexual life results ultimately in the teaching of “safe sex” inclusive of all forms of “sexual orientation,” homosexual, heterosexual, bisexual, etc., via school sex education. (“Crafting ‘Gay’ Children,” p. 3, summarizing some of the research of her book)

To document even a significant portion of the links between homosexual activism and advocacy of adult-child sex would involve another large article. Instead, I refer readers to an article by Steve Baldwin entitled “Child Molestation and the Homosexual Movement” in a theme issue on “Homosexuality” in Regent University Law Review 14.2 (Spring 2002; cf. also the article by Judith Reisman in the same issue). Here is an excerpt from Baldwin’s article (pp. 272-77, minus notes):

The most comprehensive gay networking website, the Queer Resource Directory (www.qrd.org), links every gay group in the country including NAMBLA [the North American Man-Boy Love Association] and other homosexual groups that focus on youth. NAMBLA marches in gay pride parades with the consent of the gay leadership. Many of the homosexual movement’s most prominent leaders endorse NAMBLA and its goals. 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. Harry Hay, whom many consider the founder of the American homosexual movement, invited NAMBLA members to march with him in the 1993 "March on Washington" gay rights parade. He also marched in the 1986 Los Angeles gay parade wearing a shirt emblazoned with the words "NAMBLA walks with me."

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 sexual . . . . I am glad there is a group like NAMBLA that is willing to be courageous." The San Francisco Sentinel 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."

There is also the matter of NAMBLA’s membership status in the International Lesbian and Gay Association (ILGA), recognized at one time by the United Nations as the official Non-Government Organization (NGO) representing the gay community worldwide. When NAMBLA’s ILGA membership became public, a whirlwind of international controversy erupted. Some gay leaders viewed this attention as harmful to the gay movement’s image and goals and urged the expulsion of NAMBLA for purely political purposes.
However, the media failed to report that ILGA itself had hosted workshops on pedophilia and passed resolutions in 1985, 1988, and 1990 to abolish age of consent laws claiming that "same sex age of consent laws often operate to oppress and not to protect" and supported "the right of every individual, regardless of age, to explore and develop her or his sexuality."

Eventually, reacting to congressional legislation threatening the reduction of $119 million in financial support, the United Nations kicked out ILGA in 1995 for refusing to sever ties with a half dozen member groups that advocated or promoted pedophilia. Revealingly, even though ILGA did expel NAMBLA (many say it was for show), it could not muster enough support among its membership to expel other more powerful and discreet pro-pedophile organizations from Germany and other countries. It is extremely revealing that the majority of members of the world’s leading homosexual coalition, the ILGA, decided they would rather be excluded from UN deliberations than vote out groups that advocate sex with children.

Over the last fifteen years the homosexual community and its academic allies have published a large quantity of articles that claim sex with children is not harmful to children but, as stated in one homosexual journal, "constitute an aspect of gay and lesbian life." Such articles have appeared in pro-homosexual academic journals such as The Journal of Homosexuality, The Journal of Sex Research, Archives of Sexual Behavior, and The International Journal of Medicine and Law. The editorial board of the leading pedophile academic journal, Paidika, is dominated by prominent homosexual scholars such as San Francisco State University professor John DeCecco, who happens to edit the Journal of Homosexuality.

Indeed, the Journal of Homosexuality is the premier academic journal of the mainstream homosexual world and yet it published [in 1990] a special double issue entitled, Male Intergenerational Intimacy, containing dozens of articles portraying sex between men and minor boys as loving relationships. One article states that parents should view the pedophile who loves their son "not as a rival or competitor, not as a theft of their property, but as a partner in the boy’s upbringing, someone to be welcomed into their home." . . .

A 1995 content analysis by Dr. Judith Reisman of the Institute for Media Education, focusing on advertisements in the nation’s most influential homosexual newspaper, The Advocate, reveals that 63% of the personal ads sought or offered prostitution. Many of them openly solicit boys. The Advocate also advertises a "Penetrable Boy Doll . . . available in 3 provocative positions." Reisman found that the number of erotic boy images per issue of The Advocate averaged fourteen. . . .

Indeed, NAMBLA and other pro-pedophile literature can be found wherever homosexuals congregate (homosexual bookstores, bathhouses, festivals, gay bars, etc.) [examples follow] . . . .


"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.

Pick up any gay newspaper or gay travel publication and one finds ads for sex tours to Burma, Philippines, Sri Lanka, Thailand, and other countries infamous for boy prostitution. . . . The most popular travel guide for homosexuals, Spartacus Gay Guides,
is replete with information about where to find boys for sex and, as a friendly warning, lists penalties in various countries for sodomy with boys if caught. . . .

Homosexual Internet sites are no different. A quick search using the words "gay" and "boys" easily locates thousands of homosexual sites that promote sex with young boys and/or contain child pornography. Indeed, it is the mainstream homosexual groups who filed suit to block Virginia Legislation, passed in 2001, restricting Internet use that proves harmful to children (such as chat rooms commonly used by pedophiles to find victims) . . . .

The Holy Grail of the pedophile movement is the lowering or elimination of all age of consent laws. The main warriors in this political and legal battle are "mainstream" homosexual groups [examples follow]. . . .

Given the above it would be absurd to pretend that the drive for normalizing adult-child sexual activity has not been fueled to a considerable and disproportionate extent by individuals and organizations connected with efforts at normalizing homosexual practice. Of course, too, the historical roots of contemporary homosexual movements lie in the pederasty of ancient Greece and Rome and of many other cultures.

C. Pedophilia and homosexuality: Is one an inherent mental illness and the other not?
What are Peterson and Hedlund’s specific charges against me as regards my view on the pedophilia problem? Peterson and Hedlund allege that I misrepresent the evidence by not telling readers the following things:

a. “Pedophilia, unlike homosexuality, is a pathological mental disorder.”

b. “A ‘homosexual (adjective) pedophile (noun)’ is not a homosexual who molests children but a ‘fixated’ pedophile who prefers boys . . . with little, if any, erotic interest in adults.”

c. “Because heterosexuals outnumber homosexuals by 25:1, the total number of boys molested by heterosexuals and pedophiles outnumber by many times (≥10X?) those molested by homosexuals. Thus the single place where any child is at greatest risk of being sexually molested is an outwardly heterosexual household. (Over 95% of all child molesters self-identify themselves as heterosexuals.)”

d. Childhood same-sex experience cannot be “a significant cause of homosexuality” inasmuch as the Etoro tribe in New Guinea where all boys go through an adult-child sexual relationship nevertheless produces adult males who are not homosexual.

Let us begin with their first point: “Pedophilia, unlike homosexuality, is a pathological mental disorder.” One can get at the inaccuracy of this statement from two different angles. One is to make the case, as I have done above, that there is a significant pathological side to homosexuality as regards mental health issues and relational problems (short-term relationships, nonmonogamy) that cannot be attributed simply to societal opposition to homosexual practice. That the two APAs (Psychiatric and Psychological) no longer classify homosexuality as such in their official literature is not surprising in view of the grip that homosexual advocacy groups have on each organization.

The other angle from which the inaccuracy of the statement can be shown is to underscore the impossibility of proving that adult-child sex does intrinsic (or inherent) scientifically measurable harm to children. As with homosexuality, there is at most only a disproportionately high rate of harm. Indeed, this very point has been repeatedly made in the last seven or eight years by a number of psychiatrists and psychologists, particularly
among those most active for homosexual causes. Here we merely cite some of the more salient research.

A 1998 study published in an American Psychological Association journal argued that “the claim that childhood sexual abuse inevitably or usually produces harm is not justified” (B. Rind, et al., “A meta-analytic examination of assumed properties of child sexual abuse using college samples,” *Psychological Bulletin* 124 [1998]: 22-53, quote from p. 44). Rind et al. state in their conclusion:

Beliefs about CSA [child sexual abuse] in American culture center on the viewpoint that CSA by nature is such a powerfully negative force that (a) it is likely to cause harm, (b) most children or adolescents who experience it will be affected, (c) this harm will typically be severe or intense, and (d) CSA will have an equivalently negative impact on both boys and girls. . . . Results of the present review do not support these assumed properties. . . . CSA is not a propertied phenomenon and . . . has no inbuilt or inevitable outcome or set of emotional reactions.

