

'Gay marriage' and homosexuality

some medical comments

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1. Background.

Despite the impression given by the media, the actual number of homosexuals is quite small. Essentially all surveys show the number of homosexuals to be only 1-3% of the population. The number of homosexuals living in 'common law partnerships' is even less, only 0.5% of all couples. This contrasts with 70% of all households with a married couple. The pressure for introducing same-sex marriages comes from a very small section of society.

- According to Statistics Canada, 1.3% of men and 0.7% of women considered themselves to be homosexual. (www.statcan.ca/Daily/English/040615/d040615b.htm)
- Recent studies in many different countries show that the prevalence of homosexuality is less than 3% of the population: In a US study, the prevalence of homosexuality was estimated to be 2.1% of men and 1.5% of women. (Gilman SE. Am J Public Health. 2001; 91: 933-9.) Another US study estimated the prevalence of the adult lesbian population to be 1.87% (Aaron DJ et al. J Epidemiol Community Health. 2003; 57 :207-9.) In a recent British survey, 2.8% of men were classified as homosexuals (Mercer CH et al. AIDS. 2004; 18: 1453-8). In a recent Dutch study 2.8% of men and 1.4% women had had same-sex partners. (Sandfort TG et al. Arch Gen Psychiatry. 2001; 58 :85-91.) In a New Zealand study, 2.8% of young adults were classified as homosexual or bisexual. (Fergusson DM et al. Arch Gen Psychiatry. 1999; 56 : 876-80)
- In 2001, there were just over 8.3 million families in Canada, of which nearly 6 million (70%) were married couples and 1.1 million common-law couples. The 2001 Census was the first to provide data on same-sex partnerships. A total of 34,200 couples (or 0.5% of all couples) identified themselves as same-sex common-law couples. (www.statcan.ca/Daily/English/021022/d021022a.htm)

2. Health risks of the homosexual lifestyle.

The media portrays the homosexual lifestyle and relationships as happy, healthy and stable. However, the homosexual lifestyle is associated with a large number of very serious physical and emotional health consequences. Many 'committed' homosexual relationships only last a few years. This raises doubts as to whether children raised in same-sex households are being raised in a protective environment.

A. There are very high rates of sexual promiscuity among the homosexual population with short duration of even 'committed' relationships.

- A study of homosexual men shows that more than 75% of homosexual men admitted to having sex with more than 100 different males in their lifetime: approximately 15% claimed to have had 100-249 sex partners, 17% claimed 250-499, 15% claimed 500-999 and 28% claimed more than 1,000 lifetime sexual partners. (Bell AP, Weinberg MS. Homosexualities. New York 1978).
- Promiscuity among lesbian women is less extreme, but is still higher than among heterosexual women. Many 'lesbian' women also have sex with men. Lesbian women were more than 4 times as likely to have had more than 50 lifetime male partners than heterosexual women. (Fethers K et al. Sexually transmitted infections and risk behaviours in women who have sex with women. Sexually Transmitted Infections 2000; 76: 345-9.)
- Far higher rates of promiscuity are observed even within 'committed' gay relationships than in heterosexual marriage: In Holland, male homosexual relationships last, on average, 1.5 years, and gay men have an average of eight partners a year outside of their supposedly "committed" relationships. (Xiridou M, et al. The contribution of steady and casual partnerships to the incidence of HIV infection among homosexual men in Amsterdam. AIDS. 2003; 17: 1029-38.) Gay men have sex with someone other than their primary partner in 66% of relationships within the first year, rising to 90% of relationships after five years. (Harry J. Gay Couples. New York. 1984)
- In an online survey among nearly 8,000 homosexuals, 71% of same-sex relationships lasted less than eight years. Only 9% of all same-sex relationships lasted longer than 16 years. (2003-2004 Gay & Lesbian Consumer Online Census: www.glcensus.org)
- The high rates of promiscuity are not surprising: Gay authors admit that 'gay liberation was founded ... on a sexual brotherhood of promiscuity.' (Rotello G. Sexual Ecology. New York 1998)

