HOMOSEXUALITY

The Medical, Social and Religious Implications

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This document comprises three statements. The first statement is by doctors, the second by people involved in counselling and social work and the third by a group drawn from all the main churches. There is also an appendix entitled ‘Influences upon Sexual Relationships’
Homosexuality

The Medical, Social and Religious Implications

June 1997

The purpose of producing this document is to assemble basic factual information to enable people to come to an understanding of the implications of homosexuality today.

It has been drawn up by people who have a profound respect and love for their fellow men and women, irrespective of their sexuality. We need to accept individuals as they are, without condition, but we need also to recognise that it is the truth which sets us free.

The authors are very conscious of the deep hurts and often sense of injustice carried by many men and women who consider themselves to be homosexual.

Most of the authors are personally involved in dealing with problems of human relationships. They are in caring professions or engaged in voluntary work and are particularly concerned with the welfare of children.
HOMOSEXUALITY

The Medical Implications

Everyone has an equal right to health care and also the right to be informed of facts which could affect their choices in adopting a healthy lifestyle. These notes express serious health concerns about the homosexual lifestyle.

1. Definition

A homosexual is a person who has a sexual attraction to a person of the same sex. A distinction must be drawn between individuals who experience homosexual attraction and those who also enter into sexual relationships with partners of the same sex. There is clearly a difference in the health risks likely to be encountered within a stable, life-long monogamous relationship and those who engage in temporary relationships with multiple partners.

2. Prevalence

Studies carried out in USA and UK suggest a consistent figure of less than 1.5% of the adult population to be actively homosexual.

- One of the most detailed UK studies showed only 0.4% males and just 0.1% of females to be exclusively homosexual in practice. (Welling K, Field J et al, Sexual Behaviour in Britain; The National Survey of Sexual Attitudes and Lifestyles; Penguin 1994:183, 253)

- Research carried out on behalf of the Department of Health in the Omnibus Survey in 1997 revealed that only 1% of men practise exclusively homosexual sex. (Office for National Statistics quoted Hansard 27.11.97)

- A survey in the United Kingdom sponsored by the Wellcome Trust reported 1.4% of males having had a homosexual partner in the previous year. The report stated its findings “were consistent with those from other recent studies in Europe and the United States”. A British survey in 1990-1991 (among 19,000 men) found that 1.1% had had homosexual partners in the previous year. (Johnson A.M. et al, Sexual Lifestyles & HIV risk; Nature; 360, Dec. 3rd 1992)

- An official survey of sexual behaviour showed that 98.5% of adults were exclusively heterosexual. Less than 1% had been exclusively homosexual since the age of 18 years. (US Government General Social Survey by Prof. Tom Smith, University of Chicago 1989)

3. Causative Factors

The origin of the homosexual condition is not fully understood but there is considerable evidence to point to it being an acquired or learned behaviour rooted in confusion of identity and/or childhood or adolescent trauma. There is no reliable evidence to suggest that it is due to organic or genetic factors.

- In March 1993 two psychiatrists of Columbia University reviewed studies purporting to find a biological component to homosexuality. They concluded “there is no evidence at
present to substantiate a biologic theory". (Byne and Parsons. Human sexual orientation: The Biological Theories reappraised; Archives of General Psychiatry; Mar 93, 50:228-239)

- Lawrence Hatterer, American Psychiatrist states “homosexuals are not born but made and genetic, hereditary, constitutional, glandular or hormonal factors have no significance in causing homosexuality.” Dr Frank Lake, Psychiatrist, discovered considerable evidence of the significance of disorders in infant years being directly related to the homosexual condition. Dr. Charles W. Socarides, Clinical Professor of Psychiatry at the Albert Einstein College of Medicine in New York has stated that homosexuality is not innate, but is learned behaviour.

- Dr. John Money of the John Hopkins School of Medicine and Director of the Psycho-hormonal Research Unit states “Whatever may be the possible unlearned assistance from constitutional sources, the child’s psychosexual identity is not written, unlearned in the genetic code, the hormonal system or the nervous system at birth”.

- Dr Elizabeth Moberly, Psychologist and authority on homosexuality regards homosexuality as “essentially a state of incomplete development or of unmet needs”. She asserts that homosexual orientation is rooted in “same-sex psychological deficits” and arises from “difficulties in the parent-child relationship, especially in the earlier years of life”.

4. Lifestyle Characteristics

Homosexual relationships are usually temporary. Long-term, ‘stable’, and single-partner homosexual partnerships are exceptional. One of the characteristics of the emergence of the ‘gay culture’ has been the open promotion and encouragement of the high level of promiscuity which is a feature of male homosexuality. Some studies cite men having up to 25 sexual partners per day.

