

Dads4Kids Fatherhood Foundation Submission
Inquiry into the Marriage Equality Amendment Bill 2010



Executive Summary of this Submission

The Dads4Kids Fatherhood Foundation believes it is the fundamental biological birthright of every child to have a mother and a father. A child is conceived when a sperm from a man and an ovum from a woman come together. It is therefore imperative that a child has equal access to both the male and female of his/her parentage. To deprive him/her of either is to deprive him/her of his/her natural birthright. Children need equal access to both their masculine and feminine parentage as they grow into adulthood.

It has been shown in study after study the world over, that children do best when they are raised in a natural biological, married two-parent male and female family. Marriage is the internationally recognised institution to hold the natural biological family of a mother and a father together in the bonds of love to protect the right of the child to equal nurturing and care from both the male and female gender of the child's natural biological family. To deprive the child of this right is the greatest act of discrimination imaginable.

Dads4Kids Fatherhood Foundation rejects the proposed Inquiry into the Marriage Equality Amendment Bill 2010 which defines marriage as *marriage* the union of two people, regardless of their sex, sexual orientation or gender identity, to the exclusion of all others, voluntarily entered into for life.

This is a blatant attack on the rights of the children of Australia to remove their rights to a mother and a father and to superimpose the rights of 1.6% of the adult population. The Dads4Kids Fatherhood Foundation believes that this new definition will not only rob the children of Australia of their biological birthright to a mother and a father but put the children of Australia at risk. The phrase "Sexual Orientation" could be taken to mean in a court of law a proclivity or orientation towards sex with children. Once the definition of marriage is changed where do you stop? The same arguments for so called equality can be used for polygamy and many, many other sexual orientations. Not only the intent of the Bill is fundamentally wrong but introducing the proposition of an imagined right to 'marriage' by members of the same gender is a biological impossibility in the natural world and is in itself an attack on the importance of gender.

The Dads4Kids Fatherhood Foundation believes that marriage should remain as it is, **"the union of a man and a woman to the exclusion of all others, voluntarily entered into for life"**. Dads4Kids Fatherhood Foundation's submission is based on the fundamental importance and uniqueness of both the male and the female gender and for this reason is named '21 Reasons Why Gender Matters'.

Gender Matters: The Importance of Male and Female

Introduction

We live in an age of gender confusion. Much of this is a result of the deliberate attempt by various social engineers to convince us that gender is not fixed or static, but fluid and changeable; that there are not two genders but many genders; that gender is really a social construct; that gender roles are interchangeable; that humans are really androgynous; and that gender is not important in human relationships.

Gender role modelling is also on the decrease, because more and more children are growing up in households other than the mother-father household. The great majority of single-parent households are fatherless.¹ Many boys are growing up without a father figure and most schools have a predominance of female teachers. Boys lack good male role models. Confusion over gender is thus compounded and passed on to future generations.

One of the main examples of gender confusion is what some are calling gender disorientation pathology.² This is the term used to describe homosexual, lesbian, bi-sexual, and transgender relationships. In these and other cases, there is a major distortion or disordering of the male or female gender, and a confusion of both gender and sexuality.

This submission lays out the case for the importance of male and female gender, and argues against the new androgyny, and the social engineering taking place in the arena of gender. It examines some of the evidence that shows men and women are different, including the fact that our brains are different,³ our biochemistry is different, our hormones are different, our strength levels are different, our physical designs and sizes are

different, and therefore our needs for protection and security are different. Such hardwired differences explain why men and women are so different in areas of behaviour, perceptions, the way they process information, and so on.⁴

The importance of gender differences will be explored in three ways:

1. Four foundational principles will be discussed.
2. Twenty-one consequences of gender differences will be examined.
3. A number of public policy recommendations will be proposed which are all related to the protection of marriage for the benefit of the children of Australia which as indicated in the executive summary is the focal point of the Dads4Kids Fatherhood Foundation submission. Our logic is simple. Our gender differences as male and female are the foundation of marriage. Marriage is the foundation of family. Families are the foundation of the nation. Destroy marriage and the gender foundation of marriage and you destroy the nation.

Four Foundational Principles

There is an enormous and growing body of research, encompassing the fields of biochemistry, neurobiology, physiology and psychology, which all point to a clear conclusion: that there are profound differences between men and women. These go well beyond the obvious physical appearances and reproductive differences; men and women differ at many levels, and also approach relationships differently. As such, this document rests upon, and makes the case for, these four foundational principles:

1. Gender differences exist; they are a fundamental reality of our biology and impact our psychology. Our maleness and femaleness is a key aspect to our personhood.
2. Acknowledging, rather than ignoring (or worse denying), gender differences is the only intellectually honest response to this reality.
3. Gender differences are complementary; individuals, our collective humanity, and society as a whole, all benefit from masculine and feminine characteristics. We are better for having men with a clear understanding of their masculinity and women with a clear understanding of their femininity.
4. Gender identity confusion does exist in a small minority of individuals.⁵ It is a painful pathology and warrants a compassionate response. However it is not the 'normative' experience and is not therefore a paradigm upon which to drive social policy and institutions.

Twenty-One Reasons Why Gender Matters

Gender is a basic physiological reality; however it has been politicised. This is not helpful. Men and women are equal but different, and these differences are complementary. In these 21 sections, we examine in some detail the ramifications of gender differentiation. The first fourteen points have more to do with gender in general, while the final seven points have to do more specifically with the issue of gender disorientation pathology.

One: "Gender uniqueness and complementarity means that each gender has a unique contribution to work, society and communication that cannot be filled by the other gender in its entirety."

Sex differences are real and must be affirmed and celebrated. Human beings are hardwired differently according to sex. There are real differences, for example in the brain, which cannot and should not be meddled with by social engineers. Thus the push for complete gender role interchangeability, unisexuality and androgyny is to be rejected.

Men and women bring unique and complementary skills, abilities, gifts and talents to relationships, to work, to society, and to one another. As one expert has put it, "Sex differences are large, deeply rooted and consequential. Men and women still have different natures, and, generally speaking, different preferences,

talents and interests. ... These differences can be explained in part by hormones and other physiological and chemical distinctions between men and women. Thus they won't disappear unless we tinker with our fundamental biological natures."⁶

Yet various social engineers, including extreme feminists and homosexual activists, have sought to ignore or minimise these inherent differences. Their attempts have led to social and personal upheaval.⁷ Nature cannot be so easily thwarted.

Indeed, family expert Allan Carlson speaks of the "overwhelming medical, social, and psychological evidence affirming the naturalness and critical importance of traditional sex roles".⁸ Or as sociologist W. Bradford Wilcox argues, "The primary problem with this androgynous impulse is that it does not recognize the unique talents that men and women bring to the most fundamental unit of society: the family. A growing body of social scientific evidence confirms what common sense and many of the world's religions tell us: Men and women do indeed bring different gifts to the parenting enterprise. Consequently, at all levels of social life - the international, national, and local - public policies, cultural norms, and social roles should be organized to protect rather than prohibit the complementary parenting styles that fathers and mothers bring to family life."⁹

He goes on to show, for example, how vital the complementarity of the sexes is for parenting, according to the social sciences research. "Research on parenting styles and family structure indicates that sex-differentiated parenting helps children in important ways. A review of research on parenting in *Child Development* found that children of parents who engaged in sex-typical behaviour where the mother was more responsive/nurturing and the father was more challenging/firm were more "competent" than children whose parents did not engage in sex-typical behaviour. Another study of adolescents found that the best parenting approach was one in which parents were highly responsive *and* highly demanding of their children."¹⁰

In these and many other ways, the differences between men and women clearly make a difference. Each gender makes a unique contribution to each other, to families, and to society as a whole.