B. Among homosexuals, highly risky sexual practices such as anal sex are very common.

- The majority of homosexual men (60%) engage in anal sex, frequently without condom and even, if they know that they are HIV positive. (Mercer CH et al. Increasing prevalence of male homosexual partnerships and practices in Britain 1990-2000. AIDS. 2004; 18: 1453-8) As a result, a large number of diseases are associated with anal intercourse, many of which are rare or even unknown in the heterosexual population such as: anal cancer, Chlamydia trachomatis, Cryptosporidium, Giardia lamblia, Herpes simplex virus, HIV, Human papilloma virus, Isospora belli, Microsporidia, Gonorrhoea, Syphilis, Hepatitis B and C and others. (www.netdoctor.co.uk; www.gayhealthchannel.com.)
- There is a significant increase in the risk of contracting HIV when engaging in anal sex. Young homosexual men aged 15-22, who ever had anal sex had a fivefold increased risk of contracting HIV than those who never engaged in anal sex. (Valleroy L, et al. HIV prevalence and associated risks in young men who have sex with men. JAMA. 2000; 284: 198-204.)
- The term 'barebacking' refers to intentional unsafe anal sex. In a study of HIV-positive gay men, the majority of participants (84%) reported engaging in barebacking in the past three months, and 43% of the men reported recent bareback sex with a partner who most likely is not infected with HIV, therefore putting another man at risk of contracting HIV. (Haikitis PN. Intentional unsafe sex (barebacking) among HIV-positive gay men who seek sexual partners on the Internet. AIDS Care. 2003; 15: 367-78.)
- While many homosexuals are aware of HIV risk, a large number are unaware of the increased risk of contracting non-HIV STDs, many of which have serious complications or may not be curable. (K-Y lubricant and the National Lesbian and Gay Health Association survey)
- While 'always' condom use reduces the risk of contracting HIV by about 85%, Condoms, even when used 100% of the time, fail to give adequate levels of protection against many non-HIV STDs such as Syphilis, Gonorrhoea, Chlamydia, Herpes, Genital Warts and others. The only safe sex is, apart from abstinence, mutual monogamy with an uninfected partner. (Sex, Condoms, and STDs: What We Now Know. Medical Institute for Sexual Health. 2002)

C. Homosexuals have very high rates of sexually transmitted infections such as HIV which pose a major burden to the health service.

- Over 70% of all AIDS diagnoses in Canada in adults over the age of 15 up to June 2004 were in homosexual men (13,019 out of 19,238). 60% of all positive HIV tests are found in homosexual men. This contrasts with just over 15% of all positive HIV tests which are due to heterosexual contact. (Public Health Agency of Canada. HIV and AIDS in Canada. November 2004).
- The recently observed dramatic increases in syphilis in many large cities such as Los Angeles, San Francisco, but also in London and Manchester, UK are in the majority observed in homosexual men. (Centers for Disease Control and Prevention (CDC). Trends in primary and secondary syphilis and HIV infections in men who have sex with men. MMWR 2004; 53: 575-8. and Nicoll A. Are trends in HIV, gonorrhoea, and syphilis worsening in western Europe? BMJ 2002; 324:1324-7.)

D. There are increased rates of mental ill health among the homosexual population compared to the general population. Many studies show much higher rates of psychiatric illness, such as depression, suicide attempts and drug abuse among homosexuals than among the general population. The homosexual lifestyle is associated with a shortened life expectancy of up to 20 years.