- 74% of male homosexuals reported having more than 100 partners during their lifetime; 65% reported having sex only once with more than half their partners; 28% reported having more than 1000 partners. 10% of homosexuals and 28% of lesbians claim to be close-coupled (quasi marriage): (Bell & Weinberg, Homosexualities; A Study of Diversity among Men and Women, New York: Simon & Schuster, 1978: 308, 346)

- 7% have a relationship lasting longer than 10 years. 38% have never been in a relationship lasting longer than 1 year (Saghir & Robins, Male & Female Homosexuality: A Comprehensive Investigation - Baltimore: William Wilkins, 1973)


- In Denmark, a form of homosexual marriage has been legalised since 1989. By 1995, less than 5% of Danish homosexuals had married and 28% of these marriages had already ended in divorce or death. (Wockner; Advocate; 726 Feb. 4 1997: 26)

- 69% of Dutch gays with a marriage-type ‘partner’ actually lived together. The average number of ‘outside partners’ per year of ‘marriage’ was 7.1 and increased from 2.5 in the first year of the relationship to 11 in the sixth year. (Deenan et al, Archives Sexual Behaviour; 1994, 23: 421-431)


- Perhaps half of lesbians live together in monogamous relationships. These typically dissolve in one to three years. (Same Sex Marriage, ‘Til Death Us Do Part?, Family Research Institute)

It is widely recognised that homosexual relationships are frequently characterised by tension, jealousy and hypersensitivity, inevitably exacerbated by multi-partnering. Surveys have shown that homosexual partnerships have the highest rate of domestic violence.

- In the 1992 SIGMA study funded by the Medical Research Council and the Department of Health no fewer than 34% of homosexual men freely expressed regret at being homosexual. Possibly more than this proportion felt regret but did not express it. 17% had ‘considered giving up being gay’ and 9% would ‘take a pill today’ to make them heterosexual (if one were available).

5. Male Homosexual Practices

Major surveys on homosexual behaviour have shown that sexual practices are similar throughout the world. The following statistics are representative.

- 95% of homosexuals engage in oral-genital contact, 85% in oral-rectal contact, 80% in insertive anal intercourse, (Bell & Weinberg, Homosexualities; A Study of Diversity among Men and Women, New York: Simon & Schuster, 1978: 107-111) and 35% practise fisting (thrusting of fist into partner’s rectum).

- Semen is ingested in approximately half the cases of oral-genital contact. (Corey L & Holmes K, Sexual Transmission of Hepatitis A in Homosexual Men; New England J Medicine; 1980, 302: 435-38)

- 23% of homosexual men, in the largest survey of homosexual behaviour had engaged in “golden showers” - drinking, or being splashed with, urine. (Jay K & Young A, The Gay Report, NY: Summit 1979)

Other widely used practices include insertion of foreign bodies such as tumblers, wine and beer bottles into the rectum and lower bowel; the use of sex-aids such as drugs like amyl nitrate (‘poppers’); ingestion of faeces and sado-masochism.

- The use of sphincter-relaxing euphoriant drugs like the organic nitrates, sold over the counter as Poppers, etc, destroy immunity in homosexual men and sometimes in female partners of bi-sexual men. (Stewart G., Emeritus Professor of Public Health, University of Glasgow, correspondence 1994)

6. Medical Consequences

Most health risks arising from a homosexual lifestyle originate in widespread promiscuity and the consequent propagation of disease; and also from the type of activity engaged in.

6.1 Mortality

Homosexual lifestyle is strongly linked to premature death, life expectancy being reduced by 25-30 years.

- One study found less than 2% of homosexuals survived to old age i.e. 65 or older (ref. as below)*

- Premature death, average life expectancy, is due to a variety of diseases including, but not solely due to HIV/AIDS. Violent death has been found to be strikingly high:
compared to similar-aged white males, homosexuals were 116 times more likely to be murdered and 24 times more likely to commit suicide. (Cameron, Playfair & Wellum, The longevity of homosexuals: Before and after the AIDS epidemic; Omega; 1994)*

6.2 Traumatic disease

The act of anal intercourse, whether with a male or a female recipient, demands such high levels of pressure that trauma to both the anus and penis is inevitable. The lining of the rectum (mucosa) is thin, unlike that of the vagina which is suitably composed for sexual intercourse. Receptive anal intercourse causes tearing of the anus and rectum. The constituents of semen digest parts of the mucosal lining of the rectum, making it porous. This causes damage to the mucosa, as does the use of douching agents. Insertion of the fingers, fists and various objects may cause serious damage and sometimes perforation of the rectum and the lower bowel, necessitating at least temporary use of a colostomy. Such traumatic damage means that the bacteria and viruses normally contained within the bowel penetrate to body tissues and the bloodstream, frequently leading to local and systemic infection. Long term effects may include faecal incontinence due to dysfunction of the anal sphincter.

- About one in three men who regularly engage in anal intercourse suffer from dysfunction of the anal sphincter. (Miles et al, Effect of Anoreceptive Intercourse on Anorectal function; Journal of the Royal Society of Medicine; 86, Mar 1993: 144-47)

6.3 Infection

Most sexually active homosexual men are a potential health risk to any of their sexual partners. The person who has sexual intercourse with a promiscuous partner is in essence potentially exposed to the micro-organisms of everyone else with whom they have had intercourse. In highly promiscuous men, live bacteria and viruses are literally transmitted from one rectum to the next.

- 75% of homosexual men currently carry one or more significant pathogens. (Quinn, Clinical Approach to Intestinal Infections in Homosexual men; The Medical Clinics of North America; 70, 3, 1986: 611-34)

Most genito-urinary physicians consider condoms not to be a reliable protection against viral infections such as HIV & hepatitis. This is openly admitted by the manufacturers. They are less safe when used for anal intercourse. The human immunodeficiency virus is a fraction of the size of a spermatozoa.

