

## HOMOSEXUAL MARRIAGE: A SOCIAL SCIENCE VIEW

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Many people have heard that homosexuality is largely genetically determined, homosexual relationships are essentially the same as heterosexual relationships except for the gender of the partners, homosexual parenting and heterosexual parenting are no different in their affects on children, and homosexual marriage will decrease stigma and thereby increase mental health in our society. A social science perspective and research review give a dramatically different picture.

Some say it does not matter who is loving children as long as they are loved. I saw a resume written by a male homosexual couple seeking a birthmother to give her baby to them to adopt. The heading was, "Your Child Will Have Two Loving Dads." An unspoken consequence was, "Your Child Will Be Motherless." It is hard to imagine the experience of a child who never had a mother or never had a father. **Some psychotherapists** who treat children of same sex couples are reporting that the children do long for the gendered parent they do not have.

How can two mothers, no matter how well they may parent, welcome a son into the deep bonding fellowship of men, give him a parent who has both a masculine soul and a masculine body integrated in one person with whom he can identify, show him how to be a man, give him a primary male parent in his family daily with whom to grow up and form a lifelong loving bond? How can two men provide comparable for a girl?

A same sex couple is inherently deficient in ability to prepare a child for the future heterosexual married life that the vast majority of children will aspire to as adults. Two parents of the same sex cannot teach a child how to relate deeply to both sexes in the same way that growing up with married parents—one of each sex—can.

Nature is narrow; it sets up every child to have a mother and a father. Same sex marriages intentionally alter the natural situation and deprive a child of one of his or her parents. A child is left with a black hole where a mother or father should be. If we were to interject an equivalent new change into the mating and child rearing practices of some members of another species, environmentalists would be screaming (Harris). That some adults intentionally set up a child to be motherless or fatherless because they want to be parents is profound. That a whole society would do it is very profound.

A grave concern for the children is the instability of same sex relationships across cultures. In one large study in America and Canada (Jay

and Young, 1997), 38 percent of male homosexuals said the longest relationship they had ever had was less than one year. The average length of longest relationship and the most frequent response for the men was 2 years. The longest relationship for lesbians was on average thirty-eight months (Jay and Young, 1979, pp. 340, 302).

By contrast, the highly regarded National Health and Social Life Survey (NHSLs) reported that most Americans marry, and the average length of marriage for Americans in general is a quarter century (Laumann, et al., 1994, p. 106).

Legalized homosexual unions have a much higher divorce rate than heterosexual unions. In Sweden, homosexual unions have a dissolution rate fifty percent higher than heterosexual unions. In Norway and Sweden, lesbian unions have a dissolution rate about double that of male homosexuals, and this finding persists when length of relationship and other demographic variables are controlled (Andersson, et al, 2006).

The Netherlands has had registered partnerships since 1998 and full homosexual marriage since 2001. Even so, homosexuals in the Netherlands less frequently reported having a steady sexual partner compared to heterosexuals (Sandfort, Graaf, and Bijl, 2001, p. 4; Bailey, 1999). The average range of male homosexual relationships in the Netherlands was 9 months to 2 years, with an average of only 17 months (Xiridou, 2003). The option to marry has not fixed the instability of homosexual relationships.

It may be that those who congratulate themselves on smashing centuries of tradition have done so for couples that are soon parted and leave children with the double tragedy both of being motherless or fatherless and of coming from parted parents.

Sexual promiscuity, particularly random sex with strangers, is high for both sexes of homosexuals, and especially for male homosexuals. The National Health and Social Life Survey (NHSLs) found that the mean number of lifetime partners since the age of 18 for men who *never* had same-gender sex was 15.7, but for men who *ever* had same sex partners it was 44.3, a rate *three times* as high. For women who *never* had same-gender sex, the number was 4.9, but for women who *ever* had same-gender sex, it was 19.7, more than *four times* as high (Laumann, et al., 1994, Table 8.4, p. 315).

A San Francisco study (Bell and Weinberg, 1978) found that thirty-eight percent of white lesbians had had sex with strangers, and 63 percent had had partners with whom they had sex only once. The same study reported that among white male homosexuals studied, 75 percent had had 100 or more sexual partners, 60 percent had had 250 or more sexual partners, 43 percent had had 500 or more sexual partners, and 28 percent, the largest subcategory, reported over 1,000 sexual partners (p. 308). Ninety-nine percent of white male

homosexuals reported they had had sex with strangers, 79 percent reported over half their partners were strangers, and 70 percent said over half their partners were men with whom they had sex only once (pp. 308-309).

