

## Hiding Truth From School Kids : "It's Elementary," Revisited

*A gay activist changes sexual identity— but why aren't children allowed to know?*

by Warren Throckmorton Ph.D.

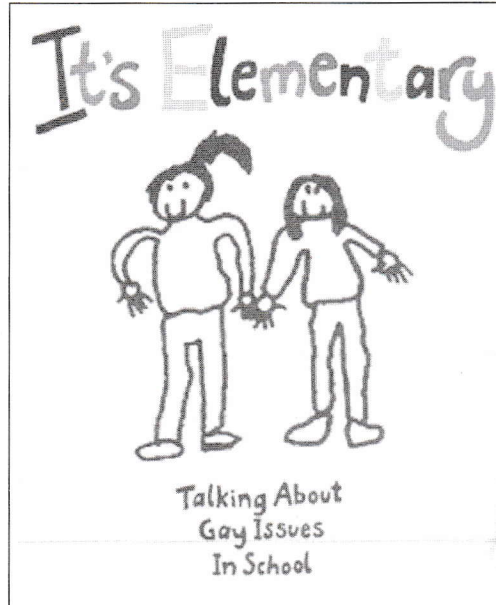
"It's Elementary: Talking About Gay Issues in School" is an award winning video that aims to give teachers ideas about how to discuss gay issues in schools. Released in 1996 by producers Helen Cohen and Oscar winner Debra Chasnoff, this video is still quite controversial, in part because it shows elementary school children talking about homosexuality in public schools.

In one of the segments, there is a young gay man answering questions from middle school students about what it is like to be gay. The film is still being shown in schools but there is a little known fact about that young man that today's viewers don't know. The young man in the video is no longer gay. And that is something producers Chasnoff and Cohen as well as at least one school committee in Maryland don't want you to know.

Noe' Gutierrez, the young man that told his story in the video, came out as gay at 16 but then came out again as ex-gay at 24. On "It's Elementary," he was filmed speaking to San Francisco area middle school on behalf of Community United Against Violence. Mr. Gutierrez was quite involved in gay advocacy and frequently spoke publicly on this topic.

However, about six years ago Mr. Gutierrez went through a period of re-evaluation and change. The end result was his change of sexual identity from gay to straight. Without fanfare, Mr. Gutierrez went through a profound experience of transformation and after a while of working through his experience began telling others of his change.

When ex-gay spokesman John Paulk went into Mr. P's gay bar in Washington D.C. several years ago, the country knew about it. Even though Mr. Paulk did not fall sexually and is still happily married to former lesbian Anne Paulk, the media turned his lapse of judgment into a referendum on ex-gay ministries. When Mr. Gutierrez came out a second time as ex-gay, no one wrote about it, even though in the eyes of many people, what he did was a nearly impossible accomplishment. Amazingly, certain people want his story to stay unknown.



For instance, take filmmakers Chasnoff and Cohen. When I began putting together plans to produce a video about gay-to-straight change, I asked Ms. Chasnoff for permission to use the clip of Mr. Gutierrez talking to the middle school students. She refused without giving reason. I suppose she may feel that others knowing of his change would undermine her project.

Another group that does not want to disclose Mr. Gutierrez's story is the Montgomery County (Md.) Citizen's Advisory Committee for Family Life and Human Development. "It's Elementary" is a video resource used in the Montgomery County school district.

However, Mr. Gutierrez wrote a letter requesting that if "It's Elementary" is used, students should be made aware that he is no longer gay.

Seems fair enough. He wants the rest of the story known and this seems a fair way to do it. Simply tell the students or teachers that Mr. Gutierrez is no longer gay and show the film. The objective of tolerance for all people would seem to be enhanced by such a procedure. However, the school committee refused to approve the letter as a resource for teachers to use with the film. Because of this action, it is unlikely that the school board in Montgomery County will ever know that the letter from Mr. Gutierrez exists.