Two: "Acknowledging gender differences helps children learn more effectively."

There is a crisis in boys' education.¹¹ It is because we have classrooms that favour female gender learning patterns and we have disregarded the differences in gender. Same-sex schooling seems to help children learn better. This is because boys and girls are different, and they have different learning styles and skills, and those gender differences need to be acknowledged for the ideal in educational outcomes.¹²

Indeed, major differences start to occur early in children's development. Studies have found that one-day-old baby girls look longer at a picture of a human face, whereas boys look longer at an oval shape with weird alien-like features. Day-old female infants cry longer than male infants when they hear the sound of other crying infants.

These differences are found throughout a child's life. Girls like co-operation more than boys do, and like competition less. They care more about playmates' feelings, and they can read others' emotions better than boys. Girls like one-on-one relationships, and they say sweet, affirming things to friends and put their arms around them. They bond through confiding talk. Girls play house, and their pretend play involves 'more co-operative role playing'

Boys are more self-centred; for example, they have a harder time learning to share, and they act up more and are less likely to be team players in schools. Boys develop strong passions for particular things, the passions seem to arise out of nowhere, and they change through time. A boy might be unable to get enough of cars, trucks or tractors, then of dinosaurs, then music, then computers.¹³

The role of gender in education is controversial within Australian schools and issues that are debated include: whether single sex or co-educational education is best; the extent to which boys are disadvantaged as a result of curriculum being 'feminised;' and the role of gender in how boys and girls best learn.

Increasingly, research suggests that boys and girls do learn differently. In the USA, educators like Michael Gurian argue that biological gender differences influence the way boys and girls learn.¹⁴ One example relates to the observation, at a young age, that girls develop better language skills, especially oral, when compared to boys, and that boys prefer more structured, practical approaches to learning where they have a clear idea of what is required and how success is measured.

The 2002 Commonwealth House of Representatives Report, *Boys Getting it Right*, suggests that attempts to positively discriminate in favour of girls, in part, as a result of the feminist movement of the 60s and 70s, has unfairly discriminated against boys.¹⁵ Examples include the way literacy is taught – the whole language, ‘look and guess’ approach better suits girls as boys need the more structured, systematic approach represented by phonics and phonemic awareness – and the increasing emphasis in mathematics on reading and writing skills as opposed to traditional methods involving computation skills. In recent years, it is also the case that girls outperform boys in year 12 examinations and national literacy tests. The report calls for an emphasis on the qualitative needs of boys’ education and a more balanced approach in how gender issues are presented in schools.

Researchers associated with boys’ education, such as Dr Peter West, recently retired from the University of Western Sydney, also argue that much of contemporary education unfairly stereotypes boys as aggressive and difficult to teach and that many schools fail to properly support and celebrate male qualities.¹⁶

During the 70s and 80s teacher union groups like the Australian Education Union either argued against or appeared equivocal about the benefits of single sex schools – in part, the hostility was caused by the union’s dislike of non-government schools. The fact that the academic results of single sex schools, as measured by year 12 results, are stronger than co-educational schools suggests that there are benefits in educating boys and girls separately. Such are the perceived benefits of single-sex education, that increasing numbers of Australian co-educational schools are introducing single sex classes in an attempt to develop a more effective learning environment. Anecdotal evidence suggests, especially after the advent of puberty, that students benefit from single sex education as there is not the same pressure to conform to gender stereotypes evident in co-educational schools.¹⁷

Boys used to do slightly better at school than girls, but this was reversed in the 1980s. As before mentioned our schools began to change. Virtually every new educational fad and curriculum change from this period has disadvantaged boys. These include continuous assessment and fewer exams, ‘dumbing down’ science and maths, and highly verbal ‘communicative’ teaching techniques. This has resulted in boys slipping further behind in their final TER marks. According to Pru Goward, former Sex Discrimination Commissioner, “Overall, girls achieve better academic results than boys at year 12. In NSW, for example, there is now a gap of 19 marks out of 100 between the male and female average tertiary entrance scores, the widest gap in Australia.”¹⁸

The implications of all this cannot here be entered into. But consider two ways that this impacts on learning. “The issue of brain difference becomes increasingly important the more words a teacher uses to teach a lesson (that is, the less diagrammatic a teacher is). The male brain, on average, relies more heavily than does the female on spatial-mechanical stimulation and thus is inherently more stimulated by diagrams, pictures, and objects moving through space than by the monotony of words. If a teacher uses a lot of words, the male brain is more likely than the female to get bored, drift, sleep, fidget. This is just one difference.”¹⁹

And a recent British study has found that young boys do better in education, especially in terms of being better behaved, when they have male teachers.²⁰ Other examples could be mentioned, but gender differences do matter, and they certainly matter in our children’s ability to learn.

Three: "Men and women are happier and healthier when they acknowledge and celebrate their respective gender differences."

People with a secure gender identity tend to lead more balanced, more healthy, more happy lives. Gender confused individuals tend to have more emotional, mental, psychological problems than those with a healthy gender makeup. For example, transgender, bisexual trans-sexual persons, and transvestites, experience many difficulties because of their gender disorientation.²¹

The extreme “gender feminists” have sought to argue that gender is fluid and non-static, and many sorts of genders exist.²² Hence the substitution of the word “gender” for sex. “Gender” is primarily a grammatical term, which may be determined by a distinguishing characteristic, i.e., sex, but gender can also be arbitrary like the gender of some nouns in Spanish and French.

Social activists cannot rid us of biological and empirical facts. Women have hormones that are ideally suited for the nurturing of infants and children. One of these hormones is oxytocin, which is released in large quantities during pregnancy and breastfeeding. It promotes a relaxed state and helps in the bonding process. In addition, prolactin also surges during pregnancy and breastfeeding. This hormone and oxytocin apparently help a mother tolerate routine and monotony. One author notes that oxytocin is “the kindest of natural opiates.”

The oxytocin also reaches the infant through breastfeeding and produces a mutually pleasurable experience and increases attachment between mother and child. Studies have also shown that testosterone levels in fathers actually decrease when an infant enters the family unit and this facilitates nurturance.²³

Yet there are rare exceptions. Congenital malformations are sometimes referred to by the gender feminists. But they are comparatively rare, and they do not prove there are more than two sexes and do not prove that heterosexuality is not natural any more than the fact that some babies are born blind proves that it isn't natural for human beings to see. Biological sex is not determined by external organs alone but by genetic structure. Every cell of the human body is clearly marked male or female, and the human brain, which is the primary sex organ, is masculinised or feminized in the foetal stage of development by the presence or absence of testosterone.

Furthermore, human beings do not exist on a continuum between male and female. Those rare cases of infants born with anomalous genitals deserve sympathy and treatment on the basis of their chromosomal sex, the presence of a “Y” chromosome indicating a male, and its absence denoting a female. The occurrence of such rare abnormalities does not require the re-assignment of the entire human race.