- In 1996, condom failure was found to be the leading cause of unwanted pregnancy. (British Journal of Family Planning, 1996, 22:6-9)

- Studies show that condoms are not used consistently, as evidenced by differing pregnancy rates in those using only this means of contraception: the unplanned pregnancy rate in married couples is 5-15%, but in single females is 37%.

- A Manchester Family Planning Clinic survey of people experienced in condom use reported that “52% of respondents had experienced condoms bursting or slipping off in the previous three months”. (Kirkman R.J.R., Morris J., Webb A.M.C., User Experience: Mates v Nuforms; British J. Family Planning; 1990, 15:107-11)

i) Local Infection. Infection in the form of ulcers and abscesses is common in the rectum. Penile infections also occur, sometimes with rare organisms such as amoeba.

ii) Sexually Transmitted Disease. This is particularly common amongst active homosexuals.
75% of homosexual men admitted to having such an infection at some time. (Bell & Weinberg, Homosexualities; 1978: 336)

Male homosexuals are the main reservoir of syphilis infection in the United Kingdom.

Other common infections include gonorrhoea, chlamydia, lymphogranuloma venereum, all of which cause proctitis (inflammation of the rectum); perianal warts, which are associated with rectal and cervical cancer; herpes simplex type II, which may be confused with type I (cold sores) due to genital-oral spread. Insertive anal intercourse may lead to chronic prostatitis (inflammation of the prostate), secondary to infection with various organisms.

All the above mentioned organisms cause significant disease, including infertility, when transmitted to females through bisexual activity. Bowel organisms cause very severe salpingitis (infection of the Fallopian tubes). Infection of the mouth, with herpes or syphilitic ulcers, may be passed to anyone (including children) through kissing.

iii) Bowel Infection. The practices of anilingus or 'rimming' (licking and insertion of tongue into the rectum), oral-genital contact following anal intercourse, and widespread promiscuity have led to a medically significant problem with bowel infections in homosexual men.

Gay Bowel Syndrome is a newly described condition characterised by abdominal bloating, cramps, nausea and diarrhoea due to infection.

During the past 10 years there has been a dramatic increase of previously unusual infections of the bowel. (Editorial: Medical Aspects of Homosexuality; New England Journal of Medicine; Feb 1980, 302,8: 463)

Infection with the following organisms are well documented: Giardia (10-30% of homosexual men), amoeba (25-40%), shigella, cryptosporidium, salmonella (typhoid), strongyloides stercoralis, entamoeba histolytica. (Quinn, Clinical Approach to Intestinal Infections : 620-622)

iv) Blood borne infection. Hepatitis A, B, C, D, & G and HIV infection are significantly higher in male homosexuals than in other population subgroups. This is due to tissue damage & mingling of blood and also oral-faecal contamination. Hepatitis B, in particular, is a serious condition which is life-threatening in its acute phase and which frequently causes chronic liver cirrhosis.

In 1980 a study found that 40-75% of homosexual men had been exposed to the hepatitis B virus. (Macphail L “Alberta Report” Oct.14 1996, p. 33)

v) HIV/AIDS. This is the major cause of premature death among homosexual men. The World Health Organisation in 1991 stated “the most effective way to prevent sexual transmission of HIV is to abstain, or for two uninfected individuals to be faithful to one another.”

It is estimated that a 20-year-old male homosexual faces a 30% chance of being HIV positive or having AIDS by the time he is 30 years old. (Macphail L “Alberta Report” Oct.14 1996)

HIV/AIDS in the UK is predominantly a disease of male homosexuals.

At the end of 1990, homosexual and bisexual men, including those who were drug abusers, accounted for over 80% of all AIDS cases in the UK, according to Department of Health figures issued 21st January 1991. (Ref. H91/22)
The risk ratio of HIV transmission through anal vs. vaginal intercourse is between 2733:1 and 24000:1; depending on other contributory factors. *(Stewart; Health Care Analysis; 1994, 2 : 279-286)*

HIV infection carries with it a propensity for numerous other diseases due to reduced immunity. These include: tuberculosis, atypical mycobacteria, pneumocystis carinii (all causing lung infections difficult to treat), cryptococcal diseases of brain and other tissues, Kaposi’s Sarcoma (form of skin cancer), lymphoma (form of cancer), progressive multifocal leucoencephalopathy (brain disease) cytomegalovirus, chronic cryptosporidiosis, candidiasis, chronic herpes simplex (infections difficult to clear), chronic herpes zoster (shingles).

### 6.4 Cancer

- Passive anal intercourse carries a 30-fold increased risk of anal cancer compared to controls. This may be related to the strong link between anorectal cancer and the wart virus. *(Voeller, B, Anorectal Cancer & Homosexuality; Journal of American Medical Association; May 1983, 249, 18: 2459)*

Hepatitis B infection is strongly linked to liver cancer.

### 6.5 Psychological Morbidity

The high rate of suicide in homosexuals would suggest significant psychological morbidity. Substance abuse amongst homosexuals is considerably higher than that of the general population.