Because homosexuals more often have sex with strangers, they are at higher risk of being victims of violence (Dean, et al, 2000, p. 123).

Fidelity of the general American population presents a stark contrast. The National Health and Social Life Survey (NHSLs) found that 67 percent of men and 75 percent of women surveyed had had only one sex partner in the past year (Michael, et al., 1994, p. 102). Heterosexuals indicated very little interest in “kinky” or unusual sexual behaviors such as sado-masochism. Married people were the most physically pleased and emotionally satisfied with the sex they were having. The researchers reported,

...nearly all Americans have a very modest number of partners, whether we ask them to enumerate their partners over their adult lifetime or in the past year. The number of partners varies little with education, race, or religion. Instead, it is determined by marital status or by whether a couple is living together. Once married, people tend to have one and only one partner, and those who are unmarried and living together are almost as likely to be faithful (p. 101).

Since fidelity in the general population holds true regardless of race or whether a couple is married or cohabiting, it is harder to argue infidelity among homosexuals (who make up about **1.4 to 2.7** percent of the general population) is due to stigma or unmarried status.

If homosexual relationships are fulfilling, why are there so many changes in partners? People who are at peace with themselves do not seek random sex with strangers. They do not engage in dangerous, death-dealing behavior.

A study of American and Canadian homosexuals (Jay and Young, 1979) found that 38 percent of lesbians had participated in “threesomes” at least once and 16 percent of lesbians had taken part in orgies or had group sex (p. 534). Among the male homosexuals, 77 percent had participated in “threesomes” at least once (p. 587), 59 percent had taken part in orgies or had group sex (p. 587), 38 percent had taken part in sadomasochism at least once (p. 555), 23 percent had practiced urination in association with sex (p. 555), 24 percent had paid for sex (p. 260), and 13 percent admitted to having practiced bestiality (p. 555). The San Francisco male homosexual study reported 27 percent had paid for sex, and 25 percent had been paid for sex (p. 311).

There have long been rumors of pedophilia (adults having sex with pre-pubescent children) and hebephilia (adults having sex with post-pubescent

children) by homosexuals. The San Francisco study reported 25 percent of the white male homosexuals in their sample admitted they had had sex with partners who were 16 or younger when the respondent was 21 or older (p. 311). This is criminal behavior in California. In a study of American and Canadian homosexuals, 23 percent of respondents admitted to having had sex with youths between the ages of 13 and 15, again a practice that in California is criminal, and 19 percent felt positive about sexual activity with this age group (p. 275-276). Interestingly, 50 percent of the male respondents had their first sex when aged 15 or younger (p. 107), and 20 percent of the females did also (p. 52). Many of the males experienced negative feelings about their first sexual encounter that became more positive later (p. 107).

Not all homosexuals engage in these practices. Some homosexuals condemn these practices, but many, including some gay activist leaders, openly praise them. It should be of huge concern that the stated goal of gay activists is to have the gay lifestyle brought fully into the mainstream of society and everyday living, and homosexual marriage does that.

Gay researchers (McWhirter and Mattison, 1984) studied 156 homosexual male couples that had been together between one and thirty-seven years. They found that one hundred per cent of the couples had infidelity within the first five years. Couples were still together past the ten year mark only if they accepted the painful reality of infidelity in their relationship. The gay researchers said, "In fact, more than 85 percent of the couples report that their greatest relationship problems center on outside relationships, sexual and nonsexual" (p. 256). Some couples arrive at agreements or rules for outside sexual relationships with "anguish, pain, hurt, and heartache" (p. 258). Further, they said, "Our observations lead us to think that these rules are attempts at control in an area that continues to be an elusive source of anxiety and fear for most couples. They feel that the sexual monster inside of each of us needs bridling. We do not trust it in our partners, and least of all in ourselves" (p. 259).

In the San Francisco study, most men who were in a relationship were in an open relationship. They "were not happy with their circumstances, however, and tended (despite spending a fair amount of time at home) to seek satisfactions with people outside their partnership. For example, the Open-Coupled men did more cruising than average" (p. 221-222, 346).

By legalizing same sex marriage, the California Supreme Court has just institutionalized open marriage.