One would have hoped that the debate over whether gender is “learned” rather than innate would have been put to rest after the publication of John Colapinto's book, *As Nature Made Him*. It tells the poignant story of a baby boy, one of identical twins, whose penis was destroyed in a circumcision accident and who was subsequently castrated and brought up as a girl. The treatment/experiment was a massive failure, although touted by its proponent, Dr. John Money, as a great success in spite of the ultimate suicide of Dr. John Money's victim.²⁴

While this case is not identical to recent cases of teenagers seeking sex change operations, it highlights the dangers in gender reassignment which does not match the chromosomes of the individual. An important issue overlooked in the controversy is whether gender re-assignment surgery can ever be justified. Consider just three recent high profile cases:

One. In December 2002 the legitimacy of so-called sex-change surgery was challenged. The 2nd U.S. Circuit Court of Appeals ruled that a New York state employer, P&C Food Markets, was not required to pay for an employee's “gender reassignment.” P&C Food Markets cited conflict in the medical community over whether or not gender dysphoria is a legitimate illness worthy of such severe medical intervention.²⁵

Two. “I would have been better off staying the way I was,” said tennis star Renee Richards, the high-profile sex-change recipient.²⁶ She goes on to say: “I wish that there could have been an alternative way, but there wasn't in 1975. If there was a drug that I could have taken that would have reduced the pressure, I would have been better off staying the way I was - a totally intact person. I know deep down that I'm a second-class woman. I get a lot of inquiries from would-be transsexuals, but I don't want anyone to hold me out as an example to follow. Today there are better choices, including medication, for dealing with the compulsion to crossdress and the depression that comes from gender confusion. As far as being fulfilled as a woman, I'm not as fulfilled as I dreamed of being. I get a lot of letters from people who are considering having this operation...and I discourage them all.”²⁷

Three. “How can outward physical change bring about the needed change within? [After surgery] there is still a painful void,” says a regretful Joseph Cluse, who in 1979 had surgery in Trinidad, Colorado. “Relationships are destroyed and everyday I have to live with scars. The mirror is ever before me.”²⁸

Transsexuality signals a deceptively fierce disorder. Elective castration, mastectomy, hysterectomy, etc., are futile non-solutions. The cruel, permanent disfigurement of so-called gender reassignment is not the answer. Transsexuals need psychological and spiritual insight that frees them to celebrate the chromosomes they received at conception.

There is a determined push by the homosexual rights movement to legitimize sex changes and also for the right for birth certificates to be altered to show the "new" gender, even when there has been no hormone treatment or surgery, i.e. individuals should have the right to be regarded as male or female regardless of anatomy and based solely on their feelings of self-identification. This would make arguments about same-sex marriage redundant and make a mockery of marriage because any couple could define themselves as male and female and get married under existing laws.

Activists demanding same-sex marriage, and the creation of IVF children without fathers, require us to reject the fundamentally gendered nature of our humanity and its biological foundation. Children need both a mother and a father. Men and women are different but equal. Men and women are happier and healthier when they acknowledge and celebrate their respective gender differences.

Four: "The masculine gender is an essential ingredient for fatherhood, and children raised by a committed father do much better in life."

Men and women are different, and both bring unique qualities to parenthood. Fatherhood is indispensable, and is premised on masculinity, maleness, being a man. Research is quite clear that children need a loving father to protect, defend and guide them. Children growing up without fathers experience numerous problems, including: an increased risk of being involved in crime and criminal activities; a greater likelihood of involvement in illicit drug use, alcohol consumption and tobacco use; a greater chance of committing suicide; a greater likelihood of developing mental health problems; an increased risk of sexual promiscuity and other sexual problems, including, gender confusion issues; an increased risk of becoming a victim of child sexual abuse; and a greater chance of growing up poor or in poverty.

Due to the enormous efforts of highly devoted, hard-working mothers and/or others brought in to aid them, children who grow up without fathers do not always experience these negative outcomes, but generally speaking, such problems are the usual result of growing up in fatherless families. The research on this has become quite extensive and persuasive.

Indeed, so much research on the negative impact of fatherlessness has accumulated over the years that a number of book-length summaries have been written to cover all the data.²⁹ There has also been a large amount of Australian data to back up this international research.³⁰

Two Canadian studies suggest that there is much more to masculinity than testosterone. While testosterone is certainly important in driving men to conceive a child, it takes an array of other hormones to turn men into fathers. And among the best fathers, it turns out, testosterone levels actually drop significantly after the birth of a child. If manhood includes fatherhood, which it does for a majority of men, then testosterone is hardly the ultimate measure of masculinity.

In fact, the second of the two studies, which was recently published in the Mayo Clinic Proceedings, suggests that fathers have higher levels of estrogen, the well-known female sex hormone, than other men. The research shows that men go through significant hormonal changes alongside their pregnant partners, changes most likely initiated by their partner's pregnancy, and ones that even cause some men to experience pregnancy-like symptoms such as nausea and weight gain. It seems increasingly clear that just as nature prepares women to be committed mothers, it prepares men to be devoted fathers.³¹

And the broader issue of how children thrive in a biological two-parent family also ties in here. Most often when the two-parent family is not found, it is the father who is missing. Thus single-parent families are overwhelmingly headed by overworked and overtaxed mothers. The research on these sorts of households shows the negative outcomes for children. And again, the research is massive, with good summaries of the data now available.³² Moreover, the Australia data replicates the findings from overseas.³³

The various ways in which children need, and thrive with, a father cannot be recounted here. But just one small example can be offered: fathers are essential in playing with their children, especially boys, in what is known as rough and tumble play. This enables boys to sublimate their excess energy and use their muscles in a socially acceptable way. One of the reasons for so much anti-social behaviour by boys - vandalism, street fighting, gangs, etc. - is because of father-absence. In single mother families, the mothers do their best, but cannot substitute for the absent father.³⁴

Indeed, one youth worker who has counselled many hundreds of delinquent young males has noted that the reason they tend to gravitate toward gangs and violence and drugs is precisely because of being brought up in father-absent households. He says that "almost 100 per cent" of these kids are from "single parent families or blended families".³⁵

Thus maleness and fathers are indispensable to the wellbeing of society and the healthy development of children.

Five: "The feminine gender is an essential ingredient of motherhood, and children do better in life with an involved and committed mother."

Motherhood is indispensable, and is premised on femininity, femaleness, being a woman. Common sense observations are fully supported by the research. This research shows quite clearly that women are different from men, and that children need a mother. Children growing up without mothers experience numerous problems.³⁶

Nature has clearly differentiated mankind into male and female. The sexes were designed to be complementary. For example, in the human species, men are physically stronger and bigger and have the role of protector and provider, and women having the functions of gestation and lactation, are superbly designed for nurturing the young.

Of course there is substantial overlap between the roles of provider and nurturer - obviously some women can earn a good living and provide for themselves and their families, and men can often care for and raise children, but there is an essential irreducible difference.

Advances in science show how false are the theories of human androgyny, because sex differences are detectable not only before birth but even before conception. As an example, Dr. Landrum Shettles of the Columbia-Presbyterian Hospital, New York is credited with being the first to identify the differences between the androsperm, the Y-chromosome bearing sperm which produces male babies, and the gynospem, the X-chromosome bearing sperm which produces female babies.³⁷ It should be obvious that sex differences as identified by Shettles are not caused by social conditioning or discrimination.

The truth is, children need both fathers and mothers. Yet it is only women who can bear and breastfeed babies, and their role as nurturers and carers is clearly found throughout history and all human societies. Dr. John Bowlby, in two definitive books, *Maternal Care and Mental Health*³⁸ and *Attachment and Loss*,³⁹ described the harmful effects on babies and young children of being deprived of maternal care.