. . . Overinclusive definitions of abuse that encompass both willing sexual experiences accompanied by positive reactions and coerced sexual experiences with negative reactions produce poor predictive validity. To achieve better scientific validity, a more thoughtful approach is needed by researchers when labeling and categorizing events that have heretofore been defined sociolegally as CSA.

One possible approach . . . is to focus on the young person's perception of his or her willingness to participate and his or her reactions to the experience. A willing encounter with positive reactions would be labeled simply *adult-child sex*, a value-neutral term. If a young person felt that he or she did not freely participate in the encounter and if he or she experienced negative reactions to it, then *child sexual abuse*, a term that implies harm to the individual, would be valid. Moreover, the term *child* should be restricted to nonadolescent children. . . . Adolescents are different from children in that they are more likely to have sexual interests, to know whether they want a particular sexual encounter, and to resist an encounter that they do not want. Furthermore, unlike adult-child sex, adult-adolescent sex has been commonplace cross-culturally and historically, often in socially sanctioned forms, and may fall within the "normal" range of human sexual behaviors. . . . A willing encounter between an adolescent and an adult with positive reactions on the part of the adolescent would then be labeled scientifically as *adult-adolescent sex*, while an unwanted encounter with negative reactions would be labeled *adolescent sexual abuse*.

Finally, it is important to consider implications of the current review for moral and legal positions on CSA. If it is true that wrongfulness in sexual matters does not imply harmfulness (Money, 1979), then it is also true that lack of harmfulness does not imply lack of wrongfulness. Moral codes of a society with respect to sexual behavior need not be, and often have not been, based on considerations of psychological harmfulness or health (cf. Finkelhor, 1984). Similarly, legal codes may be, and have often been, unconnected to such considerations (Kinsey et al., 1948). In this sense, the findings of the current review do not imply that moral or legal definitions of or views on behaviors currently classified as CSA should be abandoned or even altered. The current findings are relevant to moral and legal positions only to the extent that these positions are based on the presumption of psychological harm. (pp. 46-47)

The authors are quite right in the last paragraph that “lack of harmfulness does not imply lack of wrongfulness. Moral codes . . . need not be . . . based on considerations of
psychological harmfulness or health.” Few wrong sexual behaviors cause intrinsic (inherent), scientifically measurable psychological or physical harm. Do Peterson and Hedlund agree? And, if they do, of what relevance to the discernment of moral wrong is their assertion that homosexual practice does not cause such intrinsic harm (an assertion, incidentally, with which I have never disagreed)?

The controversial Rind et al. study was subsequently and extensively critiqued by S. J. Dallam, et al., “The effects of child sexual abuse: comment on Rind, Tromovitch, and Bauserman (1998),” *Psychological Bulletin* 127 (2001): 715-733. However, although the second study presented evidence that the first study had overstated the case and misread some data, it began with the following caveat:

Please note that the purpose of our article is not to argue that all types of sexual abuse do in fact cause pervasive and intense harm in all victims. Indeed, it is well recognized in the empirical literature that the aftereffects of CSA [child sexual abuse] are extremely varied and that a significant percentage of abused children remain a-symptomatic” (p. 716; emphasis added).


Similar conclusions about the absence of intrinsic or inherent pathology to pedophilia are stated in a book by David M. Fergusson (the same person who wrote one of the two key studies on homosexuality and psychopathology, cited above) and P. E. Mullen, *Childhood Sexual Abuse: An Evidence-Based Perspective* (SAGE Publications, 1999). Although Fergusson and Mullen note that studies indicate an increased risk of problems for children who experience sex with an adult (e.g., depression, anxiety, substance abuse, eating disorders, and relational difficulties), they also contend that there is no fixed and universal pattern of symptomatic harm. In fact, as many as 40% of those affected may be without any symptoms.

A 2001 study by Bruce Rind (cf. the Rind et al. study above) assessed “Gay and bisexual adolescent boys’ sexual experience with men” (*Archives of Sexual Behavior* 30:345-68). From a college sample of 129 homosexual and bisexual men,

26 were identified as having had age-discrepant sexual relations (ADSRs) as adolescents between 12 and 17 years of age with adult males. Men with ADSR experiences were as well adjusted as controls in terms of self-esteem and having achieved a positive sexual identity. Reactions to the ADSRs were predominantly positive, and most ADSRs were willingly engaged in. Younger adolescents were just as willing and reacted at least as positively as older adolescents.

Of course, a small sample size such as this, and of college students no less (where the incidence of positive adjustment is likely to be significantly higher), is hardly a representative sample. Self-esteem is also not an adequate index of non-harm. But it does suggest the obvious: sex between young adolescents and adults probably does not produce intrinsic harm.
The journal *Archives of Sexual Behavior* devoted an entire issue in 2002 (31.6: 467-510) to discussing “Is pedophilia a mental disorder?” opening with an article by Richard Green (pp. 467-71), a researcher renown for pioneering work on the correlation between femininity in boys and homosexual orientation (cf. his book, *The ‘Sissy Boy Syndrome’ and the Development of Homosexuality* [Yale University Press, 1987]). Green had been an influential advocate thirty years earlier for the removal of homosexuality from the *DSM* (*Diagnostic and Statistical Manual of Mental Disorders*) list of mental disorders. In the article Green now argues for the removal of pedophilia from the *DSM*, which at any rate since the 2000 edition has treated pedophilia as a mental illness only if a pedophilic orientation is acted upon.

Green reminds readers that homosexuality was removed from the *DSM* on the grounds that homosexuality was relatively widespread historically and cross-culturally, exists in other species, and does not intrinsically cause homosexual persons individual distress or societal maladaptiveness; moreover, that societal condemnation of homosexuality harms the mental health of homosexuals. The same arguments, he notes, can be made as regards pedophilia. He cites a unique British study of 77 “non-prisoner, non-patient pedophiles” that concluded:

> The most striking thing about these results is how normal the paedophiles appear to be according to their scores on these major personality dimensions—particularly the two that are clinically relevant [neuroticism and psychoticism]. . . . [Significantly higher levels of introversion are not a problem since introversion] in itself is not usually thought of as pathological. (p. 57)

Green also notes that a number of studies indicate that 17-25% of men experience significant arousal to sexual images of children and/or adolescents. He concludes:

> Sexual arousal patterns to children are subjectively reported and physiologically demonstrable in a substantial minority of “normal” people. Historically, they have been common and accepted in varying cultures at varying times. This does not mean that they must be accepted culturally and legally today. The question is: Do they constitute a mental illness? Not unless we declare a lot of people in many cultures and in much of the past to be mentally ill. And certainly not by the criteria of DSM.

Then, too, there is a 2004 study of “Gay and bisexual men’s age-discrepant childhood sexual experiences” (J. L. Stanley et al., *Journal of Sex Research* 41:381-9). Among “192 homosexual and bisexual men recruited from a randomly selected community sample” “fifty (26%) reported sexual experiences before age 17 with someone at least 5 years older.” Of these fifty half (specifically 24 men or 49%) “perceived their sexual experiences as negative, coercive, and/or abusive.” This half had “higher levels of maladjustment” than the homosexual and bisexual men who as adolescents had not experienced sex with an adult. However, “participants with age-based CSA experiences who perceived their sexual experience as non-negative, noncoercive, and nonabusive were similar to non-CSA participants in their levels of adjustment.” As with the 1998 Rind et al. study, the authors of this study propose that the term “child sexual abuse” be limited to adult-child relations where the child perceives the relationship as abusive.
My point in mentioning these studies is obviously not to argue in favor of adult-child sex but rather to show that the distinction that Peterson and Hedlund draw between homosexuality as a non-pathology and pedophilia as a pathology is simplistic and not substantiated by the data. Neither homosexuality nor pedosexuality causes intrinsic measurable harm, though both are associated with increased risk of measurable harm. A secondary point is to show similarities in the advocacy for each. Both homosexuality and pedosexuality are sexual orientations. Therapeutic success in completely eliminating all desires in question is far from the norm. Both associated behaviors can be documented in the animal kingdom and have existed in societies historically and cross-culturally, with some degree of approval. Modern “phobias” about the behavior may contribute to the poor mental health of those who engage in the behavior.