It is not the case that homosexual couples are fine with this infidelity or that it is just heterosexuals who think it makes for anguish and insecurity in relationships. It's not pretty for the partners, and how secure and safe can it be for children? And do we really want to encourage more young people to experiment with taking their lives down this path of anguish and heartache,

disease, and early death by putting society's stamp of approval and equality on it? Is it really good for society to bring this kind of relating into its mainstream?

Relationships that are exclusive, unconditional, and permanent permit the security for people to take the risk of deepening self-revelation over years. Relationships where affection is spread over many people render marriage meaningless. They may be pleasurable to some degree in the short run but do not lead to deepening relationships and fulfillment of deepest human need. They do not provide a secure nest for adults or children.

Further, from a medical standpoint alone, gay male sexual relationships are inherently unhealthy and disordered. Anal intercourse inherently sets up vulnerability to anal tears and bleeding, disease, and early death in a way that is not inherently the same for vaginal intercourse ("Ten Things Gay Men Should Discuss with Their Health Care Providers" from the Gay Lesbian Medical Assoc. website; Dean, et al, 2000). According to a report in the *International Journal of Epidemiology* (Hogg, et al, 1997), "In a major Canadian centre, 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, we estimate that nearly half of gay and bisexual men currently aged 20 years will not reach their 65<sup>th</sup> birthday." Homosexual marriage subjects children to greater risk of parental illness and death. It supports young men to head down an unhealthy and potentially deadly path.

Research has further found that homosexuals of both genders and across cultures have a high rate of drug abuse and/or dependence. (Jay and Young, 1979; Dean, et al, 2000; "Ten Things Gay Men Should Discuss with Their Health Care Providers"; Fergusson, et al, 1999; Sandfort, et al, 2001; Bailey, 1999).

Also across cultures, suicidality is a significant problem. Two large U.S. studies both found that about 40 percent of homosexuals of both genders had either attempted or seriously considered suicide (Jay and Young, 1979; Bell and Weinberg, 1978, p. 450). Other highly regarded studies also confirm the problem (Fergusson, 1999; Herrell, 1999; Bailey., 1999; Sagher and Robins, 1973). Since the problem was found in San Francisco (Bell and Weinberg, 1978) and New Zealand (Sagher and Robins, 1973), among the most gay-supportive areas in the world, it is difficult to argue that higher homosexual suicide rates are explained solely or primarily by social stigmatization. Two-thirds of suicidal behavior followed relationship break-up in the New Zealand study (Sagher and Robins, 1973). The San Francisco study concluded, "Suicidal ideation and suicide attempts are apt to occur at the time of the breakdown or dissolution of a significant 'couple' relationship" (Bell and Weinberg, 1978, p. 216, 457).

An additional characteristic of homosexual relationships is a high prevalence of partner abuse (Greenwood, et al, 2002; Tjaden, et al., 1999, p. 413).

Large, well designed studies found significant evidence across cultures that growing up in an urban area is associated with more homosexuality (Laumann et al., 1994, p308-309, a large study in the U.S.; Frisch and Hviid, 2006, a study of 2 million Danes). The large and well designed National Health and Social Life Survey (NHSLs) (Laumann et al., 1994) found *social attitudes* appear not only to *allow* homosexuality to develop but to *elicit* it. It is well documented that adult homosexuals tend to migrate toward more urban areas. What this study found, however, was that males who lived in urban as opposed to rural areas at the ages of 14 and 16 were more likely to become homosexual.

The elicitation/opportunity hypothesis is the less obvious explanation. It runs counter to the more essentialist, biological views of homosexuality that are so widespread. It implies that the environment in which people grow up affects their sexuality in very basic ways. But this is exactly one way to read many of the patterns that we have found throughout this research. In fact, there is evidence for the effect of the degree of urbanization of residence while growing up on reported homosexuality. This effect is quite marked and strong for men and practically nonexistent for women.... Unlike current residence, residence at age fourteen or sixteen is very unlikely to be the result of a choice by the respondent based on sexual preference” (p 309).

The study of 2 million people in Denmark found being born in the capital area as opposed to rural areas was associated with higher rates of homosexuality for both males and females. The U.S. study also found that “women who have graduated from college always report the highest level of same-gender sexuality” (p. 309). “Higher levels of education are associated with greater social and sexual liberalism...and with greater sexual experimentation” (p. 310).