In regard to maternal care, the health benefits of breastfeeding are many. Breastfeeding helps the uterus to contract after childbirth, reduces bleeding and has a long-term benefit in reducing breast cancer risk. Breast milk protects infants from gastric and respiratory tract infections, has long-term benefits in reducing the risk of obesity, asthma and other allergies, while improving the IQ potential of breastfed babies.⁴⁰

The origins of human love begin in a mother's arms - with the attachment described as the 'mother-infant' bond. This bond is the basis for the mental development and future emotional stability of the baby. Mother-infant attachment provides kinesthetic stimulation and mutual gaze patterns: the focal length at which the baby sees clearly is approximately the distance from the mother's breast to her eyes. This is an important reason for breastfeeding - with bottle-feeding, the baby's eyes are focused on the bottle, not on the mother's face. "Many psychologists believe the nursing baby enjoys a sense of security from the warmth and presence of the mother, especially when there is skin-to-skin contact during feeding. Parents of bottle-fed babies may be tempted to prop bottles in the baby's mouth, with no human contact during feeding. But a nursing mother

must cuddle her infant closely many times during the day. Nursing becomes more than a way to feed a baby; it's a source of warmth and comfort."⁴¹

Humans are the only mammalian species which breastfeed face to face, and not with the baby's face buried in the mother's fur or her underbelly. The mutual eye contact aids brain development and provides the stimulus for smiling, the first social response of the human infant.

The pattern of nurturing provided by mothers is different to that by fathers. Mother care is more emotional, tactile, emphasising caution while the father is an authority figure who disciplines, but also encourages activity, adventure and exploration. Fathers throw young children up in the air, and the toddler squeals in delight as the father catches him. Mothers rarely do this, they cuddle and kiss.⁴²

It's well known that hormonal changes caused by pregnancy encourage a mother to love and nurture her child. But it has long been assumed that a father's attachment to his child is the result of a more uncertain process, a purely optional emotional bonding that develops over time, often years. Male animals in some species undergo hormonal changes that prime them for parenting. Two studies, conducted at Memorial University and Queens University in Canada, suggest that both mothers and fathers are uniquely affected by hormones.⁴³

The hormone prolactin gets its name from the role it plays in promoting lactation in women, but it also instigates parental behavior in a number of birds and mammals. Male doves who are given prolactin start brooding and feeding their young. Storey found that in human fathers, prolactin levels rise by approximately 20 per cent during the three weeks before their partner gives birth.

A second hormone, cortisol, is well known as a stress hormone, but it is also a good indicator of a mother's attachment to her baby. New mothers who have high cortisol levels can detect their own infant by odor more easily than mothers with lower cortisol levels. The mothers also respond more sympathetically to their baby's cries and describe their relationship with their baby in more positive terms. Storey and her colleagues found that for expectant fathers, cortisol was twice as high in the three weeks before birth than earlier in the pregnancy.⁴⁴

The maxim that nature knows best certainly applies here to the irreplaceable role of mothers. There are particular and important differences between what fathers and mothers are able to offer their children. While respecting the often heroic efforts made by lone parents, people do not usually enter into parenthood intending to be a single parent. Single mothers and fathers wish that they could still enjoy the complementary contributions of a spouse to the raising of their children. To suggest that fathers' and mothers' contributions to the raising of children are exactly the same is to 'dumb down' sexual difference and complementarity. And as will be discussed, mothers and children still need and benefit from the physical support and protection of a loving and devoted husband/father.

Six: "Marriage is the best way for men and women to enjoy gender complementarity."

Marriage is a wonderful social institution which helps men and women most fully and intimately experience their own gender, but also that of the other. The interplay between the sexes is best experienced in the marriage relationship.

Male and female complementarity is experienced in several ways. Firstly it is experienced in the complementary physical design of male and female which clearly has as its purpose, the generation of new life.

Secondly, in the marital embrace, it is experienced in the way that the man, being physically oriented to giving himself, at the same time receives the woman, while the woman, being physically oriented to receiving the man, at the same time gives herself to him. This delicate balance is maintained more perfectly where the physical union is the symbol of "irrevocable personal consent" made in marriage.⁴⁵

Thirdly it is experienced in the tendency for men and women to have areas of specialization due to the differences in their physical, emotional, intellectual and spiritual gifts, which when brought together, complete each other and make for a harmonious richness in their relationship, and in the home they create,

by mutual cooperation, thus providing the best balance between the protection needed and nurture required to raise children.⁴⁶

Marriage, as opposed to other coupling arrangements, is an “act of irrevocable personal consent” wherein each spouse gives not just their bodies, but all they possess - their heritage, their future, everything, including their very being. Marriage is therefore both sacrificial and sexual. Each spouse brings their own unique gifts that dovetail together to complete and perfect the other.

The marital act is the physical expression of the essence of marriage – the fusion of not only two bodies, but the fusion of two persons. When we deny the very real differences between men and women, sexual relations become more problematic. As Danielle Crittenden said, “So long as we persist in pretending that our sexuality is essentially the same as men’s, we will be unable to confront the very real problems that arise from our differences”.⁴⁷

It is precisely because marriage is a permanent bond oriented towards the good of society that it provides the best framework wherein all those incorporated within the bond (spouses and children), and others touched by it (relatives, friends and neighbours), are free to express their uniqueness for the benefit of the others.

The research into the benefits of marriage is voluminous. Married people, generally speaking, tend to live longer, happier and healthier lives than those in non-married states.⁴⁸ And the Australian data supports the conclusions found from overseas research.⁴⁹ As one family expert has put it, “Scholarly research does show that participating in the institution of marriage ... adds stability and longevity to a relationship. After all, that’s one of the main purposes of the institution.”⁵⁰

Seven: "Gender complementarity in a life long committed marriage between a man and a woman is essential for the continuation of humanity."

If love and marriage go together like a horse and carriage, then so does marriage and having babies. All Western nations are now seeing the importance of reversing the trend of falling fertility rates. Being married is perhaps the best guarantee we have for bringing more children into the world.

Analysing the 2006 Census data, Dr Bob Birrell, director of the Centre for Population and Urban Research at Monash University, reminds us that “Marriage is still so important to sustaining a relatively stable fertility rate. Cohabiting doesn’t serve the same purpose in terms of childbearing.” At age 30-34, for example, 47 per cent of female de facto partners have no children, compared with 21 per cent of wives, and at age 40-44 only 8 per cent of wives are childless, but almost one-quarter of female de facto partners do not have children.⁵¹

At age 30-34, for example, 49 per cent of men were married compared with 57 per cent 10 years earlier. At the same age, 56 per cent of women were married compared with 65 per cent 10 years earlier. Among men aged 30-34, the proportion cohabiting had risen to 18 per cent from 11 per cent a decade ago and among women from 9 per cent to 15 per cent.

An increasing trend towards cohabitation rather than marriage poses a threat to Australia’s overall fertility rate which, at just 1.81 babies per woman in 2005, is already well below the replacement rate of 2.1 babies per woman.⁵² The real impact of this below replacement level fertility will kick in as the current large cohorts of baby boomer generation women, having now moved out of their reproductive years, are succeeded by the smaller cohort of women from the next generation.⁵³ This smaller cohort, if combined with increased preference for cohabitation over marriage, will lead to a dramatic fall off in the number of births and a serious demographic crisis.

Earlier studies conducted by Monash University came to similar conclusions: “The decline in partnering has contributed to the fall in Australia’s total fertility rate to well below replacement rate. Almost all women in married couples (aside from those with infertility problems) have children by the time they reach their late thirties. Thus any decline in married partnering rates will be associated with lower birth rates. In Australia, most of the decline in marriage rates has occurred amongst women without post-school qualifications. When these women do get married, they have more children than their degree-qualified counterparts. This is why the decline in partnering amongst the majority of women who do not have degrees is such a serious issue for any prospect of raising fertility in Australia.”⁵⁴

International statistics demonstrate the correlation between marriage decline and fertility decline. In a recent thirty year period, falling marriage rates have been closely accompanied by falling fertility rates. In Ireland, for example, a 43 per cent fall in the Total First Marriage Rate between 1974 and 2003 was matched by a 50 per cent fall in the Total Fertility Rate. In Spain a 42 per cent drop in the marriage rate was matched by a 59 per cent drop in the fertility rate. In Australia a 23 per cent marriage rate drop was matched by a 32 per cent fertility rate drop.⁵⁵

As family expert Allan Carlson puts it, “These numbers show that, as traditional marriage fades, there will be a paucity of children and a diminished nation. The retreat from true marriage and the retreat from children go together.”⁵⁶

Eight: "Gender complementarity in a life-long committed marriage between a man and a woman is needed for a healthy, stable society."