D. Are homosexuals and homosexual pedophiles mutually exclusive categories? The next contention by Peterson and Hedlund is this: “A ‘homosexual (adjective) pedophile (noun)’ is not a homosexual who molests children but a ‘fixated’ pedophile who prefers boys . . . with little, if any, erotic interest in adults.”

This idea that “homosexuals” and “pedophiles” are mutually exclusive groups is just ‘smoke and mirrors’ by psychiatric and psychological associations concerned to protect the image of homosexual persons. A person attracted only or primarily to children of the same sex is by definition homosexual (a term that means ‘same-sexual,’ with the prefix homo- derived from the Greek homoios, “like, same”). An age-restrictive or pedophilic homosexual is a homosexual nonetheless. Both age and sex constitute the structural criteria for such attraction. The very terminology “homosexual pedophile” makes the point, even though an attempt may be wrongly made to distinguish such a person from a pedophilic homosexual. By the same token, a man attracted exclusively, or nearly so, to girls rather than women is an age-defined (i.e., pedophilic) heterosexual or heterosexual pedophile. And a man attracted to both girls and boys may be labeled either a bisexual pedophile or a pedophilic bisexual.

It is a semantic sleight of hand and pure sophistry to define a homosexual person solely as one who has a primary attraction to adult males, as Peterson and Hedlund do (denoted in the scientific literature as “homosexual teleiophiles” or “androphiles”) and then to proclaim proudly that we have discovered that homosexual persons, so defined, do not do much molesting of children. If, with Peterson and Hedlund, a pedophile is defined as a person who shows “little, if any, erotic interest in adults” and a “homosexual” as a person who shows little, if any, erotic interest in children, then, by definition, no homosexual can be a pedophile and few homosexuals will ever engage in a pedophilic act. Voila!

This sophistry is, in fact, a fatal flaw of a study that claimed to show that homosexual persons have as little sexual interest in children as heterosexuals: Kurt Freund, et al., “Heterosexuality, homosexuality, and erotic age preference,” Journal of Sex Research 26 (1989): 107-17. Using a phallometric test (which records penile volume changes during the presentation of nude pictures or other potentially erotic stimuli), Freund et al. found that “homosexual males who preferred physically mature partners responded no more to
male children than heterosexual males who preferred physically mature partners responded to female children.” However, the study did not evaluate whether homosexual persons of all types had a higher incidence of attraction to prepubescent children than heterosexual persons. In other words, it screened out homosexual and heterosexual persons who did not experience primary attraction for children before testing for attraction to children. Nor did this study evaluate sexual attraction for adolescents aged twelve to seventeen. Nor did the study attempt to evaluate the rates of actual sex with adolescents and/or prepubescents by homosexual and heterosexual teleiophiles. So this study did not demonstrate that homosexual persons, more broadly defined, were as unlikely to have sex with prepubescents and adolescents as heterosexual persons.

However, a later study by Freund (and R. Watson) acknowledged that the “proportion of true pedophiles among persons with a homosexual erotic development is greater than that in persons who develop heterosexually”; otherwise stated, “a homosexual development notably often does not result in androphilia [sex between adult males] but in homosexual pedophilia” (“The proportions of heterosexual and homosexual pedophiles among sex offenders against children: an exploratory study,” Journal of Sex and Marital Therapy 18 [1992]: 34-43, quotes from the abstract and from p. 41 respectively). The very next statement following both quotes is apologetic: “This, of course, would not indicate that androphilic males [males attracted to men] have a greater propensity to offend against children.” But, as noted above, such a statement—which incidentally confirms that the authors are not biased against homosexual interests—begs the question of what percentage of homosexual males have little or no sexual attraction for children. According to Freund and Watson:

Previous investigations have indicated that the ratio of sex offenders against female children vs. offenders against male children is approximately 2:1, while the ratio of gynephiles [men attracted to women] to androphiles [men attracted to men] among the general population is approximately 20:1. . . . Using phallometric test sensitivities to calculate . . . true pedophiles among . . . sex offenders . . . and taking into consideration previously reported mean numbers of victims per offender group, the ratio of heterosexual to homosexual pedophiles was calculated to be approximately 11:1.

The implication is that if heterosexual males outnumber homosexual males 20:1 but heterosexual pedophiles outnumber homosexual pedophiles only 11:1, then “homosexual development results in pedophilia” twice as often as “heterosexual development” does.

However, as even Freund and Watson admit, this estimate is probably an exaggeratedly low estimate (see below). And if one takes into account only the actual figures for incarcerated sex offenders against children, not imaginary projections of uncaught perpetrators of sex with children, one can readily compute that homosexual development produces societally-prosecuted child-sex offenders seventeen times as often as heterosexual development does. For the ratio of heterosexual males to homosexual males is more like 33:1 than 20:1 (3% male homosexuals to the total male population rather than nearly 5%), while the ratio of incarcerated heterosexual offenders to incarcerated homosexual offenders is (as Freund and Watson acknowledge) only 2:1. As a more recent study sums up,
The best epidemiological evidence indicates that only 2 to 4 percent of men attracted to adults prefer men . . . ; in contrast, around 25 to 40 percent of men attracted to children prefer boys . . . Thus, the rate of homosexual attraction is 6 to 20 times higher among pedophiles. (R. Blanchard et al., “Fraternal Birth Order and Sexual Orientation in Pedophiles,” Archives of Sexual Behavior 29 [2000]: 464, emphasis added)

It is important to note that Blanchard et al. give the same kind of disclaimer that Freund et al. give: “Ordinary (teleiophilic) homosexual men are no more likely to molest boys than ordinary (teleiophilic) heterosexual men are to molest girls” (p. 476). As we seen, this apology begs the question as to what percentage of homosexual men are “teleiophilic” in relation to heterosexual men. They add:

The causes of homosexuality are irrelevant to whether it should be considered a psychopathology. That question has already been decided in the negative, on the grounds that homosexuality does not inherently cause distress to the individual or any disability in functioning as a productive member of society (Friedman, 1988; Spitzer, 1981).” (ibid.)

At the time of article submission Blanchard et al. were unaware of the 1999 studies on the association of homosexuality and psychopathology that were published in the Archives of General Psychiatry in 1999 (discussed in section I. above). Again, as noted above, few sexual attractions, even among those that society strongly disapproves, “inherently cause distress . . . or any disability in functioning,” including sexual attraction for prepubescent and adolescent children. Moreover, child-molesting priests, for example, have been able to function well for decades in their ministry, at least to all outward appearances, and undoubtedly for some with a minimum of personal distress. So what? At any rate, apologetic comments such as these by Blanchard et al. are a good indication that the authors cannot be charged with grinding an anti-homosex axe.

For those interested, here is the evidence why Freund and Watson have probably (even by their own admission) significantly underestimated the extent to which homosexual development results in pedophilia:

As stated above, Freund and Watson estimate that true heterosexual pedophiles outnumber true homosexual pedophiles by a ratio of 11:1. In other words, even though heterosexual males vastly outnumber homosexual males (Freund and Watson say 20:1 but, as noted above, the real ratio is probably closer to 33:1), true heterosexual pedophiles outnumber true homosexual pedophiles by only 11:1. Moreover, even Freund and Watson acknowledge that the 11:1 ratio is “an upper limit or, more likely, quite exaggerated” (see Freund’s online article, “In Search of an Etiological Model of Pedophilia”). The lower the ratio of heterosexual pedophiles to homosexual pedophiles, the higher the likelihood that homosexual development will lead to pedophilia as compared with heterosexual development.