- In a medical survey 47% of male homosexual subjects had a history of alcohol abuse compared to 24% of males generally and 51% had a history of drug abuse, compared to 7% of males generally. *(Williams et al, Multidisciplinary Baseline Assessment: 127. and Rosenberger et al, Psychopathology in Human Immunodeficiency Virus Infection: Lifetime and Current Assessment; Comprehensive Psychiatry; 34, May/June 1993: 153)*

- 40% of male homosexual subjects had a history of major depressive disorder compared to 3% of males generally, according to the above studies.

- 35% of male homosexuals had seriously considered or attempted suicide compared with 11% of male heterosexuals. *(Bell & Weinberg, Homosexualities: 200-201, 444)*

### 7. Conclusions

Medical professionals have a duty to inform the public of the consequences of a particular lifestyle upon their physical and psychological health.

The homosexual lifestyle is characterised by promiscuity and damaging sexual practices. The result of these activities is significant damage to physical and psychological health and substantially reduced life expectancy.

Medical professionals, whilst not seeking to make any moral judgements have a duty, nonetheless, to protect society from anything which would threaten its health at large. A homosexual lifestyle, therefore, should not be condoned or encouraged in an individual and certainly not promoted as a normal or healthy lifestyle in the general population, especially amongst children and adolescents during their vulnerable years of sexual maturation and personal development.
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The Social Implications

1. Society's Perceptions

For centuries Western society generally regarded the homosexual act as unnatural, unacceptable and anti-social. Although there was widespread disapproval of the homosexual act, politicians, prompted by and with the active support of vociferous pressure groups, introduced the 1967 Sexual Offences Act which de-criminalised the homosexual act for consenting adults over the age of 21. The primary argument for this was the claimed need for the individual to be protected from blackmail and from unwarranted intrusion into his or her private life.

2. Society’s Reaction

Since the de-criminalisation of homosexual acts in this and in other countries there has been a sustained political campaign by homosexual organisations to present homosexual behaviour as normal and homosexuality itself as inborn and irreversible. “Gay” groups have actively encouraged practising homosexuals to “come out” and publicly announce their sexual preferences. In spite of this there remains considerable public concern about the homosexual act.

- 70% of men believe that homosexual practice is always or mostly wrong according to one of the most detailed studies yet carried out. (British Sexual Attitudes, Wellings K et al. Penguin, 1994, pages 183,253)

3. The Nature of Homosexuality.

Homosexuality, being a condition of people who have a sexual attraction to those of the same gender, may, or may not be a temporary or life-long preference or practice. It may or may not result in a sex act. There is no reliable evidence of it being a genetic inheritance and there is considerable evidence of people moving into normal sexuality after receiving appropriate help or therapy. Most young people during the process of maturing go through periods of same-sex affection which gay activists wrongly classify as a permanent state of homosexuality.

- “Few people pass through life without at some stage experiencing homosexual feelings”. (J J West - Homosexuality Re-examined)

- “The mis-information spread by certain circles that ‘homosexuality is untreatable by psychotherapy’ does incalculable harm to thousands of men and women”. (Dr R Fine, Psychoanalytic Theory, Male & Female Homosexuality: Psychological Approaches 1987)

4. Homosexuality and the Family Unit

The family is the basic unit of society. Relationships between homosexuals are founded on personal sexual preference, whereas the traditional heterosexual marriage is not merely a private arrangement between two people, but a social contract and a security for our
children. The basic purpose of marriage is to provide children with a stable, secure and balanced family in which they can discover their identity and grow to maturity.

It is beyond dispute that children need the male and female role models which their fathers and mothers provide. Children need a safe, long-term environment in which to develop and grow into mature adulthood and true gender identity. Current moves to introduce legally recognised homosexual “marriages” and to allow the adoption or fostering of children by cohabiting homosexual couples, raise grave issues of public morality and the care of children - particularly those who may already be damaged.

Those who resist gay demands are often subjected to vilification, and labelled as ‘homophobic’ or bigoted.

- The Chairman of Hackney Social Services threatened that any parent who does not want their child to be fostered by a homosexual would be ‘counsellled’ by his staff. (8.1.85)

For the sake of “gay rights”, children are in danger of being deprived of the right to have healthy male and female role models, and to be protected from potentially confusing and even damaging influences. Single-sex partnerships of whatever nature fail to provide this.

There is in fact a profound antagonism to the concept of traditional marriage and family amongst some militant homosexual organisations.

- “We must aim at the abolition of the family”. (Declaration in the Gay Liberation Front manifesto 1971 & 1976)

- The best scientific evidence suggests that putting society’s stamp of approval on homosexual partnerships would harm society in general and homosexuals in particular, the very individuals some contend would be helped. (Same Sex Marriage, “Til Death us do Part?” Family Research Institute Inc. Colorado Springs)

5. The Quality of Homosexual relationships.

Broken, damaged, superficial or non-existent human relationships lie at the root of many of society’s problems today. A high proportion of all homosexual relationships are temporary, many transient. Long-term, ‘stable’, and single partner homosexual partnerships, although they do exist, are comparatively rare.

To a seemingly greater extent than in heterosexual relationships, many homosexual friendships are particularly fraught with jealousies, angers, tensions, and hypersensitivity to criticism and competition. This may be generated or exacerbated by widespread multi-partnering which is such a pronounced feature of homosexual culture.

One of the fundamental characteristics of the emerging ‘gay culture’ is the open promotion and encouragement of promiscuity and what appears to be a gross obsession with the sex act. This is evidenced in numerous gay publications.