The importance of marriage to society has long been noted and documented. Healthy marriages make for healthy societies, and unhealthy marriages can lead to unstable and fragmented societies.

Societies throughout human history have recognised and favoured marriage because married couples provide so many benefits to society. The natural family, cemented by marriage, is a mini-welfare state, education system, health care service and socialising institution. As one commentator has put it, “Society attaches benefits to marriage because the married have undertaken crucial social responsibilities.”⁵⁷

Indeed, John Locke once called marriage humankind’s “first Society”.⁵⁸ But he was predated by the Roman statesman and orator Cicero who said 2000 years ago: “Marriage is the first bond of society.”

For J.D. Unwin of Cambridge University, marriage is seen as the crucial element in the development and maintenance of healthy societies: “The whole of human history does not contain a single instance of a group becoming civilised unless it has been completely monogamous, nor is there any example of a group retaining its culture after it has adopted less rigorous customs. Marriage as a life-long association has been an attendant circumstance of all human achievement, and its adoption has preceded all manifestations of social energy. . . . Indissoluble monogamy must be regarded as the mainspring of all social activity, a necessary condition of human development.”⁵⁹

Or as family expert David Blankenhorn puts it, “Marriage is not just a private relationship but a public institution. Social institutions exist to meet fundamental human needs. The need for the institution of marriage arises because human beings are ‘sexually embodied creatures who everywhere reproduce sexually and give birth to helpless, socially needy offspring who remain immature for long periods of time and who therefore depend on the love and support of *both* of the parents who brought them into existence’.”⁶⁰

The obverse is also true. When marriage breaks down, along with the very idea of marriage, then societies struggle to stay together. As but one example, consider the disintegration of the Black American family, and the ensuing negative consequences. Thirty years ago American Senator Daniel Patrick Moynihan wrote a report called “The Negro Family: The Case for National Action”. The central insight of this report was that family stability should be the basis of social legislation. Said Moynihan, “A community that allows a large number of young men to grow up in broken families, dominated by women, never acquiring any stable relationship to male authority, never acquiring any set of rational expectations about the future - that community asks for and gets chaos.”⁶¹

The social costs of marriage and family breakdown have been widely documented. See for example our earlier publication, “Twenty-One Reasons Why Marriage Matters.”⁶²

Also, stable relationships help make for stable societies. Consider the differences between heterosexual relationships and homosexual relationships. While heterosexual couples are not immune from relationship breakdown, infidelity and the like, they are less pronounced than in homosexual relationships.

Faithfulness within a same-sex relationship is extremely difficult to maintain. In a study that set out to disprove the reputed instability of long term homosexual relationships, the homosexual authors located 156

couples whose relationships had lasted between 1 to 37 years. "Two thirds of the respondents had entered the relationship with either the implicit or explicit expectation of sexual fidelity. The results demonstrated that of the 156 couples, only seven had been able to maintain sexual fidelity. Furthermore, of those seven couples, none had been together more than five years. In other words, the researchers were unable to find a single male couple capable of maintaining sexual fidelity for more than five years."⁶³

Studies of heterosexual marriages or co-habiting heterosexual relationships on the other hand show a much higher rate of fidelity – one study shows 94 per cent and 75 per cent respectively in a 12 month period.⁶⁴

Heterosexual married couples have a far lower rate of relationship breakdown than homosexual couples. As an Australian Government report stated, "According to a 1995 study, ten per cent of marriages failed within six years, 20 per cent within ten years, 30 per cent by twenty years, and 40 per cent by thirty years."⁶⁵

In comparison, a study of the Melbourne homosexual community showed that 40 per cent of men had changed partners in the past 6 months; 9.8 per cent had been in a relationship for only six months to a year; 18.8 per cent for 1-2 years; 15.3 per cent had lasted for 3-5 years; and only 15.7 per cent were in a relationship of more than five years – meaning 84 per cent had broken down after five years.⁶⁶ This figure compares with married couples where only ten per cent of marriages failed in the first six years.

Indeed, high rates of multiple partnering in the homosexual community continues to be the norm. As one recent report notes, "The majority of the 2006 respondents had engaged in sex with between one and 10 partners in the six months prior to the survey [over 63 per cent], while almost 20% of the men reported having had sex with more than 10 partners."⁶⁷

Nine: "Gender complementarity in a life long committed marriage between a man and a woman is good for the economy as a whole."

Stable marriages lead to stable societies, which lead to stronger economic performance. We know that married workers tend to be more reliable and productive. When there is peace and stability at home, that helps workers to be more concentrated on their jobs and more productive.

Marriage affects economic well-being significantly, through three mechanisms - economies of scale, risk sharing and division of labour.⁶⁸ Marriage itself appears to raise male earnings by an average of 15 per cent, partly because of division of labour.⁶⁹ Married men earn more per hour but also work more than unmarried men with similar job market characteristics.

Married men have greater work commitment, lower quit rates and healthier and more stable personal routines (including sleep, diet and alcohol consumption).⁷⁰ Marriage also encourages savings and asset accumulation and reduces poverty. Cohabitation does less to raise overall incomes than marriage does. Divorce lowers income and economic status.⁷¹

And the reverse is also true. Marriage breakdown imposes a huge cost on the rest of the community. An Australian government study found that divorce and family breakdown cost the Australian community \$2.8 billion annually (a figure which is "necessarily conservative").⁷²

It is not just the whole community that suffers, but individuals as well. When people marry, they greatly improve their financial situation, but when they divorce, they lose out. Women and children are the big economic losers in divorce. For example, wives' standard of living after divorce drops by around 27 per cent.⁷³

As but one Australian example, a recent joint report from AMP Life and Canberra University's National Centre for Social and Economic Modelling says that divorce leaves both partners worse off economically, but women tend to experience the biggest fall in disposable income.⁷⁴

Ten: "Marriage involving a man and a woman is the foundation of a successful family and the best way to protect children."

Marriage is the best means to bring and keep a man and a woman together, to regulate human sexuality and to raise the next generation. The evidence is quite clear as to how children are most free from abuse and other problems when living with their biological parents, cemented by marriage.

As one leading expert has put it, "Research clearly demonstrates that children growing up with two continuously married parents are less likely than other children to experience a wide range of cognitive, emotional, and social problems, not only during childhood, but also in adulthood."⁷⁵

Children brought up in homes with two parents who are married experience many advantages over those who do not. Consider just one aspect of this: "Health, especially that of children, is also highly correlated with family structure. . . . Regardless of the race, age, or income of its mother, a child is more likely to die in infancy if born out of wedlock. Even a mother's education matters less than her marital status: infant-mortality rates are higher for children of unmarried mothers who are college graduates than of married high-school dropouts."⁷⁶

The risk of child abuse is also significantly increased in non-married, non-natural family households. As but one example, former Australian Human Rights Commissioner Brian Burdekin reported a 500 to 600 per cent increase in sexual abuse of girls in families where the adult male was not the natural father.⁷⁷

If marriage is good for children, the erosion of marriage is bad for children. The studies on the harmful effects of divorce on children have been substantially and rigorously documented.⁷⁸ A few summary statements must suffice here:

"There is a mountain of scientific evidence showing that when families disintegrate, children often end up with intellectual, physical, and emotional scars that persist for life. . . . We talk about the drug crisis, the education crisis, and the problem of teen pregnancy and juvenile crime. But all these ills trace back predominantly to one source: broken families."⁷⁹

"Australian studies with adequate samples have shown parental divorce to be a risk factor for a wide range of social and psychological problems in adolescence and adulthood, including poor academic achievement, low self-esteem, psychological distress, delinquency and recidivism, substance use and abuse, sexual precocity, adult criminal offending, depression, and suicidal behaviour."⁸⁰

If we are concerned about the well-being of children then we should do all we can to ensure that they are raised in homes with their biological parents in heterosexual marriage.

