

香港教會更新運動提交的意見書

「反性傾向歧視條例」

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我們從聖經的教導(特別創造與婚姻)，理解同性戀乃是人性墮落的違反自然的性傾向。基督徒慎防患上「同性戀恐懼症」(homophobia)而拒絕任何「同性戀」人仕。

我們對「同性戀」者應當尊重與接納，乃是基於對方仍是按著神創造的個體(person)，我們對神所創造而又墮落人性表示肯定，並非意味著接納其行為表現。人的性傾向，是否天生而不能扭轉，科學界至今沒有定論。

有人曾說：「我不贊成同性戀(同性之間的性關係和婚姻)，但並不歧視同性戀者。這是兩回事。正如有幾位我很欣賞和佩服的好朋友，他們是煙不離手的。我沒有因為他們抽煙而歧視他們，但我卻經常勸他們戒煙」(突破 248 期)。對某類偏離正常行為人仕的尊重(如吸毒者、酒徒等)，並不表示認同或提升該等行為合法化，甚或修改現今法例。

我們反對社會把同性戀行為，看成是辨別個人身份的基本元素。我們認為性傾向歧視並不存在，一旦實施「反性傾向歧視條例」，只會帶來更多爭論與混亂。

The Innate-Immutable Argument Finds No Basis in Science

In Their Own Words: Gay Activists Speak About Science, Morality, Philosophy

A. Dean Byrd, Ph.D.

Shirley E. Cox, Ph.D.

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The *Salt Lake City Tribune* has published several articles in recent months regarding homosexuality. While many of the articles are well-written, they do not reflect the scientific literature. In fact, the social advocacy of many of the articles seem to suggest a greater reliance on politics than on science.

Leaving aside the politics of the issue, perhaps it is time to examine the innate-immutable argument about homosexual attraction. First of all--although the issue is enormously complex and simply cannot be reduced to a matter of *nature vs. nurture*--the answer to that debate is probably "yes" --it *is* likely that homosexual attraction, like many other strong attractions, includes both biological and environmental influences.

What is clear, however, is that the scientific attempts to demonstrate that homosexual attraction is biologically determined have failed. The major researchers now prominent in the scientific arena--themselves gay activists--have in fact arrived at such conclusions.

Researcher Dean Hamer, for example, attempted to link male homosexuality to a stretch of DNA located at the tip of the X chromosome, the chromosome that some men inherit from their mothers. Referring to that research, Hamer offered some conclusions regarding genetics and homosexuality.

"We knew that genes were only part of the answer. We assumed the environment also played a role in sexual orientation, as it does in most, if not all behaviors....

Homosexuality is not purely genetic...environmental factors play a role. There is not a single master gene that makes people gay....I don't think we will ever be able to predict who will be gay."

Citing the failure of his research, Hamer further writes,

"The pedigree failed to produce what we originally hoped to find: simple Mendelian inheritance. In fact, we never found a single family in which homosexuality was distributed in the obvious pattern that Mendel observed in his pea plants."

What's more interesting is that when Hamer's study was duplicated by Rice *et al* with research that was more robust, the genetic markers were found to be nonsignificant. Rice concluded.

"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 at position XQ 28."

Simon LeVay, in his study of the hypothalamic differences between the brains of homosexual and heterosexual men, offered the following criticisms of his own research:

"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.

"INAH3 is less likely to be the sole gay nucleus of the brain than part of a chain of nuclei engaged in men and women's sexual behavior...Since I looked at adult brains, we don't know if the difference I found were there at birth, or if they appeared later."

Indeed, in commenting on the brain and sexual behavior, Dr. Mark Breedlove, a researcher at the University of California at Berkeley, demonstrated that sexual behavior can actually change brain structure. Referring to his research, Breedlove states,

"These 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."

Our Perception of Science Alters Politics

LeVay made an interesting observation about the emphasis on the biology of homosexuality. He noted, "...people who think that gays and lesbians are born that way are also more likely to support gay rights."

The third study, which was conducted by Bailey and Pillard, focused on twins. They found a concordance (both twins homosexual) rate of 52% among identical twins, 22% among non-identical twins and a 9.2 % among non-twins. This study actually provides support for environmental factors. If homosexuality were in the genetic code, all of the identical twins would have been homosexual.

Prominent research teams Byne and Parsons, and also Friedman and Downey, each concluded that there was no evidence to support a biologic theory, but rather than 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."

Are homosexual attractions innate? There is no support in the scientific research for the conclusion that homosexuality is biologically determined.

Is Change Possible?

Is homosexuality immutable? Is it fixed, or is it amenable to change? The 1973 decision to delete homosexuality from the diagnostic manual of the American Psychiatric Association had a chilling effect on research. The A.P.A. decision was not made based on new scientific evidence--in fact, as gay-activist researcher Simon LeVay admitted, "Gay activism was clearly the force that propelled the APA to declassify homosexuality."