- In a New Zealand study, data were gathered on a range of psychiatric disorders among gay, lesbian, and bisexual young people. At the age of 21, homosexuals/bisexuals were at fourfold increased risks of major depression and conduct disorder, fivefold increased risk of nicotine dependence, twofold increased risk of other substance misuse or addiction and six times more likely to have attempted suicide. (Fergusson DM et al. Is sexual orientation related to mental health problems and suicidality in young people? Arch Gen Psychiatry. 1999; 56: 876-80.)
- In a recent US study of the mental health of homosexuals, it was found that gay/bisexual men had a more than 3-fold increased risk of major depression and a five-fold increased risk of panic disorder. They were three times as likely to rate their mental health as only 'fair' or 'poor' and to experience high levels of distress. Gay/bisexual women had a nearly four-fold increased risk of general anxiety disorder and both groups were more than three times as likely than the general population to require treatment in a mental health setting. (Cochran S. et al. Prevalence of mental disorders, psychological distress, and mental health services use among lesbian, gay, and bisexual adults in the United States. J Consult Clin Psychol. 2003; 71 :53-61.)
- It is claimed, that the high rates of mental illness among homosexuals are the result of 'homophobia'. However, even in the Netherlands, which has been far more tolerant to same-sex relationships and which has recently legalised same-sex marriages, high levels of psychiatric illness, including major depression, bipolar disorder ('manic depression'), agoraphobia, obsessive compulsive disorder and drug addiction are found. (Sandfort TG, et al. Same-sex sexual behavior and psychiatric disorders: findings from the Netherlands Mental Health Survey and Incidence Study (NEMESIS). Arch Gen Psychiatry. 2001; 58 :85-91.)
- Furthermore, if 'homophobia' and prejudices were the cause of the high rates of psychiatric disorders and suicide attempts among homosexuals, one would similarly expect to find higher rates of suicide attempts and suicide among ethnic minorities exposed to racism. However, this is not usually the case.
- In a Vancouver study, life expectancy at age 20 years for gay and bisexual men is 8 to 20 years less than for all men. If the same pattern of mortality were to continue, it is estimated that nearly half of gay and bisexual men currently aged 20 years will not reach their 65th birthday. (Hogg RS et al. Modelling the impact of HIV disease on mortality in gay and bisexual men. International Journal of Epidemiology. 1997; 26:657-61)

3. Homosexuality and pedophilia.

Any attempts to legalise gay marriage should be aware of the link between homosexuality and pedophilia. While the majority of homosexuals are not involved in pedophilia, it is of grave concern that there is a disproportionately greater number of homosexuals among pedophiles and an overlap between the gay movement and the movement to make pedophilia acceptable

- One well known historic example on the link between homosexuality and pedophilia is found in ancient Greece. Greek mythology is saturated with stories of pedophilia and ancient Greek literature praises pedophilia. The age group of boys that were used for 'sexual pleasure' was probably in the range of 12-17. Male prostitution was very common with brothels in which boys and young men were available. There is evidence for an extensive trade in boys. (Churchill W. Homosexual Behavior among Males. Hawthorn. New York. 1967)
- There are links between pedophilia and homosexuality. The political scientist Prof. Mirkin wrote in a paper that: *'pedophile organizations were originally a part of the gay/lesbian coalition...'* (Mirkin H. The pattern of sexual politics: feminism, homosexuality and pedophilia. Journal of Homosexuality 1999; 37: 1-24.) There is an **overlap between the 'gay movement' and the movement to make pedophilia acceptable** through organisations such as the North American Man/Boy Love Association (NAMBLA), as **admitted by David Thorstad, Co-founder of NAMBLA writing in the Journal of Homosexuality.** (Thorstad D. Man/boy love and the American gay movement. Journal of Homosexuality. 1990; 20 : 251-74)
- **the number of homosexuals in essentially all surveys is less than 3%.** (Statistics Canada found only 1% of the population who described themselves as homosexual.) However, **the percentage of homosexuals among pedophiles is 25%.** (Blanchard R et al. Fraternal birth order and sexual orientation in pedophiles. Archives of Sexual Behavior 2000; 29: 463-78.) Therefore, **the prevalence of pedophilia among homosexuals is about 10-25 times higher** than one would expect if the proportion of pedophiles were evenly distributed within the (hetero- and homosexual) populations.