Why is the 11:1 ratio likely to be “quite exaggerated” on the high end? Freund and Watson start with a generally acknowledged estimate that “the ratio of [caught] sex offenders against female children vs. [caught] offenders against male children is approximately 2:1.” Then, using data from phallometric test measurements to determine “true pedophiles” (i.e., those who experience a higher attraction for children than to adults) they recomputed the 2:1 figure for offenders to a 1.4:1 figure for true pedophiles. Then they multiply the 1.4 figure by 7.6 to determine the ratio of total offenders (caught and uncaught) as 11:1.

Where do they get 7.6? A 1987 study by Abel et al. indicated that victims of offenders against male children are 7.6 times larger than victims of offenders against female children. Freund and Watson reason that the more victims, the higher the probability of being caught. They then reasoned that “the risk of an offender being caught can be expected to increase proportionally and linearly with each victim” (p. 38), which in turn led them to multiply the 1.4 figure by the 7.6 figure, which gives then (rounded off) 11.
However, Freund later admitted that “this estimate did not take into account that the low number of victims of offenders against female children, found by Abel and co-workers, must have been strongly influenced by the fact that there were substantially fewer pedophiles among the offenders against female children than there were against male children” (“In Search of an Etiological Model of Pedophilia”). In other words, the number of incarcerated sex offenders against female children is as proportionately low as it is not just because they offend less than sex offenders against male children and so get caught less but also because offending less is itself a mark of a less intense erotic desire for children (i.e., of not being a true pedophile).

So the ratio of true heterosexual pedophiles to true homosexual pedophiles in the general population, not just among those caught and incarcerated, may well be closer to the real ratio for incarcerated child molesters than it is to Freund’s imaginary estimate of caught and uncaught child molesters. Even if the 11:1 ratio were only brought down to 6:1 or 5:1, then, using an overall heterosexual-to-homosexual ratio of 33:1 for the general population, homosexual development would result in pedophilia six times as often as heterosexual development does.

The next question that arises is: In terms of etiology (origination), how different is homosexual teleiophilia (man-man attraction) from homosexual pedophilia, apart, of course, from the obvious difference of age preference? To be sure, that some differences would exist is to be expected; otherwise, all homosexual persons would be homosexual pedophiles when, in fact, most homosexual persons are not homosexual pedophiles. One difference is over the extent of bisexual attraction. Phallometric studies by Freund and others indicate that pedophiles differentiate erotically between females and males less than males who erotically prefer adult partners (“Erotic gender differentiation in pedophilia,” Archives of Sexual Behavior 20 [1991]: 555-66; “Deficient erotic gender differentiation in pedophilia: a follow-up,” Archives of Sexual Behavior 22 [1993]: 619-28). This is not all that surprising, given the fact that the category of sexual orientation intersects with a second category, age, and too that sexual differentiation in children is less pronounced than in adults. Nevertheless, despite the higher bisexual incidence, significant and distinctive types of homosexual and heterosexual pedophiles remain. Other possible differences between homosexual teleiophilia and homosexual pedophilia are suggested in two studies by Freund and Blanchard. Male homosexuals attracted to adults, as compared to male homosexuals who prefer pubescent or pubescent children, “show significant levels of feminine identification” in childhood and reported “significantly poorer father-son relations” (“Feminine gender identity and physical aggressiveness in heterosexual and homosexual pedophiles,” Journal of Sex and Marital Therapy 13 [1987]: 25-34; “Is the distant relationship of fathers and homosexual sons related to the sons’ erotic preference for male partners, or to the sons’ atypical gender identity, or to both?” Journal of Homosexuality 9 [1983]: 7-25).

At the same time, there are also connecting links between homosexual pedophilia and homosexual teleiophilia. The most obvious, of course, is the presence of a dominant attraction to the same sex. Beyond that, one study of pedophiles and teleiophiles by Freund et al. that compared childhood curiosity to see people in the nude suggests that “the establishment of erotic sex preference precedes that of erotic age preference” and that a “process of active devaluation of the nonpreferred age bracket” (i.e., minimizing erotic interest in children or in adults) does not culminate until puberty (“Toward a testable developmental model of pedophilia: the development of erotic age preference,” Child Abuse & Neglect 17 [1993]: 315-24). Attraction by sex generally comes before attraction by age. A 1988 study found that male child molesters “responded with moderate sexual arousal . . . to the [slides of] nude males of all ages” (W. L. Marshall et
al., “Sexual offenders against male children: sexual preferences,” *Behavior Research and Therapy* 26: 383-91). In addition, the 1987 study on “Feminine gender identity and physical aggressiveness in heterosexual and homosexual pedophiles” (cited above) found that “male homosexuals in general” (i.e., those preferring prepubescent, pubescent, or adult sexual partners) “tend to be unaggressive in boyhood,” in contrast to male heterosexuals in general. Finally, a 2000 study of “Fraternal birth order and sexual orientation in pedophiles” by R. Blanchard et al. found that

fraternal birth order correlates with homosexuality in pedophiles, just as it does in men attracted to physically mature partners. Results suggest that fraternal birth order (or the underlying variable it represents) may prove the first identified universal factor in homosexual development. Results also argue against a previous explanation of the high prevalence of homosexuality in pedophiles (25% in this study), namely, that the factors that determine sexual preference in pedophiles are different from those that determine sexual preference in men attracted to adults. (*Archives of Sexual Behavior* 29: 463-78, here cited from the abstract)

In other words, this study lent support for the conclusion of a 1998 study by R. Blanchard and A. F. Bogaert; namely, that “homosexuality in men attracted to immature males is etiologically related to homosexuality in men attracted to mature males” (“Birth order in homosexual versus heterosexual sex offenders against children, pubescents, and adults,” *Archives of Sexual Behavior* 27: 595-603; see also: Bogaert, Blanchard, et al., “Pedophilia, sexual orientation, and birth order,” *Journal of Abnormal Psychology* 106 [1997]: 331-5).

Consequently, while there are some developmental differences between pedophilic homosexuals and teleiophilic homosexuals, significant continuity exists that justifies seeing a spectrum of developing homoerotic possibilities rather than a sharp line separating two polar extremes.

**E. Is pedophilia more a heterosexual problem or a homosexual problem?** The research cited above puts us in a position to respond to the next contention of Peterson and Hedlund:

Because heterosexuals outnumber homosexuals by 25:1, the total number of boys molested by heterosexuals and pedophiles outnumbers by many times (>10X?) those molested by homosexuals. Thus the single place where any child is at greatest risk of being sexually molested is an outwardly heterosexual household. (Over 95% of all child molesters self-identify themselves as heterosexuals.)

First, Peterson and Hedlund confuse the issue by talking about “total numbers” and drawing an absolute distinction between the categories “homosexuals” and “heterosexuals” on the one hand and “pedophiles” on the other. Heterosexual males vastly outnumber homosexual males in the population (as I said, more like 33:1 than 25:1 or 20:1) so higher total numbers of adult-child sex by heterosexual males is to be expected. The real issue has to do with rates/percentages and proportionality within the groups “heterosexuals” and “homosexuals.” I refer in my book to disproportionately high rates of homosexual pedophilia, not to “total numbers.”
As we have argued above, the proportion of persons with a homosexual erotic development who become pedophiles or engage in pedophilic activity is far higher than the proportion of persons with a heterosexual development. Otherwise stated: Homosexual development results in homosexual pedophilia substantially more often as a percentage of the total number than heterosexual development results in heterosexual pedophilia. Otherwise stated: The rate of homosexual attraction among pedophiles is significantly higher than the rate of heterosexual attraction. Still otherwise stated: The percentage of homosexual men who are “teleiophilic” (oriented exclusively or primarily to adults), while significantly greater than the percentage of homosexual men who are pedophilic, is nonetheless substantially less than the percentage of heterosexual men who are teleiophilic and not pedophilic.