Homosexual partnerships have a high rate of domestic violence, seriously affect health and longevity. Some active homosexuals are deeply unhappy in their condition and way of life and would wish to change if it were possible.

6. The Promotion of Homosexuality

The issue of homosexuality is being given increasing prominence today in this and other countries by virtue of militant political campaigning by homosexual organisations. These
groups now exercise a disproportionate influence in the media, local government, Parliament and social services. They receive very substantial public funding, both nationally and internationally. Events promoting and ‘celebrating’ the gay life-style have received huge sums of money from local councils, statutory bodies, commercial organisations and the national lottery.

- One Council, GLC, gave over one million pounds to gay groups between 1981 and May 1984. (Rachel Tingle, Gay Lessons, Pickwick Books)

The major campaigns of homosexual organisations are directed at achieving legislative changes which would strengthen the position of homosexuals in society, and are also aimed at establishing total public acceptability of homosexual behaviour on the basis of it being deemed normal rather than deviant.

7. HIV/AIDS Campaigning

The emergence of HIV/AIDS as a major social problem was inextricably tied up with homosexual practice. Whereas many heterosexuals are now being infected, the initial spread of the disease was undoubtedly through homosexual behaviour and the overwhelming majority of those who have died have been practising homosexuals.

Homosexual campaigning has been given considerable prominence by virtue of highly funded programmes sponsored by government and public bodies to combat AIDS. These programmes have given prominence to detailed descriptions of sexual practices between males which are invariably presented as normal, natural and safe. Factually incorrect statements about “safe” sex using condoms are having to be altered to “safer” sex. Many of these descriptions are regarded by normal people as obscene, and as pornographic material masquerading as educational aids. Some of it is deliberately directed at children and young people and increasing numbers of parents now regard it as both mentally corrupting and degrading. Its publication is ostensibly to combat AIDS but, until fairly recently, it would generally have been regarded as totally unacceptable. Similarly, language is used which would under normal circumstances be regarded as obscene and foul. A considerable amount of the literature positively encourages and promotes all forms of sexual activity by the young.

The commercial interests of condom manufacturers who are constantly seeking greater sales and profits have underwritten much of the campaigning.

- The Terrence Higgins Trust, substantially supported by public funds, circulates publications entitled such as ‘You are never too young’, and ‘Hot Sex Now’ and even ‘Tie Him Down’ which features, and approves of, sadomasochistic practices and multipartnering, whilst detailing precautions to be taken to minimise the attendant health risks.

8. Homosexuality and Children

The media increasingly presents homosexual relationships as normal and acceptable sexuality. Gay activists exert enormous influence in the media and only one view about homosexuality is now presented.

- The BBC depicted a young boy kissing another in their children’s programme ‘Byker Grove’ in 1995. In 1996 Granada featured two teenagers discussing their homosexual relationship in the ‘Dear Devina’ programme in 1996. The Hot Lips programme transmitted by LWT 1997 at mid-day on Saturdays and directly aimed at children, presented homosexual relationships between teenagers as “cool”.
Channel 4 has included in its schedules three hours of continual homosexual programmes. ‘Soaps’ which are shown before the 9.00pm watershedding, such as East-Enders and Emmerdale Farm also include homosexual scenes.

The indoctrination of children has rapidly developed both in the media and in the educational system and alternative views on homosexuality are now being disallowed. Gay teachers are pressing for “a more positive approach to homosexuality”. Gay organisations are carrying out their work with missionary zeal encouraging children to read books specifically favouring homosexual life-styles. Special homosexual clubs for teenagers have been established and ‘sexual-orientation training officers’ have been appointed.

9. The Emerging ‘Gay Culture’

Policies to encourage the establishment of a separate ‘gay culture’ with its own identity, set apart from, yet possessing equal rights to normal society, have been actively pursued.

These policies now receive huge financial support and have generated a substantial increase in homosexual activity, as a chosen or “preferred” behaviour. This is particularly noticeable in city areas, where gay bars and clubs have generated an increase in male prostitution, particularly with the use of ‘rent boys’. They have also directly led to a substantial increase in ‘cruising’ i.e. soliciting for sex in public places, and ‘cottaging’, i.e. seeking sexual encounters in public conveniences. Few would deny that these are ugly intrusions into the urban environment which undoubtedly cause damage to relationships between the wider community and practising homosexuals. Ironically, by their own efforts, gay activists may, particularly with open-air demonstrations, have established deep divisions between those participating in the gay culture and the overwhelming majority of the population from whom in some respects they are now being alienated. Likewise the interruption of church services by militant gay groups has been counter-productive.

10. Gay Campaigners’ reaction to Opposition

A word - ‘homophobia’ - was invented to discredit those who disagree with the views of the more militant homosexual organisations. These organisations brand most of those who disagree with them as ‘homophobic’, ‘intolerant’, ‘bigoted’ and ‘prejudiced’ and even in need of counselling. At the same time they have no hesitation in subjecting their opponents to extreme public abuse and illegal aggression, often seeking to deprive them of their right to speak. At the first ‘Global Impact of Aids’ conference in London in the late 1980’s, the American Surgeon General, Evertt Koop, left the speakers’ platform without delivering his address because of the vicious heckling.