4. 'Gay marriage'

Gay activists claim that there is no difference between children raised in a homosexual as opposed to a heterosexual household. However, essentially all studies that show that there is no difference have been criticised because of poor research quality. Despite the shortcomings, the studies seem to suggest that children raised in same-sex parents may be more sexually promiscuous and more likely to become homosexuals.

- In a review of all the studies that purport to find no difference between children raised in families by same-sex parents and parents of different sex, major methodological flaws have been noted. For example, the studies have very small sample sizes, biased sample selection, or lack of control groups. (P. Morgan, Children as Trophies? Christian Institute. Newcastle upon Tyne, 2002)
- Despite the limitations of the studies of same-sex parenting some differences are found. **Children raised in same-sex parents are more likely to become sexually promiscuous and are more likely to become homosexual themselves.** (Riggs SC. Coparent or Second-Parent Adoption by Same-Sex Parents. (letter) Pediatrics 2002; 109: 1193-4.)
- However, the main concern remains the inherent instability of same-sex marriages. In the above mentioned Dutch survey, the average length of a 'committed' homosexual partnership was only 1.5 years. In the mentioned survey of nearly 8,000 gays, 71% of relationships did not last 8 years. Furthermore, violence among homosexual partnerships is two to three times as common as in heterosexual relationships. Such an environment does not provide the stability required for raising children. Former homosexual Stephen Bennett who is married to his wife and has two children states: **'Granting homosexuals the right to marry or adopt children is deliberately creating dysfunctional families.'**

5. Biological evidence regarding gender development.

Despite all the impression given by the media, homosexuality is neither an entirely innate condition nor is it unchangeable. The so-called 'gay gene' has never been found. There are studies that show it is possible to change sexual orientation from predominantly homosexual to predominantly heterosexual orientation.

- A recent review by authors sympathetic to the gay movement shows clearly that **homosexual development cannot be only determined by genes.** Evidence from biology shows clearly that **gays are not simply born that way.** (Environmental influences play a significant role in the development of gender identity and sexual behavior. (Bailey JM. Biological perspectives on sexual orientation. In: Garnets LD and Kimmel DC: Psychological perspectives on lesbian, gay, and bisexual experiences. Columbia University Press. New York. 2003)
- There is no convincing evidence for a 'gay gene'. Indeed, **if there were a 'gay gene' those who carry it would probably be at a disadvantage in the natural selection process of evolution: 'If there was a 'gay gene' this gene would cause a significant problem: homosexuality is associated with low fertility, indeed if a homosexual has only sex with same-sex persons he will have no offspring.'** (Bailey JM. Biological perspectives on sexual orientation. 2003)
- One way of finding out whether a condition is genetically determined is to **examine the behavior of identical twins** (who have the same genetic material) and comparing them with non-identical twins. It is assumed, that twins grow up in the same environment. There have been **several studies investigating whether the identical twin brothers of homosexual men are also homosexuals.** Concordance **(both identical twins being homosexual) was found in only 25-50% of identical twin pairs.** Genes therefore cannot entirely explain homosexual orientation and behaviour. (Pillard RC and Weinrich JD. Evidence of

familial nature of male homosexuality . Archives of General Psychiatry. 1986; 42; 808-12. King M and McDonald E. Homosexuals who are twins. A study of 46 probands. British Journal of Psychiatry. 1992; 160: 407-9.)