Certainly as regards adult-adolescent sexual contact the figures are high. Earlier studies by A. Bell and M. Weinberg (Homosexualities [Simon & Schuster, 1978]) and by K. Jay and A. Young (The Gay Report [Summit Books, 1979]) found that somewhere between a fifth and a fourth of homosexual men had had sex with boys 16 years of age or younger. A much more recent study by Z. Silverthorne and V. Quinsey investigated “Sexual partner age preferences of homosexual and heterosexual men and women,” using a sample size of 48 homosexual men, 48 homosexual women, 48 heterosexual men, and 48 heterosexual women (Archives of Sexual Behavior 29 [2000]: 67-76). Each group was shown pictures of the desired sex ranging in age from 18-60 years and asked to gauge the intensity of attraction for each age group (late teens, early- to mid-20s, late 20s-early 30s, etc.). Unfortunately, the investigators didn’t go earlier than 18 years. Nevertheless, the study did show that whereas heterosexual male interest peaked for women in their early- to mid-twenties, homosexual male interest peaked, within the limited confines of 18-60 years, at the earliest category, that is, for men in their late teens. Not surprisingly, the attraction for young sex partners was considerably less pronounced among the women (heterosexual and homosexual women showed no differences in age preference). The fact of significantly higher rates of childhood sexual experience on the part of persons who then or later self-identify as gay (see below, and the Rind 2001 and Stanley et al. 2004 studies above) also provides indirect evidence that homosexual men are more likely to engage in sexual relations with minors than heterosexual men.

These higher proportions partly explain why there is significantly more accommodation and sympathy extended to adult-minor relationships from within homosexual advocacy circles than from outside such circles. A second probable factor for such accommodation is that approval of homosexual practice depends philosophically on a rejection of absolute structural prerequisites for sexual relationships when evidence of genuine affection between the participants is given and measurable harm cannot be demonstrated as intrinsic. It is precisely such philosophical underpinnings that make it impossible to categorically reject all adult-child sexual bonds.

Peterson and Hedlund claim that “over 95% of all child molesters self-identify themselves [sic] as heterosexuals.” They do not cite any specific studies to document the claim but doubtless they were thinking (with faulty memory) of the oft-cited study by C. Jenny et al., “Are Children at Risk for Sexual Abuse by Homosexuals?” Pediatrics 94
Jenny et al. examined sexually abused children who received treatment at a children’s hospital in the course of the year. Among the 47 boys who had been abused by a man (42 by a man alone, 5 by a man and woman), 37 (nearly 80%) were abused by a man who was or had been in a sexual relationship with a female relative of the child. Jenny et al. ‘identified’ as a gay man only one of the 47 men who had molested a boy (i.e., 2%). The conclusion: The risk of children being molested by “recognizably homosexual adults” are “within current estimates of the prevalence of homosexuality in the general community.”

However, the Jenny study was seriously flawed. Not a single molester was interviewed, much less subjected to phallometric testing. Jenny et al. simply consulted hospital charts that recorded information from the child victim’s natural or foster parents and case workers, and sometimes too from the child victim. But how accurate were these informants in identifying the sexual orientation of the offenders? If they had been previously unaware of the molester’s attraction for children, it seems likely that they were also unaware of other aspects of the molester’s sexuality. Moreover, it is not at all uncommon for homosexual men to have sexual relations with women during the course of their life, some even producing their own biological children. Does that cancel out their homoerotic preferences? Not according to homosexual activists: they have simply suppressed or concealed from others their dominant homosexual orientation (the playwright Oscar Wilde is a famous case in point). A 1998 study, for example, found that 8.5% of self-defined homosexual (non-bisexual) men had had heterosexual intercourse in just the past year (B. A. Evans et al., “Heterosexual behaviour, risk factors and sexually transmitted infections among self-classified homosexual and bisexual men,” *International Journal of STD & AIDS* 9:129-33). Some pedophilic homosexuals view a sexual relationship with a woman as an opportunity to have access to children.

The Jenny et al. study can be contrasted with the only study in a refereed journal that based its findings on self-reports by molesters: W. Erickson et al., “Behavior patterns of child molesters,” *Archives of Sexual Behavior* 17 (1988): 77-86 (cited in my book in the same footnote that I cite the Jenny study). Erickson et al. reported that, of 69 male offenders who had molested boys under 14 years of age, 86% self-identified as homosexual. Problematic for the assumption that the boys were simply functioning as substitutes for girls is the fact that 41% of the boy-molesters engaged in oral stimulation of the victim’s penis.

**F. Is childhood same-sex experience a risk factor for homosexual development?** The final contention of Peterson and Hedlund on the pedophilia issue is that I am wrong in allegedly asserting that “childhood same-sex experience is a significant cause of homosexuality.” At the outset it is important to note that my words are more carefully chosen than Peterson and Hedlund’s characterization of my views. This is what I wrote in *The Bible and Homosexual Practice*:

There is also evidence that self-identified homosexuals and bisexuals are three to nine times more likely to have experienced sex as a child (usually with an adolescent or adult male) than their heterosexual counterparts. The higher correlation suggests that sexual abuse may be at least a causative factor in predisposing some people to adult homosexual
behavior. An early association of sexual arousal with an adult or adolescent of the same sex (particularly in the case of boys), or an association of heterosexual sex with trauma (particularly in the case of girls), may incline the child in the direction of homosexual relationships. (pp. 412-13; emphasis in the original)

We have already noted that same-sex molestation of children increases the chances that the child will later identify his orientation as homosexual. The problem of molestation pertains not only to adult male homosexual molesters but also to adolescent male homosexual boys who are increasingly being encouraged by sex-ed programs and gay-activist groups to engage in same-sex sexual experimentation with their peers. (p. 480)

My statement “sexual abuse may be at least a causative factor in predisposing some people to adult homosexual behavior” is a fairly cautious statement. Even the later statement that “same-sex molestation increases the chances” of homosexual development merely presents it as a risk factor, not as an act leading to a predestined outcome. Nowhere do I attribute the majority of instances of homosexual development to childhood sexual experience. How much of a factor it might be is simply not known at the present time. But that it is a factor in some homosexual development appears likely. In the first of the two excerpts that I give above I substantiated the claim that “homosexuals and bisexuals are three to nine times more likely to have experienced sex as a child” with the following footnote:

According to the 1992 National Health and Social Life Survey, among those who had been sexually touched as a child by an adult, 7.4% of the men and 3.1% of the women identified themselves as homosexual or bisexual. Yet self-identified homosexuals/bisexuals accounted for only 2.8% of the men and 1.4% of the women in the survey (Edward O. Laumann, et al., The Social Organization of Sexuality: Sexual Practices in the United States [Chicago: University of Chicato, 199], 297, 344). A nationwide survey by Family Research Institute found that homosexuals and bisexuals were nine times more likely to have been sexually molested as a child (Paul Cameron et al., “Child Molestation and Homosexuality,” Psychological Reports 58 [1986]: 327-37). A review of the literature on molestation of boys in the Journal of the American Medical Association noted that adolescents who were sexually molested by men were up to seven times more likely to identify themselves later as homosexual (W. C. Holmes et al., “Sexual Abuse of Boys,” JAMA 280 [1998]: 1855-62).