Eleven: "Gender complementarity in a life long committed marriage between men and women is the best way to teach children the value of gender."

Married male and female parents are the best role models for children, and the best school for passing on the value of two heterosexual parents. In fact the best way to raise children is in the natural tension that is created between both genders. It is in the midst of this tension that a child finds his or her gender identity.

Heterosexual Marriage respects and models the difference and complementarity of male and female. Same-sex relationships promote different models, values and behaviours to heterosexual marriage.

Through marriage we move to a circumstance where we are with an 'other' who is different, who is equal but complementary, who is biologically and psychologically different and yet physically compatible at the most intimate of levels. An acceptance of this natural complementarity of men and women enables an individual to mature in their psychosocial understanding of what it is to be a human person. Same sex relationships cannot welcome children in the same way as a heterosexual couple. This is because same sex couples cannot exemplify the same level of difference and complementarity and openness to new life. Respect for this natural complementarity is described by sociology professor Dr David Popenoe:

"We should disavow the notion that 'mummies can make good daddies' just as we should disavow the notion of radical feminists that 'daddies can make good mummies' . . . The two sexes are different to the core and each is necessary – culturally and biologically – for the optimal development of a human being".⁸¹

Although conducting research in the homosexual community appears to be fraught with methodological problems, the few experimental studies that used modestly large samples of children reared by homosexual parents revealed indications of the impact of parent modelling behaviour and found: "...developmentally important statistically significant differences between children reared by homosexual parents compared to heterosexual parents. For example, children raised by homosexuals were found to have greater parental encouragement for cross-gender behaviour (and) greater amounts of cross-dressing and cross-gender play/role behaviour".⁸²

One Australian study found that out of 9729 Australian males aged 16-59 years, only 1.6 per cent, or 154, self-identified as homosexuals and only 0.91 per cent self-identified as bisexuals. This means only 2.4 per cent of Australian males self-identified as homosexuals or bisexuals.⁸³

While various studies indicate that around two to three per cent of persons have ever practiced homosexual behaviors in their lifetime, a study in *Developmental Psychology* found that twelve per cent of the children of lesbians became active lesbians themselves.⁸⁴

Another longitudinal study which compared children from lesbian families with heterosexual families commented: "With respect to actual involvement in same-gender sexual relationships, there was a significant difference between groups...None of the children from heterosexual families had experienced a lesbian or homosexual relationship. By contrast, five of the seventeen daughters and one of the eight sons in homosexual families reported having at least one same-sex relationship".⁸⁵

Twelve: "Gender is important in understanding the significance of manhood."

Men are unique. They have unique gifts, talents, roles and functions. The uniqueness of maleness needs to be affirmed and celebrated, not denied or minimised. But how does a boy become a man? What significant transitions must occur to move from boyhood into manhood? What role does gender play?

Early childhood research notes that "most children have adopted a gender identity by the age of 2."⁸⁶ As Jordan explains, "*children [at this stage] are still very far from having a fixed notion of what [gender] positioning implies socially*" and "*have only a very hazy impression of what sort of behaviour [and responsibility] that [gender] membership demands of them*".⁸⁷

Before individually based, child-centred pedagogies were embraced by post-enlightenment in the West, most ancient cultures 'initiated' young boys into manhood through "rites of passage" rituals.^{88 89 90} All of these ceremonies had some common features. They all included the ritual of transition, the role of relationship, pain and the acceptance of responsibility. Almost all of these initiation ceremonies coincided with the new level of sexual feeling that a young man feels at puberty. In many ways they prepared him to accept responsibility for his sexual prowess and required a commitment to self control.

When a young male reaches his teen years, he instinctively looks for ways to affirm his manhood. In societies where rites of passage are part of the norm, each young male participates in a formal ceremony during which his manhood is publicly and undeniably affirmed. From that day forward, he is treated differently by those around him and receives more freedom, rights and privileges. In response the young man begins to think and act more as an adult than as a child. For the rest of his life he pursues maturity rather than manhood.

In contrast, a young male living in a society with no formal rites of passage must find his own path to adulthood. Without formal affirmation of his transformation, he vainly tries to find manhood on his own through a variety of means. Sadly, his pursuit of manhood rather than maturity will lead him down many side roads that are fruitless at best, destructive at worst.⁹¹

All human beings experience a series of such transitions in the course of a lifetime. Most ancients saw initiation as a rite of passage into manhood, which had a spiritual dimension. Initiation ceremonies created a coherent belonging system and sub-culture of elders and wise men. Such men carried the responsibility of passing the ritual onto future generations.

Sporting and Hollywood celebrities are often the closest thing to a 'mythic' status in today's culture. Rites of passage in today's world mostly occur in the sporting arena, in places of higher learning (hazing), at the workplace, in the Boy Scouts, and in 'secret societies'. Too many of our young men today are receiving their initiation rites in street gangs and in prison. Binge drinking, eighteenth birthdays, smoking, driver's licences, money, school graduations and first sexual experiences – all seem to comprise the 'markers' of manhood in today's materialistic, secular society. Whilst some of these markers are valid, many are destructive and do not deal with the core issues of manhood and the responsibility that initiation into manhood entails.

Uninitiated men live as isolated individuals. All they can do is fix, calculate and control because no one else appears in control; at least no one they can trust. These insecure men feel they must take personal responsibility for creating all the patterns and making all the connections. To them, the world is an incoherent, fragmented and an unsafe place.

The best an initiate can do is to *discover* and *honour the universal patterns* that are already there. For as much as radical feminism has convinced society that women can initiate their teenage sons into manhood, without a man's input, this isn't possible at all. The truth is, only an older man who is himself been through the storms of life can initiate or call another into manhood. Sometimes this initiation into manhood is quite deliberate. For others it comes through the painful experiences of life. This is where input from the male gender has its most crucial significance in the transformation from boyhood to manhood.

Thirteen: "Gender is important in understanding the significance of womanhood."

Women are unique. They have unique gifts, talents, roles and functions. The uniqueness of femaleness needs to be affirmed and celebrated, not denied or minimised.

Biology is not destiny, but it is statistical probability. Stating that "women are shorter than men" does not mean every woman is destined to be short or that every woman is shorter than every man, but the statement is true for men and women as groups. There is a high probability that a woman will be shorter than her husband - and even more likely that she will be shorter than her brothers - and this sex difference is not caused by 'social conditioning'. Nor does it imply that women are inferior. The entire debate on sex differences has been bedevilled by the accusation that those who suggest "difference" are also implying "inferiority". The true perspective is best stated as "equal but different".

One of the definitive books on sex differences is *The Psychology of Sex Differences* by Eleanor Maccoby and Carol Jacklin.⁹² The authors, both feminists, admit four sex differences which appear to be universal, i.e. true for all cultures:

1. Females have greater verbal ability than boys.
2. Boys excel in visuo-spatial ability.
3. Males excel over females in mathematical ability.
4. Males are more aggressive than females.