In reviewing the research, Satinover reported a 52% success rate in the treatment of unwanted homosexual attraction. Masters and Johnson, the famed sex researchers, reported a 65% success rate after a five-year follow-up. Other professionals report success rates ranging from 30% to 70%.

An article in the *Monitor on Psychology* reviewed the research of Dr. Lisa Diamond, a professor at the University of Utah, who concluded that "Sexual identity is far from fixed in women who aren't exclusively heterosexual." What is more intriguing is the research of Dr. Robert Spitzer, the prominent psychiatrist and researcher at Columbia University. Dr. Spitzer was the architect of the 1973 decision to remove homosexuality from the diagnostic manual, a gay-affirmative psychiatrist, and a long time supporter of gay rights. His current study focused on whether or not individuals can change. His preliminary conclusions are:

"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."

What was most interesting was Dr. Spitzer's response to a journalist who inquired what he would do if his adolescent son revealed his homosexual attraction. Dr. Spitzer's said he hoped that his son would be interesting in changing and would get some help. It is interesting to note that Dr. Spitzer has received considerable "hate mail" and complaints from his colleagues because of his research.

Is homosexual immutable? Hardly. There is ample evidence that homosexual attraction can be diminished and that changes can be made.

Comparative Levels of Mental Health: The Data

What is particularly disturbing is the lack of attention paid by the media to the research evidence reported in the *Archives of General Psychiatry* which concluded that gay, lesbian and bisexual people were at higher risk for mental illness, specifically suicidality, major depression and anxiety disorder.

While one might suggest that society's oppression of homosexual people may be the cause of such mental illness, this may not be the case. In fact this study corroborated the findings of a prior, a well-conducted Dutch study, and Dutch society is a very gay-affirming and gay friendly society.

Bailey (of the twin study) offered other possible reasons for significantly more mental illness in homosexual individuals: "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." Bailey 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."

Regarding change and the right to treatment, lesbian activist Camille Paglia offered the following observations:

"Homosexuality is not 'normal' On the contrary it is a challenge to the norm...Nature exists whether academics like it or not. And in nature, procreation is the single relentless rule. That is the norm. Our sexual bodies were designed for reproduction...No one is born gay. The idea is ridiculous...homosexuality is an adaptation, not an inborn trait....

"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.

"We should be honest enough to consider whether homosexuality may not indeed be a pausing at the prepubescent stage where children anxiously band together by gender...current gay cant insists that homosexuality is 'not a choice;' that no one would choose to be gay in a homophobic society. But there is an element of choice in all behavior, sexual or otherwise. It takes an effort to deal with the opposite sex; it is safer with your own kind. The issue is one of challenge versus comfort."

Gay activist Doug Haldeman, at a recent meeting of the American Psychological Association, focused on the right of individuals who were unhappy with their homosexual attraction to pursue treatment aimed at change. He stated,

"A corollary issue for many is a sense of religious or spiritual identity that is sometimes as deeply felt as is sexual orientation. For some it is easier, and less emotionally disruptive, to contemplate changing sexual orientation, than to disengage from a religious way of life that is seen as completely central to the individual's sense of self and purpose...."

"However we may view this choice or the psychological underpinnings thereof, do we have the right to deny such an individual treatment that may help him to adapt in the way he has decided is right for him? I would say that we do not."

Finally, lesbian activist and biologist Dr. Anne Fausto-Sterling of Brown University offers some interesting insight. Referring to the "born that way" argument, she states,

"It provides a legal argument that is, at the moment, actually having some sway in court. For me, it's a very shaky place. It's bad science and bad politics. It seems to me that the way we consider homosexuality is our culture is an ethical and a moral question."

When asked about how much of her thinking about change in sexuality comes from her own life, Fausto-Sterling responded,

"My interest in gender issues precede my own life changes. When I first got involved in feminism, I was married. The gender issues did to me what they did to lots of women in 1970's: they infuriated me. My poor husband, who was a very decent guy, tried as hard as he could to be sympathetic. But he was shut out of what I was doing. The women's movement opened up the feminine in a way that was new to me, and so my involvement made possible my becoming a lesbian."

"My ex and I are still friends. It is true. I call myself a lesbian now because that is the life I am living, and I think it is something you should own up to. At the moment, I am in a happy relationship and I don't ever imagine changing it. Still, I don't think loving a man is unimaginable."

A Moral-Philosophical Issue, or a Scientific Issue?

Gay-activist researcher Dean Hamer makes a revealing statement about science and morality. He states,

"...biology is amoral; it offers no help in distinguishing between right and wrong. Only people, guided by their values and beliefs, can decide what is moral and what is not."

Homosexuality is an issue of ethics and morality. Individuals who experience unwanted homosexual attractions have a right to treatment aimed at reducing those attractions.

Whether or not others agree with that choice is not as important as *respecting their right to make the choice*. In fact, tolerance and diversity demand that they do so.