The research cited above can be further supplemented. The Rind 2001 study and the Stanley et al. 2004 study, already cited, suggest that about 20-25% of homosexual males had sexual intercourse with an adult while they were still minors. A 2001 study of nearly 1000 nonclinical adults found that 46% of homosexual men and 22% of lesbian women reported childhood homosexual molestation as compared to 7% of the heterosexual men and 1% of the heterosexual women. Homosexual men were thus six to seven times more likely to report molestation than their heterosexual counterparts (M. Tomeo et al., “Comparative Data of Childhood and Adolescence Molestation in Heterosexual and Homosexual Persons,” Archives of Sexual Behavior 30: 535-41). A 1997 telephone probability sample of 2881 urban men who have sex with males found that one-fifth reported child sexual abuse, “primarily by non-family perpetrators,” and that these experiences were “characterized by high levels of force (43% involved physical force/weapons), and penetrative sex (78%; 46% reported attempted or actual anal intercourse)” (J. P. Paul et al., “Understanding childhood sexual abuse as a predictor of
sexual risk-taking among men who have sex with men: The Urban Men’s Health Study,” *Child Abuse and Neglect* 25 [2001]: 557-84). The 1995 Massachusetts Youth Risk Behavior Surveillance, which surveyed over 4000 high school students, did not ask the students about sex with an adult but it did find that 27% of GLB [gay, lesbian, or bisexual] youth had had sex before the age of thirteen, compared to only 7.4% of non-GLB youth; moreover, that one-third of GLB youth had sexual contact against their will as compared to only 9% of non-GLB youth (“R. Garofalo et al., “The association between health risk behaviors and sexual orientation among a school-based sample of adolescents,” *Pediatrics* 101 [1998]: 895-902). A British study of homosexual and bisexual men published in 1992 reported that 25% of the participants had their first sexual experiences with a man by the age of 12; 50% by the age of 14 (P. Weatherburn et al., *The sexual lifestyles of gay and bisexual men in England and Wales* (Project SIGMA, London, 1992).

An old quote from David Finkelhor, a prominent researcher in the field of child sexual abuse, has often been cited to minimize the impact of adult-child sex on homosexual development. Finkelhor assessed the evidence available to him from the 1981 Bell and Weinberg study that “only 5% of homosexual men reported childhood sexual experiences with adults. Such a small figure means that childhood sexual victimization can have little to do with the source of most homosexual behavior” (*Child Sexual Abuse: New Theory and Research* [Free Press, 1984], 197). Given the studies that we cite above, this figure probably needs to be revised to at least twice that percentage and perhaps four to seven times more. At the same time, those who cite this quote from Finkelhof should note that Finkelhof also wrote:

> . . . in our study, we indeed found evidence that there may be a connection between childhood victimization and adult homosexual activity for boys at least. . . . Boys victimized by older men were over four times more likely to be engaged in homosexual activity than were nonvictims.

He noted too: “adolescents themselves often linked their homosexuality to their sexual victimization experiences.”

> It may be common for a boy who has been involved in an experience with an older man to label himself as homosexual (1) because he has had a homosexual experience and (2) because he was found to be sexually attractive by a man. Once he labels himself homosexual, the boy may begin to behave consistently with the role and gravitate toward homosexual activity.

Apologists for the normalization of homosexual practice have taken two approaches in their effort to deny any causal link between the experience of childhood molestation by males and homosexual development. Some simply attempt to deny the significantly higher rates at which homosexual persons experienced childhood sexual contact with a man. Since the data here is overwhelmingly against such a denial this position must soon be abandoned for another; namely, that the homosexuality in all, or nearly all cases, precedes the molestation. One suggestion is that “gay children” seek out and often initiate sexual encounters with men. Some studies indicate this happens for some portion of homosexual youth, though these studies exhibit significant sample bias. The theory
certainly doesn’t account for the numerous unwanted or unsolicited cases of child molestation. It also becomes less and less plausible the earlier the age of alleged solicitation gets and the earlier that one supposes that the child already has a well-formed sense of his alleged homosexuality. Another suggestion is that adult male molesters have an uncanny knack for targeting boys that have not yet publicly identified themselves as homosexuals, perhaps zeroing in on boys who exhibit significant gender nonconformity (a trait that sometimes correlates with later homosexual development).

A third suggestion is that “gay children” put themselves in more dangerous situations because society does not provide safe channels for expressing their sexuality. One study examined, among others, 48 men who as boys had been sexually abused by a man and who had now been referred to mental health clinics (R. J. Kelly et al., “Effects of mother-son incest and positive perceptions of sexual abuse experiences on the psychosocial adjustment of clinic-referred men,” Child Abuse and Neglect 26 [2002]: 425-41). They arrived at their theory because one man in particular reported very early awareness of being gay in the context of a chaotic, unsupportive family. His search to explore and validate his sexuality led him to place himself in dangerous situations where he was molested repeatedly by older males. He and other men in our groups appeared to be aware of a gay sexual orientation before the CSA [Childhood Sexual Abuse], suggesting that molestation by a male perpetrator is not necessarily causal in the development of a gay sexual orientation. (p. 438; emphasis added)

Note too the reference to some unspecified “other men.” How many others had such a consciousness of being gay before abuse? The authors don’t say. And to what extent could they, or some of them, be engaging in revisionist history as they seek to validate their current homosexual identity? The authors don’t explore this question. At the same time, such a description of antecedent gay consciousness certainly does not fit the profile of “several men in our study [who] wondered whether they were sexually attracted to other men because of their sexual abuse experiences”; nor of “some [who] sought treatment hoping that they would no longer be attracted to men once they ‘worked through’ their sexual abuse issues” (ibid.). Clearly such persons didn’t think that they were “gay” before the abuse. Yet nearly two-thirds of the 48 men now identified themselves as gay (16 or 33%) or were unsure of their sexual identity (14 or 29%); only 38% (18 men) said that they were heterosexual (18 or 38%). Compare this to the fact that only 2-4% of the male population identifies itself as gay or bisexual. Where is the evidence that the majority of these were not affected by the abuse toward a homosexual development?

I do not doubt that the three suggestions mentioned above, which assume homosexual self-identification prior to CSA, may account for some portion of the high rates of childhood molestation in homosexual persons. But they do get dangerously close to blaming the victim and/or exonerating the molester. Moreover, when they are used to discount any effect on predisposing subsequent homosexual development, the argument gets a bit ridiculous and tendentious. It is like claiming that childhood molestation is in no way a risk factor for subsequent pedophilic development. It supposes, against the
available evidence, that all children have rigid sexual orientations in place that are completely impervious to major life events.

Since geographical and educational variables can have an impact on the incidence of homosexual self-identification (The Bible and Homosexual Practice, 416-18), since too most homosexual and bisexual persons shift at least once and usually twice on the Kinsey spectrum in the course of life (ibid., 418-20), and since adolescents experience a significantly higher rate of gender identity confusion than do adults (see Part 1, VI.), there is no good reason to deny that early childhood sexual contact with an older male can increase the risk for subsequent homosexual development. The child may wrongly perceive the homosexual molestation to be an indication of his latent homosexuality, particularly if he experiences any arousal from the sexual contact. Then, too, the child may confusedly connect the sexual attention, however twisted, with being loved and wanted. He may be particularly susceptible to homosexual development if the molestation occurs in the midst of a personal struggle, one where he perceives a sense of distance and lack of affirmation from important same-sex guardians or peers.

G. Peterson and Hedlund’s bad use of the Etoro tribe example. Peterson and Hedlund allege that implicating “pedophilic behavior in causing young boys to become gay,” even any boys and even at any level of influence, “is inconsistent with substantive contrary evidence.” Unfortunately for Peterson and Hedlund they don’t provide the reader much in the way of “substantive contrary evidence.”

Their sole “example” is the Etoro tribe in Melanesian New Guinea. Here it will be necessary to back up a bit and provide some background information.