To these we can add:

5. Males have greater muscular strength, and are more physically active than females
6. Females excel in tasks requiring fine motor skills.⁹³

Of course there is overlap in these abilities, but in general we see that female verbal abilities assist them in raising and teaching their children, while greater male strength and visuo-spatial abilities are suited to the protector and provider role. The female hormones of oxytocin and prolactin prepare women for nurturing and breastfeeding their young, while the male hormone, testosterone, encourages men to explore, discover and compete in the world outside the home. Testosterone, in particular, has an effect on the male brain not only at puberty but also in utero.⁹⁴

All the available hard statistical data in regard to emotional and social stability and educational and employment outcomes, indicate that children do best in a family composed of their married biological parents, and that they are at risk in alternative settings, particularly in a household where the adult male is not their biological father.⁹⁵

Fourteen: "Gender differences are universally celebrated and acknowledged around the world in healthy societies. Conversely, societies and civilisations which reject gender uniqueness and complementarity often face harmful consequences."

All cultures have been more or less based on gender distinction. Careful studies into human societies have found that gender distinctions are pretty much universal. The universality of gender differences has been backed up by a wealth of information from various fields: neurology, evolutionary biology, and social anthropology for example. All document the socially determinative innate sex differences.⁹⁶

Numerous studies on these innate sex differences could be cited here. The work of neuroscientists in brain research shows that the brain seems to be sexed in the womb from very early on. Gender differences, in other words, are not some social construct, but very much based on brain circuitry and function.⁹⁷

These differences do lead to different social roles, and become most important in parenting. As one expert puts it, "In the study of kinship, a central finding of anthropology is that in the crucial areas of filiation – defined as who the child affiliates with, emotionally, morally, practically, and legally – the overwhelming majority of human societies are bilateral. Almost *all* human societies strongly seek for the child to affiliate with *both* its mother and father."⁹⁸

Attempts to bring about a gender neutral society are relatively recent innovations. Scandinavia in general and Sweden in particular come to mind here. But assessments of these grand social experiments have found many problems associated with these attempts at androgyny.⁹⁹ In seeking to mitigate innate gender differences, there have been some very heavy costs to pay.

As but one example of the negative consequences of seeking to force gender neutrality onto the sexes, consider how boys have fared in such an environment. Christina Hoff Sommers' important 2000 volume, *The War Against Boys*, documents how radical feminist-led attempts to enforce social androgyny has been especially destructive for boys and young men.¹⁰⁰

Finally, on a broader scale, historians have noted the role of moral decline in general and sexual deviancy in particular, as leading causes of the decline of nations. For example, Harvard sociologist Pitirim Sorokin has written much about "sensate culture," and how declining morality and sexual debauchery have led to cultural decay.¹⁰¹

Writing at almost the same period, historian J.D. Unwin studied a number of cultures which had declined throughout history. He noted that the rejection of marriage and sexual morality was a leading contributing factor in the destruction of nations. He wrote: "In human records there is no instance of a society retaining its energy after a complete new generation has inherited a tradition which does not insist on prenuptial and postnuptial continence."¹⁰²

Elsewhere he wrote, "Marriage as a life-long association has been an attendant circumstance of all human achievement, and its adoption has preceded all manifestations of social energy. . . . Indissoluble monogamy must be regarded as the mainspring of all social activity, a necessary condition of human development."¹⁰³

Of course historian Edward Gibbon (1737-1794), had made similar observations several centuries earlier in his seminal work, *The Decline and Fall of the Roman Empire*. He argued that moral decline was part of a series of factors that led to the end of Rome's greatness.¹⁰⁴

Other historians have reached similar conclusions. When societies embrace sexual promiscuity in various forms, including homosexuality, chaos and decline tend to follow. Moral and sexual disintegration are not the only reasons for this decline, but they seem to play a major role.¹⁰⁵ Thus historian Arnold Toynbee was quite right in his famous remark, "Civilizations die from suicide, not murder".

Fifteen: "Healthy gender development is important because it prevents individuals of either gender from developing compulsive obsessive disorders that can lead to sexual addiction and other pathologies."

Consider first the issue of pathology. The whole notion of gender disorientation has been highly politicised in the past few decades. Objective scientific debate has been overwhelmed by advocacy groups driving specific agendas. For example, in 1952, the first edition of the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders (DSM), the official catalogue of mental disorders used by mental health professionals, listed homosexuality as a sociopath personality disturbance. In 1968, the revised DSM II reclassified homosexuality as a sexual deviancy. But in the midst of the sexual revolution, homosexual protestors began picketing the APA's annual conventions, demanding that homosexuality not be identified as a pathology. In 1973, under enormous pressure from homosexual activists, the APA removed homosexuality from its DSM III edition to the dismay of about 40 percent of psychiatrists - particularly those who specialized in treating homosexuals.

Dr. Ronald Bayer, author of the book, *Homosexuality and American Psychiatry*, writes: "The entire process, from the first confrontation organized by homosexual demonstrators, to the referendum demanded by orthodox psychiatrists, seemed to violate the most basic expectations about how questions of science should be resolved. Instead of being engaged in sober discussion of data, psychiatrists were swept up in a political controversy. The result was not a conclusion based on an approximation of the scientific truth as dictated by reason, but was instead an action demanded by the ideological temper of the times."¹⁰⁶ It is hoped that the APA will reverse its position.

Many homosexuals report that as children, they had a dysfunctional relationship with their same-sex parent - such relationships being their primary means of gender identification and affirmation. For some children, particularly those whose parents are separated or divorced, the dissociation from their same-sex parent can cause an unconscious but directive drive for gender identification and affirmation among same-sex peers, which, after puberty, can manifest as sexual behaviour. The search for closure to a dysfunctional relationship with a parent can lead to a lifetime of misery.

Some homosexuals report that they over-identified with their opposite sex parent and peers - thus a boy becomes increasingly feminized while a girl becomes more masculine.¹⁰⁷ In both cases - lack of identity and over identity - there is a common denominator, which is emotional deprivation. In their formative years, all children need emotional and physical closeness with their parents - particularly with their same-sex parent, and they need to develop a healthy sense of their gender identity as male or female.

Healthy gender development secures a person with a positive self esteem, a recognition of one's own value as a man or woman, and the knowledge that sexual love has to do with the giving of oneself as a gift to the beloved, rather than having a neediness which seeks fulfilment through sex. Secure gender identity enables respect for other people of both genders and self control in seeing others as whole people rather than as objects of lust. Their sexuality is channelled within healthy boundaries.

On the other hand, when people are insecure in their sense of gender, many are driven to compensate, and try to build a sense of gender security through sexual activity. Rather than experiencing sex as a bond to a loving, committed relationship, they use sex to attempt to attain, or convince themselves of, gender attributes. Heterosexual men try to convince themselves and others of their prowess through sexual exploits with women. Insecure heterosexual women can seek to build their sense of femininity co-dependently by always needing a man to love them. Similar gender insecurity underlies homosexual need. In her extensive study Dr Elizabeth Moberly explained that "in the male homosexual there is a search to fulfil hitherto unmet needs through the medium of restored attachment (to other men). The fact that this is the quest to resume and complete the identificatory process is particularly apparent when virile partners are sought for the sake of obtaining a 'shot' of masculinity through identification with the partner."¹⁰⁸

Basically, homosexual men, feeling inadequate in their own masculinity, admire masculine qualities in others and seek to absorb them through sexual union. Lesbian relationships often develop from an emotional co-dependency, where feminine love alone can be trusted, to bring completion to the feminine soul.

Same-sex attracted people stagnate in their psychosexual development at the early teen stage of seeking same sex peer affirmation. Their incomplete sense of gender prevents them from developing to the next stage where they desire, and are sufficiently secure to engage in the wholesome give and take of gender complementarity. This is not essentially sexual but has to do with the complementary gender characteristics of thinking, feeling, being and doing.