Thus, students or teachers viewing this film would have no idea that one of the speakers describing what it is like to be gay is no longer gay. Why withhold this information? Why would anyone want to hide the facts from teachers and students that people change?

Whatever the reasons for the reluctance of the school committee and filmmakers to allow the reality of change to be known, Mr. Gutierrez has not remained silent. He has joined an ever growing group of former homosexuals who are telling their stories. In fact, Noe' Gutierrez and four other ex-gays tell their stories on the documentary I mentioned above. If schools want their teachers to be prepared to discuss gay issues in schools, it's elementary that all the facts come out. ■



"It is unclear why our results are so discrepant from Hamer's original study. Because our study was larger than that of Hamer's et al, we certainly had adequate power to detect a genetic effect as large as reported in that study. Nonetheless, our data do not support the presence of a gene of large effect influencing sexual orientation..."

Simon LeVay, a neuroanatomist at The Salk Institute in San Diego, founded the Institute for Gay and Lesbian Education in San Francisco after researching and publishing the study of hypothalamic structures in men most widely-cited as confirming innate brain differences between homosexuals and heterosexuals, as he himself initially argued. He later acknowledged:

"It's important to stress what I didn't find. I did not prove that homosexuality is genetic, or find a genetic cause for being gay. I didn't show that gay men are born that way, the most common mistake people make in interpreting my work. Nor did I locate a gay center in the brain."

Furthermore:

"Since I looked at adult brains, we don't know if the differences I found were there at birth, or if they appeared later."

Also pertinent to the present debate is his observation that: "...people who think that gays and lesbians are born that way are also more likely to support gay rights."

Dr. Mark Breedlove at the University of California at Berkeley, referring to his own research: "[My] findings give us proof for what we theoretically know to be the case - that sexual experience can alter the structure of the brain, just as genes can alter it. [I]t is possible that differences in sexual behavior cause (rather than are caused) by differences in the brain."

Prominent research teams Byne & Parsons, and Friedman & Downey, both concluded that there was no evidence to support a biologic theory, but rather that homosexuality could be best explained by an alternative model where "temperamental and personality traits interact with the familial and social milieu as the individual's sexuality emerges."

Richard Pillard is the coauthor of the two major twin studies on homosexuality most often cited as providing family evidence for homosexuality being inherited. He noted to an interviewer that he, his brother, and his sister are all homosexual and that one of his daughters from a now-failed marriage is bisexual. He speculated that his father was also homosexual. The interviewer, Chandler Burr, comments re. Pillard: "Many of the scientists who have been studying homosexuality are gay, as am I." The inter-

view is part of a book Burr wrote that purports to demonstrate that virtually all reputable scientists consider homosexuality genetic. This is certainly what Pillard both wanted and expected to confirm by his research:

"These studies were designed to detect heritable variation, and if it was present, to counter the prevalent belief that sexual orientation is largely the product of family interactions and the social environment"

But that is not what he found. Rather, he concluded:

"Although male and female homosexuality appear to be at least somewhat heritable, environment must also be of considerable importance in their origins."

### **Claim 2. That homosexuality is an immutable state of an individual.**

The 1973 decision to delete homosexuality from the diagnostic manual of the American Psychiatric Association has had a chilling effect on scientific objectivity with respect to homosexuality and on both public and professional attitudes concerning its permanence as an individual characteristic. The decision tended to confirm the sentiment that, since homosexuality has been voted out as a formal "disorder," it need not, cannot and should not be "treated," regardless of the principle that in a free society individuals should be free to pursue happiness each according to his own lights, consonant with the well-being of others.