In my book I briefly mention both the Etoro tribe and the Sambia tribe as instances of extreme cross-cultural variations in the manifestation of homosexuality and thus as evidence for the impact of strong socializing factors on the incidence of homosexual identity and/or practice (p. 414; cf. pp. 415-16). I cite them in the context of a discussion of David F. Greenberg’s massive study, The Construction of Homosexuality (University of Chicago Press, 1988); Greenberg discusses Melanesian transgenerational homosexuality on pp. 27-40. All boys in the Etoro and Sambian tribes (among others) participate in a homosexual relationship with a man. When they become men it is their turn to enter into a sexual relationship with a boy. At a certain point in life (for the Etoro, the age of 40; for the Sambian when they marry) they give up all homosexual relations. Greenberg uses their behavior, among other illustrations, as evidence for the following conclusion at the end of his book (which I quote on p. 415 of my book):

The years some homosexuals spend trying without success to conform to conventional expectations regarding gender and sexual orientation tell against the most extreme claims of sexual plasticity. However, in the absence of any evidence linking the peculiar sexual practices of Melanesia with genetic difference, it is reasonable to suppose that if a bunch of Melanesian infants were to be transported in infancy to the United States and adopted, few would seek out the pederastic relationships into which they are inducted in New Guinea, or take younger homosexual partners when they reached maturity. Similarly, American children raised in New Guinea would accommodate themselves to the Melanesian practices. Where social definitions of appropriate and inappropriate behavior
are clear and consistent, with positive sanctions for conformity and negative ones for nonconformity, virtually everyone will conform irrespective of genetic inheritance and, to a considerable extent, irrespective of personal psychodynamics. (p. 487)

Greenberg admits this even though he is an apologist for homosexual causes. Consider these remarks by Greenberg:

To some, the social-constructionist position has seemed troublesome because of its political implications. When heterosexual chauvinists have told homosexuals to change, essentialist theories have provided a ready response: I can’t. When parents have sought to bar homosexual teachers from the classroom lest their children (horror of horrors!) become homosexual, essentialist theories have provided a seemingly authoritative basis for denying the possibility. The present study . . . cannot make concessions to such opportunistic considerations [namely, to the convenient but inaccurate claim that no homosexuals and no heterosexuals could ever experience shifts in sexual attraction]. It should be pointed out, though, that nothing in the social-constructivist position legitimates the denial of rights. . . . Assertive gay liberationists have argued that it may be strategically wiser to concede the possibility that a few students might be influenced to become gay by having an openly gay teacher as a role model, and to say, “So what?” (p. 492)

And note the following comment on Greenberg’s work from a review written by Don Browning, professor of religion and psychological studies at the University of Chicago Divinity school, and published in the liberal Christian magazine *The Christian Century*: “Accepting Greenberg’s thesis might suggest that the new tolerance of [mainline] churches, especially the move toward the ordination of homosexuals, is one more way modern societies help create, not just liberate, individuals with gay and lesbian identities” (Oct. 11, 1989, pp. 911-16, quote from p. 916).

Significant cross-cultural differences in the incidence and forms of homosexuality have existed over the millennia and even within our own time between the “first world” and “third world.” Congenital influences do not explain all these differences. Nor is it likely that these differences can be attributed in all cases to forced ritual conformity. For instance, in ancient Athens homoerotic practice flourished among the upper classes despite the absence of mandatory homosexual rituals.

How do Peterson and Hedlund seek to disprove the point that the macroculture can play an important role in the incidence and shaping of homosexuality? They write:

Gagnon describes this practice in the singular, indicating that “the boy” gives up the practice as an adult, neglecting to point out that all boys in this tribe were put through this practice and later essentially all men gave up this practice. A study of hundreds of men found only one adult homosexual. (Dr. Simon Rosser of the University of MN cited this study at the 2004 *Wordalone* conference.) Dr. Gagnon fails to mention this in his book, most likely because this contradicts rather than supports his assertion that childhood same-sex experience is a significant cause of homosexuality.

The first sentence is another one of Peterson and Hedlund’s numerous false statements regarding my work. They say that I “[neglect] to point out that all boys in [the Etoro] tribe were put through this practice and later essentially all men gave up this practice.”
Yet I say this very thing: “All males must participate in these activities at the appropriate stages of their life” (p. 414, emphasis added). So when Peterson and Hedlund refer secondhand, and without adequate citation, to a study of Etoro tribesmen that showed only one adult male continuing in homosexual relations, this proves, rather than disproves my point. To state once more Greenburg’s conclusion: “Where social definitions of appropriate and inappropriate behavior are clear and consistent, with positive sanctions for conformity and negative ones for nonconformity, virtually everyone will conform irrespective of genetic inheritance and, to a considerable extent, irrespective of personal psychodynamics.”

Nevertheless, the residual pull of male homosexuality manifests itself in an ongoing aversion to women even after homosexual relations are eliminated. Heterosexual relations are prohibited for 260 days out of the year and must take place in the woods far from the village (i.e., not at home). Husbands and wives normally have separate sleeping quarters. The limited contact with women that does exist is generally hostile. And it is reinforced by a metanarrative of beliefs. Semen is viewed as a source of masculine vitality; to put too much of it in a woman’s body threatens to shift the balance of power, sapping men of their courage and their ability to be good hunters and warriors and leading to female domination. And yet sexual relations with women must be undertaken because it is necessary for procreation. These are hardly the trappings of a robust heterosexuality. Why then do men ever give up homosexual relations? Men have a responsibility for transferring their masculine life-force to boys in their care, ideally his wife’s younger brother. Unless this happens, a boy will not mature into a man. When this responsibility is discharged, continued homosexual activity would only debilitate his own vitality to no essential purpose. But, for the Etoro at least, the system of ritual and belief still provides a warrant for homosexual activity for most his life (ages 10 to 40).

V. Homosexuality and Sexually Transmitted Disease

This section is still in process so I will simply make the following brief points.

A. Peterson and Hedlund claim that I do not link homosexual promiscuity to the disproportionately high rates of sexually transmitted disease. This is false as any even moderately careful reading of my work shows. Where I differ from Peterson and Hedlund is over two key points.

First, as I have clearly stated in II. above, the dearth of monogamous, long-term homosexual unions is not going to be radically solved by supporting homosexual practice. These problems are first and foremost related to basic biological differences between men and women that work poorly in sexual unions that consist of only one sex. In fact, cultural endorsement of homosexual practice will likely increase the incidence of homosexuality in the population and, with it, the incidence of non-monogamous sexual practice and the frequency of relationship breakups. Additionally, affirmation of homosexual unions must, in the end, be an affirmation of the typical manifestations of homosexual unions; namely, sexual unions that are not monogamous and of twenty years...
duration or more (to say nothing of lifelong). Such affirmation is not going to strengthen heterosexual commitment to relational monogamy and longevity. It is more likely to weaken it. Logically, how can it not since a monogamy principle depends upon a common recognition that the twoness of sexual relationships follows from the twoness of the sexes in sexual combination?

Peterson and Hedlund need to come clean on the fact that STMs in the homosexual population are not going down; they are going up. For example:

- According to the San Francisco Department of Health 2001 HIV Consensus Data (released Jan. 31, 2001), 28.6% of San Francisco’s estimated 52,000 homosexual men (defined here as MSM or males who have sex with males)—somewhere between one-in-four and one-in-three male homosexuals—are HIV-positive. In addition, 85% of the number of persons living with AIDS are homosexual, even though male homosexuals comprise only 16% of the adult male population in the city. HIV infection rates in San Francisco have more than doubled since 1997. Even among intravenous drug users (IDU) HIV incidence among (IDU) homosexual men was nine times higher than among (IDU) heterosexual men. The proportion of male homosexuals “reporting the use of condoms ‘always’ during anal sex [in the past six months alone] has decreased steadily from 1994 [70%] through 1999 [54%].” “The proportion of [homosexual] men reporting two or more anal sex partners [in the past six months] who reported not using condoms ‘always’ [in the past six months] has increased steadily from 1994 [23.6%] through 1999 [43%].” So much for the long-term effectiveness of safe-sex education in the homosexual population. See: http://hivinsite.ucsf.edu/consensus.

- A 2004 study reported on “Recent trends in diagnoses of HIV and other sexually transmitted infections in England and Wales among men who have sex with men,” for the years 1997-2002 (N. Macdonald et al., in Sexually Transmitted Infections 80:492-97). What did they find? “Between 1997 and 2002, rates of diagnoses of HIV and acute STIs in MSM increased substantially. . . . Rates of gonorrhoea diagnoses doubled between 1999 and 2001. . . . HIV was the third most common STI diagnosed in MSM in England and Wales and the second in London. . . . The observed changes reflect concomitant increases in high risk behaviour.” Increases in high-risk behavior when “safe-sex education” targeting homosexual populations is at an all-time high and tolerance for homosexual practice has never been greater? This encourages optimism? Relative to heterosexual men, homosexual and bisexual men were twice as likely to be diagnosed with genital warts, herpes or chlamydia, eight times as likely to be diagnosed with gonorrhoea, and greater than 50 times more likely to be diagnosed with HIV or syphilis.