‘We [the psychiatric and psychoanalytic community] are trying to stand firm in our convictions that we can help homosexuals who want to be helped...[militant] gays have been shouting down people trying to deliver their scientific papers...threatening lawsuits against us for discrimination’. (Homosexuality: A Freedom too Far. Dr C W Socarides)

11. Wrong Assumptions.

The concerted effort to convince the public that the homosexual condition is present at birth, is biologically fixed and can never be changed uses arguments which have no basis in fact and are grossly untrue.

‘The homosexual’s real enemy .....his ignorance of the possibility that he can be helped’ does incalculable harm to thousands of men and women’. (Dr R Fine, Psychoanalytic Theory, Male and Female Homosexuality: Psychological Approaches)
A group of eminent professors and doctors in a letter to the Wall Street Journal on 9.1.97 said, “These young men and their parents have the right to know that, contrary to media propaganda there is no proven biological basis for homosexuality.” They also said “Every day young men seek help because they are experiencing an unwanted sexual attraction to other men and are told that their condition is treatable. It is not surprising that many of these young men fall into depression or despair when they are informed that a normal life with a wife and children is never to be theirs...As we grieve for all those lives so abruptly ended by AIDS, we would do well to reflect that many of the young men who have died of AIDS have sought treatment for their homosexuality and were denied knowledge and hope. Many of them would be alive today if they had only been told where to find the help they sought.” (The signees included Dr Charles Socarides, Prof. of Psychiatry; Dr Benjamin Kauffman, Clinical Prof. of Psychiatry; Dr Joseph Nicolosi, Clinical Director of Psychological Clinic; Dr Jeffery Satinover, Psychiatrist; and Dr Richard Fitzgibbons, Director of Comprehensive Counselling Services)

12. Homosexuality and Paedophilia

The majority of homosexuals are not paedophiles, and it would be offensive to suggest that they are. However, there is little doubt that there is a substantial and increasing number of homosexual male paedophiles who are a danger to young boys. A growing proportion of homosexuals openly advocate the ‘normalisation’ of paedophilia, now termed ‘inter-generational sex’. The lowering of the age of consent is a very real risk to adolescent boys, who, in their formative years, are thereby at risk of abuse by much older men.

In various parts of the world pressure groups are now actively campaigning for the legitimizing of child sex.

*In the U.S. the NAMBLA Organisation (North American Man/Boy Lovers Association) which significantly includes many teachers in schools and young person’s organisations, is pressing for same-sex relationships with children. They are lobbying government for recognition of sexual activity with children as young as 8 years old, saying that if a child consents to the experience dormant within them, no-one has the right to deny the child this choice. It is significant that NAMBLA is very active in the Philippines where there is extensive sexual abuse of young children by western paedophiles.*

Homosexual organisations have frequently sought to defend paedophiles.

*A motion calling for drastically extended homosexual rights was approved by the European Parliament on the 8th February 1994. Initiated by the International Lesbian and Gay Organisation it called, among other things, for the European Commission to present a draft recommendation “to seek to end storage by the police of electronic data on paedophiles”.*

Many practising homosexuals were involved in homosexual activity as children or adolescents. Significantly many gay campaigning organisations are committed to lowering the age of consent.

*Perverted sexual encounters in adolescence, when critical maturational changes are taking place, have also been demonstrated to lead to persistent homosexual activity and to the subject identifying himself or herself as ‘naturally’ homosexual. (Van Wyk and Geist, Psychological Development of Heterosexual, Bisexual and Homosexual Behaviour, Archives of Sexual Behaviour Vol13 No6 1984 pp 505-541)*
90% of homosexual men had their first sexual experience with a man before they were 21 years old, 70% before they were 16, 3% before they were 10. (1992 SIGMA study funded by the Medical Research Council and the Department of Health)

Less than 1.5% of adults are homosexual, yet they account for between 20% to 40% of all molestations of children. 1,001 adult homosexual and bisexual men attending sexually transmitted disease clinics were interviewed regarding potentially abusive sexual contacts during childhood and adolescence. 37% of participants reported they had been encouraged or forced to have sexual contact before age 19 with an older or more powerful partner; 94% occurred with men. Median age difference between partners was 11 years. 51% involved the use of force; 33% involved anal sex. (L.S.Doll et al., “Self-reported Childhood and Adolescent Sexual Abuse Among Adult Homosexual/Bisexual Men.” Child Abuse and Neglect 16 (1992) pp855-64)

During the trial of 4 members of the Paedophile Information Exchange in 1981, the London branch of the gay teachers’ group presented its attitude to paedophilia in an article in which they said “children can be lovers of children. They can also be lovers of adults.... We accept that children do have their own sexuality and subject to the qualification of not harming others, they have the right to express that sexuality”. It upheld “the right of paedophiles to organise”. (Gaynoise (15.1.81)
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The Religious Implications

1. Moral and Theological Objections.

Most religions regard all homosexual activity as morally wrong. For two thousand years, in a variety of contexts, the tradition of the Church has consistently affirmed the Biblical witness that homosexual activity is sinful.