These findings run counter to a common belief in the general public that it has been proven that homosexuality is largely genetically determined. The official stance of many major mental health professional associations is that there currently is no consensus that this is so (American Psychiatric Association, American Psychological Association, National Association for Social Workers, and California Psychological Association in their Amicus Brief to the California Supreme Court in re. of marriage, 2007, p. 33)

Environments that appear to increase homosexuality include not only urban areas and colleges, but also families headed by homosexual parents (Green et al, 1986; Bailey, et al, 1995; Tasker and Glombok, 1995; Lerner and

Nagai, 2001, p. 60). One study of children of homosexual parents reported (Miller, 1979), “Evidence in the children’s biographies pointed to problems of sexual acting out,” including premarital pregnancies, abortions, prostitution, etc. (reported in Lerner and Nagai, p. 51). But pro-gay researchers claim no differences in outcomes for children from heterosexual or homosexual parenting, and they consider a higher incidence of homosexuality in children of homosexual parents to be of no consequence.

Numerous qualified research investigators, including some leading pro-gay researchers who have conducted homosexual parenting studies, have found that studies on the question of homosexual parenting have serious methodological flaws and that no generalizations can be drawn from them. (Patterson, 2000, 2004; Schumm, 2004; Lerner and Nagai, 2001; Nock, 2001, Fitzgerald, 1999; Sears, 1994; and Rekers and Kilgus, 2002).

Lerner and Nagai (2001) reviewed 49 original research studies on homosexual and heterosexual parenting and found that seriously inappropriate use of statistical methods resulted in a 77% to 92% probability (varying by study) of finding no differences due to error and chance alone. As Lerner and Nagai point out, “Ironically, each poorly executed research step, such as setting up comparison groups, sampling, measurement, and statistical analyses, increases the likelihood of finding no difference” (p. 21).

Many professional mental health organizations in the U.S. and California agree that “relatively few studies have directly examined gay fathers” (Amicus Brief, p. 29).

Reker’s review of the reviews on same-sex parenting points out that some studies document distress and problems from the children’s perspective, while other studies that only ask homosexual parents to report on their own parenting selectively do not ask about these variables (Rekers, 2004, p 58).

Nock (2001) observed there is no basis by which to know whether the benefits of marriage “are the result of marriage, per se, or heterosexual marriage” (p. 41). Additionally, he noted the assertion that the only difficulties suffered by children of same sex parents are the result of prejudice remains untested (p. 42).

Research has not made the case that same sex lifestyle and relationships are as healthy for adults and young people or as healthy for raising children.

Is it a social good to encourage more young people to experiment with going down a path that includes higher rates of disease, early death, drug abuse or dependency, partner battering, violence from sex with strangers, never having children or having children who will be motherless or fatherless and who will be at higher risk of going down the same path, never having a long term relationship or having one only with anguish and heartache over infidelity

or with more dependency that can become life-threatening, many relationship breakups, or suicidality? How should we, as members of our society, direct our compassion? Wouldn't preventative measures be in order? Shouldn't we warn against, not enable experimenting with, taking this path?

At present, California curriculum includes units about families, beginning in kindergarten. The legalization of same-sex marriage opens the door for children from kindergarten on up to be taught that the state of California validates that marrying someone of the same sex is as legal and acceptable an option for them as marrying someone of the opposite sex. How would this impact required curriculum units such as family, health, values, child development, sex education, and history? Based on present research showing that the liberal sexual attitudes in colleges not only allow but actually elicit homosexuality, we should expect that extending education about liberal sexual attitudes down through kindergarten will elicit many more of our children to go down the path of homosexuality. Some parents who have raised their children in traditional sexual values have been shocked at how much those values have changed when their children went to public high school or college. The same effect will begin in kindergarten if same-sex marriage is allowed to stand in California, and the strong precedent in California will be used to extend the changes across the U.S.

Marriage cannot fix disordered relationships. Is it good for children to be placed at higher risk of growing up with such conditions and behaviors in their parents? Does it improve mental health to tell society that these kinds of relationships are equal, approved, or healthy? Is it a social good to bring relationships with these qualities at higher rates into the mainstream of society?

There are good reasons why all known societies throughout the history of humankind and all major world religions (World Religions and Same-Sex Marriage, 2002), have never approved same sex marriage, with the only exceptions occurring in the last millisecond in human history. As much as we may empathize with some homosexuals who may want to marry or parent, it is unethical to experiment with children and to send our young people down a path that places them in harm's way. Our children must trump the wishes of some adults. It is a social good to protect marriage as being between a man and a woman.

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