*But the American Psychiatric Association, like most other professional-practitioner associations, is not a scientific organization. It is a professional guild and as such, amenable to political influence in ways that science per se must not allow itself to be. Thus, the decision to de-list homosexuality was not made based on scientific evidence as is widely claimed. As Simon LeVay (cited above) acknowledges, "Gay activism was clearly the force that propelled the American Psychiatric Association to declassify homosexuality."*

But of far greater import is the fact that whether it is deemed a "disorder" or not, it is undesirable to many, and susceptible to change. The evidence for this fact should not be obscured by the false assumption that homosexuality is either innate and unchangeable, or a "lifestyle choice" and changeable at will. It is neither: It is most often a deeply-embedded condition that develops over many years, beginning long before the development of moral and self-awareness, and is genuinely experienced by the individual as though it was never absent in one form or another. It is, in other words, similar to most human characteristics, and shares with them the typical possibilities for, and difficulties in, achieving sustained change.

A review of the research over many years demonstrates a consistent 30- 52% success rate in the treatment of unwanted homosexual attraction. Masters and Johnson reported a



65% success rate after a five-year follow-up. Other professionals report success rates ranging from 30% to 70%.

Dr. Lisa Diamond, a professor at the University of Utah, concludes that, "Sexual identity is far from fixed in women who aren't exclusively heterosexual."

Dr. Robert Spitzer, the prominent psychiatrist and researcher at Columbia University has been the chief architect of the American Psychiatric Association's diagnostic manual and he was the chief decision-maker in the 1973 removal of homosexuality from the diagnostic manual. He considers himself a gay-affirmative psychiatrist, and a long time supporter of gay rights. He has long been convinced that homosexuality is neither a disorder nor changeable. Because of the increasingly heated debate over the latter point within the professional community, Spitzer decided to conduct his own study of the matter. He concluded:

"I'm convinced from the people I have interviewed, that for many of them, they have made substantial changes toward becoming heterosexual...I think that's news...I came to this study skeptical. I now claim that these changes can be sustained."

When he presented his results to the Gay and Lesbian committees of the APA, anticipating a scientific debate, he was shocked to be met with intense pressure to withhold his findings for political reasons. Dr. Spitzer has subsequently received considerable "hate mail" and complaints from his colleagues because of his research. Douglas C. Haldeman, Ph.D., an independent practitioner in Seattle, WA, is a prominent gay-affirmative theorist. He comments, "From the perspective of gay theorists and activists. . . the question of conversion therapy's efficacy, or lack thereof, is irrelevant. It has been seen as a social phenomenon, one that is driven by anti-gay prejudice in society..."

Regarding change and the right to treatment, lesbian activist Camille Paglia states the following, in terms considerably sharper than most of us feel comfortable with:

"Is the gay identity so fragile that it cannot bear the thought that some people may not wish to be gay? Sexuality is highly fluid, and reversals are theoretically possible. However, habit is refractory, once the sensory pathways have been blazed and deepened by repetition - a phenomenon obvious in the struggle with obesity, smoking, alcoholism or drug addiction...helping gays to learn how to function heterosexually, if they wish, is a perfectly worthy aim."

Furthermore, just as locking onto a "choice versus genetic" dichotomy obscures reality, so, too, does locking onto "unchangeable versus therapeutic change." For it is also the case, well-documented but unobserved and unremarked upon, that the *majority* of "homosexuals" become

"heterosexual" spontaneously, without therapy.

The scientific evidence is as follows:

The most comprehensive, most recent and most accurate study of sexuality, the National Health and Social Life Survey (NHSLs), was completed in 1994 by a large research team from the University of Chicago and funded by almost every large government agency and NGO with an interest in the AIDS epidemic. They studied every aspect of sexuality, but among their findings is the following, which I'm going to quote for you directly:

"7.1 [to as much as 9.1] percent of the men [we studied, more than 1,500] had at least one same-gender partner since puberty. ... [But] almost 4 percent of the men [we studied] had sex with another male before turning eighteen but not after. These men. . . constitute 42 percent of the total number of men who report ever having a same gender experience."

