

## Letter to the Seattle School District

*Parents and Teachers for Responsible Schools* (see article on previous page) composed a letter to the General Counsel of the Seattle School District. In that letter, excerpted below, the group details its attempts to counter the district's gay-affirming policies. They state:

1. Inaccurate information is given concerning the number of people who are or may be considered homosexual. The overwhelming weight of current and reliable demographic and survey evidence indicates that about 2% of the population will engage in homosexual acts for any significant period of their life span. (Materials from SMAC, SSC, GLSEN, and FLASH.)

Brain researcher Dr. Simon LeVay, himself a gay man, stated in his book *Queer Science*, published by MIT in 1996:

Recent surveys in the United States have...come up with prevalence figures well below 10%. Most studies agree that about 2% of the population have had at least one homosexual experience in the previous few years. In a large survey conducted by the National Opinion Research Center in 1992, 2.8% of men and 1.4% of women identified as "homosexual" or "bisexual." Another 3.2% of men and 4.1% of women identified as "heterosexual," but acknowledged some degree of same-sex attraction. The highest percentages reported in recent random-sample studies come from a market research firm, Yankelovich Partners, Inc., which stated that 5.7% of their respondents identified as "gay/homosexual/lesbian" (Page 62).

2. Inaccurate information is presented about the causation of homosexual desire. District materials and programs are biased in favor of the position that homosexual desire is a biologic or genetic aspect of a person's character that cannot and should not be changed. There is, however, a general consensus among members of the scientific community, including those who conducted many of the studies incorrectly reported as finding genetic or biologic causation, that there is no scientific evidence to support such a contention. The best overall summary of most respected researchers is that homosexuality is most likely due to a combination of *social, biological, and psychological factors*.

Says Dr. Simon LeVay in *Queer Science*:

At this point, the most widely held opinion [on causation of homosexuality] is that multiple factors play a role. In 1988, PFLAG member Tinkle Hake surveyed a number of well-known figures in the field about their views on homosexuality. She asked: "Many observers believe that a person's sexual orientation is determined by one of more of the following factors: genetic, hormonal, psychological, or social. Based on today's state-of-the-art-science, what is your opinion?"

The answers included the following: "all of the above in concert" (Alan Bell), "all of these variables" (Richard Green), "multiple factors" (Gilbert Herdt), "a combination of all the factors named" (Evelyn Hooker), "all of these factors" (Judd Marmor), "a combination of causes" (Richard Pillard), "possibly genetic and hormonal, but juvenile sexual rehearsal play is particularly important" (John Money), and "genetic and hormonal factors, and perhaps also some early childhood experiences" (James Weinrich). (Page 273.)

3. Important information concerning the health risks of homosexual conduct is not being presented in the schools' HIV/AIDS curricula. HIV/AIDS is only a part of the risk incurred by male homosexual activity. The life expectancy of homosexual men is roughly 30% less than for heterosexual men, and as little as 7% of that difference may be accounted for by AIDS.

Further, incomplete information is given concerning the risk of AIDS. According to Seattle County Public Health records, more than 80% of all new AIDS cases are among men who engage in homosexual sex. There is abundant and growing evidence that "safe sex" (either in practice or in theory) does not work. In his report published in *Clinical Psychiatric News*, October 1994, p.5., "Psychological Factors Generate HIV Resurgence in Young Gay Men," E.L. Goldman estimates that by age the age of thirty, 30% of gay men will be HIV-positive or death of AIDS. Many think this estimate is conservative.

Gay activist Gabriel Rotello in *Sexual Ecology—AIDS and the Destiny of Gay Men*, paints a chilling picture of homosexual culture plagued indefinitely by a continuing crisis of AIDS and other diseases that disproportionately affect homosexual men. Mr. Rotello bluntly proclaims that "safe sex" cannot solve the problem.

Additionally, SMAC, SSC, GLSEN and the District endorse the position that increased suicidal ideation and higher rate of successful suicide attempts by homosexual youth result from "homophobia." This assumption is forwarded as a compelling justification for affirming homosexuality in the schools. In response to concerns voiced at a recent Greater Seattle Business Association meeting, Supt. Stanford even promised to enlist the help of school principals in identifying "homosexual" eight-and nine-year-olds so they could be "affirmed."

Studies by homosexual researcher Gary Remafedi have shown, however, that early self-labeling as homosexual or bisexual is one of the three top risk factors for homosexual teen suicide attempts. The risk of suicide decreases by 80% for each year that a young person delays homosexual or bisexual self-labeling (*Pediatrics* 1991:87:869-857). Many other individuals within the gay community have written about the harm

caused to young people when they “come out” at a young age. Many youngsters who are thought to be homosexually-oriented are in fact experiencing transitory same-sex attractions for various emotional reasons. A 1992 study by Dr. Remafedi also published in *Pediatrics*, reported that 25.9% of 12-year-olds are uncertain if they are heterosexual or homosexual. This is significant because *only about 2%* of them will identify as homosexual in adulthood. This means that **23.9% may erroneously be identified as homosexual** if they are affirmed as gay at age 12.

If they are introduced to a homosexual sexual habit pattern while in this transitional stage, they may eventually find themselves confirmed in that behavior pattern—a behavior they might not have adopted on their own, but to which they have effectively been turned, often with devastating personal and social consequences.

4. Although there is no credible evidence that homosexual desire is genetically determined or immutable, and despite the existence of tens of thousands of people living today who have demonstrably affected or changed their sexual orientation through various therapeutic treatments, the District *does not provide any information to young people or their families concerning the potential for change*. Materials presented at the SMAC teacher training contained several references to articles claiming that homosexuality *cannot be changed*. In light of the serious health and other consequences risked by encouraging children to affirm same-sex desire, this omission is particularly unconscionable.

GLSEN also emphatically promotes the notion that *to attempt to change is psychologically harmful and wrong*. See for example, the GLSEN - Library School tools 032 Article located on the GLSEN Internet web site.

The National Association for Research and Therapy of Homosexuality recently surveyed over 850 individuals that had experienced some change in their sexual orientation as a result of counseling, and 200 therapists and counselors who have worked with such individuals. The survey found that before counseling or therapy, 68% of the

individuals perceived themselves as exclusively or almost exclusively homosexual, with another 22% stating they were more homosexual than heterosexual. After treatment, only 13% perceived themselves as exclusively or almost exclusively homosexual, and 33% described themselves as exclusively or almost exclusively heterosexual.

5. Another area that potentially implicates violations of the Controversial Issue policy is the presentation of information concerning same-sex marriage and parenting. The issue of whether alternative family structures should be accorded the same legal and social status as traditional families is also very controversial, and *should not be presented in the public schools without the presentation of conflicting opinions*.

There is voluminous empirical and clinical data demonstrating that married mother and father families are of significantly greater benefit to their members and to society than other family structures. *Love is demonstrably not enough to make a family*.

While non-traditional families should certainly not be excluded from the school community or treated unkindly, it is a disservice to the children you teach, and to the community of which they will become adult members, to glorify alternative families while failing to teach children of the proven advantages and benefits of “traditional” marriage and parenting.

Finally, I want to reiterate PTRS’ shared concern about tolerance for harassment of school children and staff for any reason. The notion that affirmation of homosexuality is required to secure safety and respect for all children, however, is an obvious tactic designed to justify introducing just one side of a controversial political agenda, while explicitly excluding the others. In a pluralistic society, public school educators have a duty to present all reasonable options and perspectives on controversial issues.

As the District has emphatically embarked on the course of “affirmation,” please advise us how the District will come into compliance with its Controversial Issues Policy concerning the presentation of information about homosexuality. ■