- “I do not deny, and cannot, that homosexual acts are condemned in the Biblical and Christian tradition” - Archbishop Runcie. (Coleman, P. Gay Christians)

2. Sexuality - God’s Gift

From the beginning, in Genesis, we learn that God was delighted with the creation of man and woman. We are specifically told that “God saw all that he had made and it was very good”. (Gen: 1.31) This positive approach is continued in the New Testament teaching about marriage. (Mk 10: 2-9; 1 Thess 4: 3-8; 1 Cor 7: 1-9; Eph 5: 21-23; Heb 13: .4)

3. The Abuse of God’s Gifts

In a fallen world God’s gifts are abused and relationships become damaged. God helps us in this situation by giving us laws to regulate our behaviour. The holiness code in Leviticus contains the specific instruction “do not lie with a man as with a woman” (Lev 18: 22) i.e. homosexual acts are forbidden.

4. New Testament Warnings

In the New Testament homosexual acts are given as examples of our alienation from God (Rom 1: 26-27; 1 Cor 6: 9-11), and warning is given against them. Jesus in His teaching takes the matter further and warns against lustful thoughts. This places the non-practising homosexual in the same position with regard to temptation as heterosexuals outside of marriage.

We are warned about the consequences of sexual immorality in 1 Cor 6: 9-11. “Do not be deceived; neither the sexually immoral, nor idolaters nor adulterers nor male prostitutes nor homosexual offenders nor thieves nor the greedy nor drunkards nor slanderers nor swindlers will inherit the Kingdom of God”. Paul is quite specific and sees homosexual offenders as being deceived. He encourages those who behave in this way to be “washed and sanctified”. (1 Cor 6.11)

The early Christians saw practising homosexuals as being given over to self-indulgent desires. Because of this rebellion “God gave them over to shameful lusts. Even their women exchanged natural relations for unnatural ones. The men also abandoned natural relations with women and were enflamed with lust for one another. Men committed indecent acts with other men and received in themselves the due penalty for their perversion”. (Rom 1:26-27)

To accept homosexual behaviour today inevitably involves discarding the authority of the Bible and rejecting its relevance to life today.
5. Deviant Sexuality

Although there is a vociferous Christian “gay” movement, most Christians see homosexuality not as a ‘natural orientation’ but as an abnormal condition. It is seen as deviant behaviour running contrary to Biblical teaching and having a damaging influence upon society and the Christian family. Same sex “marriages” are seen as grossly unnatural. They are deemed to cause considerable damage to children, where fostering, adoption, surrogate parenting or artificial insemination by donor are involved. Children of practising homosexuals are frequently traumatised and at least suffer profound emotional disturbance. Children’s relationships with their mother and father are the most important for the whole of their life and are fundamental to their sexuality.

6. Promiscuity

The Church is profoundly aware of the deep damage inflicted upon people by promiscuity. Relationships which are temporary, shallow, debased and exploitive are usually personally hurtful and damaging to society. Relationships in which there is indifference and detachment are not neutral but often positively destructive. This applies equally to heterosexual and homosexual behaviour. The AIDS epidemic points to the disastrous consequences of homosexual promiscuity.

- “Promiscuity is the root of the present epidemic. It has always been sinful. It is rapidly becoming suicidal” - Cardinal Basil Hume. (The Times 7.1.87)

7. God’s Dwelling Place

Christians have always believed that God may dwell within them. The honouring of our body is central to the teaching of the early church and is integral to the wholeness of the Gospel. In 1 Corinthians 6, 18-20 we read, “Flee from sexual immorality. All other sins a man commits are outside his body, but he who sins sexually sins against his own body. Do you not know that your body is the temple of the Holy Spirit, who is in you, whom you have received from God? You are not your own; you were bought at a price. Therefore honour God with your body.”

8. Christian Compassion

We are called by Christ to respect and love others without exception and to respond to their needs. Churches are, legitimately, anxious to show understanding and sensitivity towards this particular minority group, being aware of the very real pain suffered by many homosexuals in society.

9. God’s Truth and Love

God’s will for us is that we become whole and complete. His truth and love do not work in opposition but are part of a single purpose. The more nearly we are conformed to His truth the more we reflect and are open to His love. Conversely, the more we live out of harmony with His truth the more we become damaged ourselves and damaging to others. It is not loving to acquiesce in a lifestyle that does not reflect God’s truth.
Appendix

Influences on Sexual Relationships

(An excerpt from 'Christ's Healing of Relationships published by the Maranatha Community')

1. Wrong sexual role models can cause considerable suffering.

With the growth of more single parent families a child may be completely deprived of the influence of an adult of the opposite sex. Many young boys have been deprived of a father as a role model and, therefore, subconsciously feel that they have been robbed. They may then go out in adulthood to seek that which they did not have i.e. male company.

Similarly, a girl brought up in a predominantly male environment may gravitate towards those activities directly linked to male gender. On maturing she will desire the gentleness and other female attributes of which she has been deprived by her unnatural circumstance, and may have a deep instinctive drive to seek female company.

Healing in these situations is to be found in the discovery of self-worth in Christ and the establishment of a healthy child/parent relationship with God.

2. Normal sexual development can be damaged, causing considerable pain.

The pendulum which swings in normal early childhood between a male and a female emphasis may for a variety of reasons become 'fixed' or 'frozen' in one position. Thus a male child may experience a trauma during a period of experiencing a female emphasis within his life. This trauma or other experience may prevent him from maturing during adolescence and he thus becomes locked into an opposite gender role.