Second, high rates of sexually transmitted disease in the male homosexual population are not just attributable to promiscuity. They arise also from the frequency of receptive anal intercourse among male homosexuals. Peterson and Hedlund attempt to deny this by referring, as an example, two substantive studies that allegedly show that receptive anal
intercourse in isolation from promiscuous practices does not significantly increase the risk of rectal cancer (p. 6). This is false information.

I was quickly able to get hold of one of the two studies cited by Peterson and Hedlund: the 2003 study by C. Piketty et al., “High Prevalence of anal human papillomavirus infection and anal cancer precursors among HIV-infected persons in the absence of anal intercourse,” Annals of Internal Medicine 138: 453-59. This study examined 50 HIV-positive heterosexual male injection drug users with no history of anal intercourse and 67 HIV-infected men who had sex with men. All of the latter group had a history of anal receptive intercourse. It is true that the study found that 46% of the heterosexual male group had anal human papillomavirus infection (a necessary cause of anal cancer), even though they had never had anal intercourse. So the study demonstrated that anal intercourse was not a necessary cause agent for acquiring HPV infection (which can lead to rectal cancer). However, the study also found that the HIV-infected men who had sex with men had an anal HPV infection rate nearly twice that of the heterosexual group (85%). The study did not dispute the findings of earlier studies that “a history of receptive anal intercourse was an important risk factor” for anal cancer. Risk factors among men who had sex with men included having more than 10 lifetime receptive anal intercourse episodes.

In addition to this study, others can be cited that discount Peterson and Hedlund’s assertion. A 2004 study of 1218 HIV-negative MSM (men who have sex with men), ages 18-89 and from four U.S. cities, found that human papillomavirus DNA “was found in the anal canal of 57% of study participants” (!); that “the prevalence of anal HPV infection did not change with age or geographic location”; and that “anal HPV infection was independently associated with receptive anal intercourse . . . and with [more than] five sex partners during the preceding months” (emphasis added). Receptive anal intercourse, with or without high numbers of sex partners, increased the risk for HPV-infection (P. V. Chin-Hong et al., “Age-specific prevalence of anal human papillomavirus infection in HIV-negative sexually active men who have sex with men: the EXPLORE study,” Journal of Infectious Diseases 190:2070-76).

Another 2004 study examined factors that may have contributed to an 160% increase of anal cancer among men and a 78% increase among women from 1973 to 2000 in the U.S. (J. R. Daling et al., “Human papillomavirus, smoking, and sexual practices in the etiology of anal cancer,” Cancer 101:270-80). A group of men (119) and women (187) who had anal cancer were compared with a control group of 1700 persons. The study did find that men and women who had 15 or more sexual partners during their lifetime significantly increased their risk of anal cancer (fivefold for the men, elevenfold for the women). But it also found that “among men who were not exclusively heterosexual and women, receptive anal intercourse was related strongly to the risk of anal cancer” (a sevenfold increase for the former, twofold increase for the latter).

In short the studies cited above indicate that receptive anal intercourse significantly increases the risk of anal cancer, whether or not in combination with high numbers of sex partners. As it happens in this case the main object of criticism was not myself but Dr.
Harrisville. In typical fashion Peterson and Hedlund chastise Harrisville as follows: “The failure to at least do balanced reporting is evidence of a deliberate attempt to use selectivity to support a negative premise about homosexuals. This is heterosexist.” Well, apparently, it is Peterson and Hedlund who are guilty of “a deliberate attempt to use selectivity,” here to support a positive premise about homosexuals. What does that make this? Immoralist?

B. Instead of responding to the studies that I cite, Peterson and Hedlund claim that the mere fact of citing any studies from Paul Cameron, a psychologist, is enough to invalidate my survey. Once more, this is nonsense. Kurt Freund, who until his death a few years ago was one of the world’s foremost researchers on pedophilia and an apologist for homosexual rights, cited an article by Cameron on pedophilia in Freund’s important article, “The Proportions of Heterosexual and Homosexual Pedophiles Among Sex Offenders Against Children,” *Journal of Sex and Marital Therapy* 18 (1992): 34-43. He wrote, without negative comment: “Furthermore, a recent literature search by Cameron, which involved 17 additional studies on sex offenders against children, listed the ratio of victimized female to male children in the majority of cases also as approximately 2:1”—confirming another study that Freund cited. The article of Cameron’s was: “Homosexual molestation of children: sexual interaction of teacher and pupil,” *Psychological Reports* 57 (1985) 1227-36. Does this citation invalidate all of Freund’s work for Peterson and Hedlund or only any results of Freund’s work (work which incidentally is widely accepted) that Peterson and Hedlund don’t like?

Cameron is clearly and strongly opposed to homosexual practice but his biases are no greater than the gay activist researchers that Peterson and Hedlund cite. And there has been a strong “out-to-get-him” movement among gay activists. I have no doubt that some of his studies can be criticized as flawed. *Most* studies on homosexuality can be severely criticized for heavy sample bias and thus flawed research methods, including most of the studies that are used to support pro-homosex ideology. This is certainly true of identical twin studies in the 1990s which recruited participants by advertising in homosexual publications for readers who knew that the aim of the research was to substantiate the theory that homosexuality was transmitted in large part through genes. These studies found a 50% concordance rate for homosexuality but, due to sample bias, are virtually worthless for assessing representative concordance rates in the general population. And yet Peterson and Hedlund cite these studies favorably and uncritically in their article (p. 7 of the “History” portion). By their reasoning, that alone is to call into question the reliability of their article.

Another area where researchers who were activists for homosexual causes have allowed their biases to misrepresent data has to do with the numerous nonrepresentative studies that claim to show that homosexual parenting is as good as heterosexual parenting. This has been noted by George Rekers, a reputable scholar in neuropsychiatry. He was recipient of the 2000 Sigmund Freud Award for Pioneering Research and is the editor of *The Handbook of Child and Adolescent Sexual Problems* and 100 scholarly journal articles. In a review of research on children raised in homosexual households Rekers
described a study by Cameron as one of the best methodological studies to date on the issue (http://www.regent.edu/acad/schlaw/lawreview/issues/v14n2.html).

In addition, I cite Cameron’s own independent research studies only twice (otherwise just his references to the research of others) and in each case it is cited in conjunction with other supportive studies. His 1983 FRI study (cited on p. 419) has been criticized for its concentration on urban areas and the relatively small sample of homosexual respondents, but this is true of many other studies; moreover, it is one of the few random studies available and many of its results correlate with the highly regarded 1992 NHSLS study. The Cameron study “Does Homosexual Activity Shorten Life?” published in Psychological Reports 83 (1998): 847-66 (cited by me on p. 472 n. 208) is frequently criticized for the methodology of comparing obituaries in periodicals, as Peterson and Hedlund do. And yet Peterson and Hedlund are silent about another study by Canadian researchers which estimated that the life expectancy at age 20 for homosexuals and bisexuals was twenty years less than for all men (R. S. Hogg et al., “Modeling the Impact of HIV Disease on Mortality in Gay and Bisexual Men,” International Journal of Epidemiology 26 [1997]: 657-61; the 20-year shortened life expectancy is based on the reasonable assumption that self-identifying homosexual and bisexual men comprise 3% of the total male population aged over twenty). All scientific research today is under the watchful eye of institutional homosexual activists and their allies—certainly this is true of the two APAs. That reality must be factored into all the reported research and critiques, including the write-up by Peterson and Hedlund. The charge about my reference to Cameron is a complete red herring designed to distract readers from the fact that Peterson and Hedlund make not one substantive or accurate criticism of the 98% of non-Cameron research that I do cite in my book.

VI. Conclusion

This assessment both of Peterson and Hedlund’s critique of my analysis of scientific research and of their knowledge and use of scientific research on homosexuality provides ample evidence of the distorted and unreliable character of their work.