

Caring for Gay and Lesbian Youth in a Pediatric Practice:

"Safe Office Kit" Provided for Pediatricians

By Daniel Byrne, PhD

The 2002 Annual Meeting of the Pediatric Academic Societies was held at the Baltimore Convention Center on May 4-7, 2002. I attended this meeting, which hosted about 4000 pediatricians and pediatric researchers who had convened to attend the professional education workshops.

The American Academy of Pediatrics recently sparked widespread controversy when it voted in a new policy to support gay adoptions. Emboldened by that success, gay activists from the University of Massachusetts and Tufts University School of Medicine led a workshop at the pediatric convention to introduce doctors to their newly developed "Safe Office Kit."

Physicians at the workshop were provided with packets which contained an AAP brochure perpetuating a discredited Kinsey myth. Billed as "facts" for teens and their parents, the brochure states that "Some estimates say that about 10% of the population is gay." (Not even close—try 1% -3%!)

The workshop leaders briefly discussed the recent controversy over the AAP statement. A gay pediatrician from Hawaii expressed concern that the AAP might reverse its policy, but Dr. Martin Greenberg, who was familiar with those individuals who had developed the policy, stated that a reversal was unlikely. However, he indicated that the AAP had received more than 200 emails and letters, most expressing disapproval of the new policy.

A panel was offered which included a 17-year-old "gay" teenager, the boy's mother, a lesbian college student and lesbian mother who is also an attorney. The lesbian attorney indicated that the recent AAP statement was proving useful in her legal briefs. The 17-year-old boy said that he "came out" as gay at the age of twelve! All blamed the problems of gays and lesbians on homophobia and heterosexism.

One pediatrician revealed (without apparent concern) that his 7th grade son "came out of the closet" at school, publicly proclaiming to his teacher and classmates that he was bisexual.

Adolescence is time of instability and confusion. I know of no adolescent who knows who he or she is. Yet research literature is clear on the matter of early homosexual self-labeling: the risk of suicide decreases by 20% for each year that a young person delays homosexual or bisexual self-labeling.

The workshop leaders offered extensive recommendations for creating a "safe" office place for gay, lesbian, bisexual, transgendered and questioning youth which included the

posting of rainbow and "safe space" stickers and the displaying of posters, brochures, and magazines in the waiting room to demonstrate the doctor's personal support for gay issues.

The workshop leaders warned that some staff and parents might object to such obvious advocacy, but their objections could be effectively neutralized if sexual orientation was included in the same category as advocacy for two, much less controversial subjects—race and gender equality.

The workshop ended with suggestions of ways the pediatricians could further the acceptance of homosexuality in their communities. Seizing upon a tragedy in the community is one highly effective means to galvanize public support, they agreed.

I believe the recent AAP statement supporting gay adoption was the result of vigorous gay activism at work within the association. It was more a political position than a scientific one, because AAP's policy statement does not reflect the scientific literature—which demonstrates that non-heterosexual parenting places children at risk for gender confusion and a host of other problems.

Most disconcerting was the apparent unwillingness of AAP to thoughtfully consider the objections to their policy from their own constituents. Why not put the new policy to a vote of the membership? Most disturbing of all was the inaccurate information presented in the workshop—ranging from the discredited Kinsey myth being offered as fact, to the statement that homosexual attraction is immutable.

The AAP has placed itself in a precarious position: *it purports to heal*, and yet encouraging early self-labeling as "gay" by teenage patients may be directly responsible for early sexual experimentation and the suicide of some young people.

In the future, the AAP would be best advised to listen to its members and obtain their input prior to issuing policy statements. And such workshops as this one would be best labeled political activism—not science. ■

The following societies participated at the AAP convention: The American Academy of Pediatrics, American Society of Pediatric Hematology/Oncology, American Society of Pediatric Nephrology, Association of Pediatric Program Directors, Lawson Wilkins Pediatric Endocrine Society, North American Society for Pediatric Gastroenterology, Hepatology and Nutrition, Pediatric Infectious Diseases Society, Society for Developmental Pediatrics.