Let me put this in context: Roughly ten out of every 100 men have had sex with another man at some time - the origin of the 10% gay myth. Most of these will have identified themselves as gay before turning eighteen and will have acted on it. But by age 18, a full half of them no longer identify themselves as gay and will never again have a male sexual partner. And this is not a population of people selected because they went into therapy; it's just the general population. Furthermore, by age twenty-five, the percentage of gay identified men drops to 2.8%. **This means that without any intervention whatsoever, three out of four boys who think they're gay at age 16 aren't by 25.**

**Claim 3. The only disadvantages of homosexuality are those caused by social disapproval and discrimination.**

To mistakenly support three out of four gay identified men in their identification with homosexuality is not a benign mistake. Bailey (of the twin study) recently examined the question as to whether homosexuality is associated with a higher level of psychopathology. He concluded:

"Homosexuality represents a deviation from normal development and is associated with other such deviations that may lead to mental illness.. [or, another possibility]... that increased psychopathology among homosexual people is a consequence of lifestyle differences associated with sexual orientation."

He specifically cited "behavioral risk factors associated with male homosexuality such as receptive anal sex and promiscuity." He noted that it would be a shame if "sociopolitical concerns prevented researchers from conscientious consideration of any reasonable hypothesis."

The specific concern in supporting young men in a gay identification is that innumerable studies from major centers around the US and elsewhere note that a twenty-year-old man who identified himself as gay carries 30% (or



greater) risk of being HIV positive or dead of AIDS by age 30. A recent Canadian study published concluded that in urban centers gay male identification is associated with a life expectancy comparable to that in Canada in the 1870's.

**Claim 4. A society composed of same-sex couples raising children in family-like units will differ from a society composed of traditional family units in no undesirable ways.**

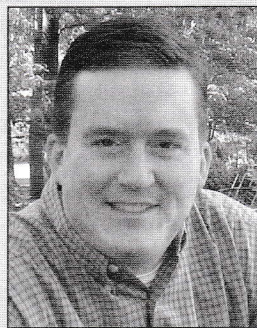
There has recently been an attempt to demonstrate that raising children in a same-sex household has no ill effect. These studies are few in number, none have ever looked at those areas where difficulties would be expected and one of the most repeatedly cited researchers was excoriated by the court for her testimony when she refused to turn over

her research notes to the court even at the urging of the ACLU attorneys for whom she was testifying.

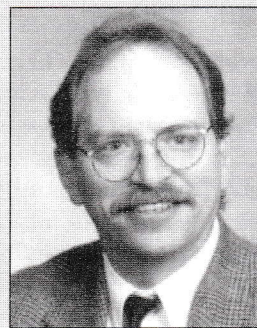
What is known, from decades of research on family structure, studying literally thousands of children, is that every departure from the traditional, stable, mother-father family has severe detrimental effects upon children; and these effects persist not only into adulthood but into the next generation as well.

In short, the central problem with mother-mother or father-father families is that they deliberately institute, and intend to keep in place indefinitely, a family structure known to be deficient in being obligatorily and permanently either fatherless or motherless. ■

### APA Symposium Examines Alternatives to Claiming a Gay Identity



*Mark Yarhouse, Ph.D.*



*Warren Throckmorton, Ph.D.*

Dr. Mark Yarhouse, Associate Professor of Psychology at Regent University, is scheduled to chair a symposium at the 2004 annual conference of the American Psychological Association titled, "Sexual Identity Confusion During Adolescence: Religious, Diversity and Professional issues."

The symposium brings together different perspectives on sexual identity confusion during adolescence and young adulthood.

Two participants, Dr. A. Lee Beckstead and Marybeth Rayes, are presenting papers from a gay-affirmative perspective, while Dr. Yarhouse and Dr. Warren Throckmorton are giving papers from an alternative perspective.

Dr. Yarhouse's paper is titled, "An Inclusive Approach to Navigating Sexual Identity Confusion in Adolescence" and Dr. Throckmorton's paper is titled, "Identity Confusion During Young Adulthood: Working with Conservative Religious Clients."

The APA conference (which had not yet taken place at the time this *Bulletin* issue went to press) is scheduled for in Honolulu, Hawaii, July 28-July 31.