The healing of this situation lies in dealing with the particular event in such a way that its powerful influence is removed and unnatural, destructive bonds broken.

3. Trauma and abnormal environment can damage sexuality.

A child or adolescent at a normal stage of sexual development may be confronted with a shock or be the victim of an offence which causes them to react violently away from the sex of the offender or cause of the shock. Thus the victim of a rape, especially in childhood and adolescence, may put all the blame upon all males, who are thus rejected in totality.

Hidden fear of a repetition of a trauma frequently forces people into the company of the same sex. Normal sexual attitudes then become introverted (causing intense loneliness) or directed towards the same gender (causing confusion).

The healing of sexual damage caused in childhood is always rooted in the giving and receiving of forgiveness, and the expression of love in the name of Christ towards the person who offended.

The person who is placed in an abnormal and restrictive environment in which free association with the opposite sex is prevented or strictly controlled, is particularly likely to be vulnerable to homosexual liaison. This has proved to be the case in men's and women's prisons and to a limited extent in the armed forces. This invalidates the argument that the homosexual condition always starts at birth or before.

There is a growing body of evidence that people who are not intrinsically homosexual may be led into this pattern of behaviour by others, particularly when they are emotionally immature. Incontrovertible evidence of this is to be found in the consequences of homosexual interference with young boys in Scout Groups and public schools.

4. Sexual identity crises can distort normal sexuality

The homosexual experiences a personal identity crisis of enormous magnitude and tends to be in conflict with himself or herself.

Homosexuals seek to resolve the conflict through same-sex bonding. The conflict, however, is not resolved in this way.

The homosexual (especially the male) will constantly seek out new partners in a desperate (but subconscious) search for a resolution of his problems.

It is recognised that extreme tension and hypersensitivity is a characteristic of homosexual relationships.

The practice of homosexuality involves the desire to possess and consume what the homosexual sees as being in another person but which he or she lacks. This has often been referred to as 'cannibalism' because apparently
cannibals eat what they admire hoping that the good traits of the person consumed will become theirs. In a similar manner the homosexual seeks to own the characteristics of his/her partner.

5. Aspects of homosexuality raise fundamental issues concerning society and a personal faith.

The teaching of the Bible and the Church throughout the centuries is that genital homosexual activity is totally unacceptable and sinful. It has always been seen as emotionally, physically and socially harmful and corrupting.

One of the characteristics of contemporary homosexuality is promiscuity which causes immense emotional damage. ‘Gay’ magazines invariably advertise potential sexual partners and the services of homosexual prostitutes. Multi-partner homosexual activity was undoubtedly the most important single factor in the high incidence of AIDS sufferers in this category.

There is widespread ignorance of the emotional and often physical dangers of active homosexuality. Male homosexuals practising buggery frequently develop serious physical ailments because of the unnatural nature of the act.

There is widespread ignorance, particularly within the churches in the United Kingdom about God’s power to heal homosexuals. This ignorance is clearly based on a lack of experience of this particular Christian healing ministry.

Homosexual child abuse and other sexually deviant behaviour often has its root in occult practice or involvement in the drug culture.

Many homosexuals are the victims of earlier assaults or the casualties of broken and corrupted families. The hurts inflicted upon them as children are manifest in their adult life.

6. A culture which manifests abnormal and excessive emphasis upon sex is in need of healing.

If we see sexual relationships primarily in terms of a physical act, we are degrading and diminishing a relationship upon which society depends for its health.

If, as in our society, an obsession with coitus is so actively and unnaturally encouraged, we will inevitably witness the collapse of loving, respectful relationships and the fall of our culture into a chasm of degradation.

The recognition that sexual instinct is given to us by God must also be matched by an admission of our personal responsibility to use that instinct for His glory and not merely our personal gratification.

Contemporary society is characterised by a lack of real intimacy. We have substituted shallow physical encounters for deep spiritual relationships.

The experience of intimacy with God inevitably means that we can establish close and loving relationships with others without inhibition and fear.

7. The condition of homosexuality can be changed.

There is considerable evidence to show that homosexuality is not a fixed for-all-life condition. Many heterosexuals have been drawn into homosexuality through a variety of different influences and encounters, often reverting with considerable pain and guilt to their original condition.

The disorder of homosexuality should not be seen as inherently sinful, but equally it should not be ignored that sometimes it is rooted in either a sinful desire or a corrupting influence, the latter even being transmitted ancestrally. Experience points to the initial need for healing the parent/child relationships from which flows a developed sense of gender.

There is a remarkably high success rate in leading homosexuals into heterosexuality through Christian healing. Countless examples of this are to be found in the ministry of Leanne Payne, the work of ‘Courage’ and others. Rev. John. Hampsch has given much evidence of the healing of homosexuals through the work of ‘Desert Stream’ one of twenty-five groups listed in the central referral agency of Exodus International.

The way in which we perceive ourselves and others is fundamentally changed when a person grows in Christian faith.

Radical changes, both behavioural and relational, come when the basic problem of homosexuality is properly dealt with and resolved.

Note: See section on Homosexuality in ‘God, Family & Sexuality’ Edited by David W. Torrance (Handsel Press)
The Maranatha Community is a growing Christian movement committed to Healing, Unity and Renewal.