- Recently, a study was published by Professor Spitzer, a prominent psychiatrist. He is viewed as a historic champion of gay activism by playing a key role in removing homosexuality from the psychiatric manual of mental disorders in 1973. In his study, he examined whether a predominantly homosexual orientation will, in some individuals, respond to therapy. He examined 200 respondents of both genders who reported changes from homosexual to heterosexual orientation lasting 5 years or more. He writes: *'Although initially skeptical, in the course of the study, the author became convinced of the possibility of change in some gay men and lesbians.'* Although examples of "complete" change in orientation were not common, the majority of participants did report change from a predominantly or exclusively homosexual orientation before therapy to a predominantly or exclusively heterosexual orientation in the past year as a result of reparative therapy. These results would seem to contradict the position statements of the major mental health organizations in the United States, which claim there is no scientific basis for believing psychotherapy effective in addressing same-sex attraction. (Spitzer RL. Can some gay men and lesbians change their sexual orientation? 200 participants reporting a change from homosexual to heterosexual orientation. Arch Sex Behav. 2003; 32: 403-17; discussion 419-72. – further evidence see www.narth.com)

6. Benefits of traditional marriage.

There are significant benefits from (heterosexual) marriage for individual and society. Heterosexually married couples are, on average, healthier, have fewer psychological problems and live longer than cohabiting or single individuals. Government policy therefore should be to support and strengthen heterosexual marriage.

- In reviews by Professor Oswald, Professor of Economics at Warwick University, UK it was found that marriage reduces mortality. The excess mortality of men who are not married is similar to the excess mortality by smoking. Marriage has a much more important effect on longevity than income does. For men, the effect is positive and substantial. It almost exactly offsets the large (negative) consequences of smoking. For women, the effect is approximately half the size of the smoking effect.
- Marriage is associated with greater happiness, less depression, less alcohol abuse and less smoking. Marriage gives a beneficial effect in terms of reducing alcohol abuse especially for men and reducing depression for both men and women.
- Health benefits of marriage appear to be limited to marriage. Cohabitation does not confer the same degree of benefit than marriage. Formal marriage itself seems to matter. In the few studies that compare marriage and cohabitation, the results tend to show a beneficial effect from being married. (Gardner J, Oswald A, Is it Money or Marriage that Keeps People Alive? August 2002. Wilson CM and Oswald AJ: How Does Marriage Affect Physical and Psychological Health? A Survey of the Longitudinal Evidence. (January 2002; both papers available on Prof Oswald's website – see 'further reading')

7. Adverse effects of family breakdown.

There is a wealth of evidence linking family breakdown with many adverse health outcomes for children and society as a whole. Government policy therefore should be to strengthen the marriage-based family of husband and wife. 'Gay marriages', with their inherent instability, will contribute to the many adverse effects family breakdown has on children and on society as a whole.

- At the root of many of the problems we see in children and young adults - such as emotional and behavioral difficulties, poor school performance, substance misuse, precocious teenage sexuality including teenage pregnancy and juvenile delinquency - is the dramatic increase in family breakup and 'relationship turnover' of parents, adversely affecting their children (For an overview see: Rebecca O'Neill. Experiments in living. CIVITAS. 2002)
- As a result of family breakdown, children have on average more ill health including higher mortality, emotional problems (including a higher suicide rate).
- Children from broken families have poorer school performance including poorer performance in maths, reading and writing.
- Children from broken families are more likely to live in poverty. As a result of family breakdown, many single parent families live in poverty.
- Children from broken families are also more likely to have problems with substance misuse and poor sexual health including teenage pregnancy.
- Furthermore, children from broken homes are more likely to be engaging in criminal activity and are disproportionately over-represented in the prison population.
- In a study of more than 170 US cities, a clear link between divorce rate and crime was found. Low rates of divorce were associated with reduced crime rates. (Sampson RJ, Crime in Cities. Tonry & Morris eds., Crime and Justice, Chicago 1992)

Further reading

Health risks of gay sex: www.corporateresourcecouncil.org/white_papers/Health_Risks.pdf

Effects of family breakdown on children and society by CIVITAS, London, UK: www.civitas.org.uk/pdf/Experiments.pdf

Marriage research (by Prof Andrew Oswald) : www2.warwick.ac.uk/fac/soc/economics/staff/faculty/oswald/

Therapy of homosexual orientation: www.narth.com (National Association for Research and Therapy of Homosexuality).