The outcome of attempting to find gender security through sex is often addiction and various other pathologies. Healthy gender identity cannot be found through sex or sexual relationships, but through the basic human psychological needs of security, significance and emotional intimacy, satisfied through wholesome family relationships, and other positive relationships outside the family.

Sex rates amongst the highest sources of human pleasure. Its fulfilment is within marriage where it serves to bond husband and wife together. Where sexual experience occurs outside a committed relationship, and recurs with different partners, rather than bonding with one person, the pleasure of sex serves to bond the person to the act itself. Where this occurs with members of the same sex it becomes obsessive, then addictive. Dr Jeffrey Satinover writes: "As has been observed by psychoanalysts, the so called "perverse" forms of sexual expression are especially likely to become compulsive. "The concept of addictive sexuality... is introduced in reference to the compulsivity that inevitably accompanies perverse sexuality." This observation is consistent with the enormously greater promiscuity that is typical of the homosexual lifestyle,"¹⁰⁹

Because secure gender identity cannot be found through sexual relationships the underlying insecurities remain, leading to an increased incidence of psychopathological illnesses. Sexual addiction, like any other, is a way of medicating pain, dealing with anger and escaping from depression and a sense of hopelessness. When these emotions are not faced and resolved at their root they often escalate into psychological illnesses.

One study revealed that "the lifetime prevalence for two or more psychiatric disorders for men who engaged in homosexual behaviors was 37.85 per cent versus 14.4 per cent for men who did not engage in homosexual behaviors. For women engaging in homosexual behaviours, the rate for two or more psychiatric disorders was 39.5 per cent versus 21.3 per cent for women not engaging in homosexual behaviours. Society's oppression of homosexual people is a hypothesis unlikely to find support in this study, concluded the Netherlands, which is perhaps one of the most homosexual-affirming and tolerant countries in the world."¹¹⁰

A 1994 national survey of lesbians found that 75 per cent of almost 2,000 respondents had received psychological care, many for long-term depression.¹¹¹ Homosexual, lesbian and bisexual young people were at increased risks of major depression . . . generalized anxiety disorder . . . conduct disorder . . . nicotine dependence . . . multiple disorders . . . suicidal ideation . . . suicide attempts. These researchers further noted that "findings support recent evidence suggesting that homosexual, lesbian and bisexual young people are at an increased risk for mental health problems, with these associations being particularly evident for measures of suicidal behavior and multiple disorders." Another noted, "These studies contain arguably the best published data on the association between homosexuality and psychopathology, and both converge on the same unhappy conclusion: homosexual people are at a substantially higher risk for some forms of emotional problems, including suicide, major depression and anxiety disorder."¹¹²

In another recent study, researchers using data from the California Quality of Life Survey of 2272 adults found that "Gay men and bisexual and homosexually experienced heterosexual individuals had higher levels of psychological distress compared with exclusively heterosexual individuals".¹¹³

These conditions tend not to develop as frequently or severely among people secure in gender identity. Gender security is fostered through wholesome families demonstrating emotional and relational stability, wholesome morality, non-sexual affirmation of children's gender attributes and secure parental modelling of gender qualities. Where parents engender consistent trust in their children each child identifies with the gender of their same sex parent and learns how to relate well with the other gender through the lived experience of relating with that parent.

Sixteen: "Gender disorientation pathology, as in the form of sexual addictions, is often a symptom of family dysfunction, personality disorder, father absence, health malfunction or sexual abuse."

While the causes of homosexuality are various, broken families, absent or weak fathers, and abuse are often leading factors. Strengthening families will help reduce the incidence of gender disorientation pathologies. So too will be the lessening of the impact of those media, and the homosexual lobby, which seek to influence sexually-confused adolescents.¹¹⁴

The causes of gender disorientation pathology have been shown to be largely social. One leading researcher summarised, "Sexual orientation is genetically influenced but not hardwired by DNA, and that whatever genes are involved represent predispositions, not predeterminations."¹¹⁵ Psychotherapists tend to agree that the major factor in the emergence of same sex attraction is a defective gender identification in childhood and teen years¹¹⁶

The major influences in gender disorientation have to do with poor bonding between father and son, or relationship breakdown where the son emotionally detaches from his father. Ensuing 'father hunger' at puberty can be confused and become sexualized. Teenage males seeking the affirmation and emotional intimacy that their fathers' failed to provide confuse the fleeting sense of comfort, affirmation and connection which homosexual encounter provides, with the real thing. Because it is temporary its effect soon wanes and further similar experiences and comfort is sought. The repetitive nature becomes addictive and a 'homosexual' identity - operationally "heterophobia," the fear and distrust of the opposite sex - begins to form.

Where fathers, or other men, have been abusive to daughters, heterophobia, an emotional aversion towards men often occurs, causing the emerging woman to feel safer with other women, preferring to be emotionally and sexually vulnerable with them. Daughters who perceive their mothers to be passive victims of masculine abuse can detach from them, causing a subsequent 'mother hunger' which they seek to fulfil in emotionally/sexually co-dependent relationships with other women. This is often reinforced with their conclusions that masculinity is generally abusive and therefore emotional or sexual vulnerability to males should be avoided.

Unhealthy mothering can also lead to heterophobic gender disorientation in men. Where a mother is manipulative, enmeshing and over controlling, her son may generalize this behaviour to all women, fearing intimacy with them and preferring it with men who are seen to be emotionally less demanding. When such judgments are made prior to or during puberty, sexual orientation is distorted.

Recently 200 homosexual survey respondents¹¹⁷, seeking to overcome same sex attraction, most frequently perceived the root causes of their homosexuality to be problems with their fathers (97 per cent); peer relationships, where they felt deficient as males by comparison (97 per cent); difficulties in relationships with their mothers (90 per cent); sexual abuse as a child or youth (48 per cent); and 87 per cent believed that their innate sensitivity or the emotional intensity of their personality also contributed to the cause. Moreover, the exposure to pornography early on, especially in the "grooming" process, has long been identified as causal in the induction of boys into homosexuality.¹¹⁸

Sexual abuse is high among the causes of gender disorientation. One study found that homosexually assaulted males identified themselves as subsequently homosexual seven times more often than the non assaulted control group.¹¹⁹

Similarly studies among lesbians reveal high prevalence of childhood and teenage abuse. In one such study among 2000 lesbians 37 per cent had been physically abused, 37 per cent raped or sexually attacked and 19 per cent reported incestuous relationships while growing up.¹²⁰ High rates of abuse indicate families of origin which did not protect children, suggesting family dysfunction through parental absence, abuse or neglect.

A Danish study, in the first country to legalize homosexual marriage, indicated a higher prevalence of family dysfunction influencing gender disorientation. It assessed marriage records for men and women marrying a same-sex partner from 1989 - 2001.¹²¹ Some observations were: men who marry homosexually are more likely to have been raised in a family with unstable parental relationships - particularly, absent or unknown fathers and divorced parents; the rates of same-sex marriage "were elevated among women who experienced maternal death during adolescence, women with short duration of parental marriage, and women with long duration of mother-absent cohabitation with father"; men and women with "unknown fathers" were significantly less likely to marry the opposite sex than were peers with known fathers; and, men whose parents divorced before their 6th birthday were 39 per cent more likely to marry homosexually than peers from intact parental marriages.¹²²

Moreover, "For men, unknown paternal identity, parental divorce, short duration of cohabitation with both parents, and long duration of father-absent cohabitation with mother were all associated with increased rates of homosexual marriage. For women, homosexual marriage rates were elevated among women whose

parents were married briefly, and those who experienced long periods of mother absence due either to abandonment or death during the teen years.”¹²³

Dr Jeffrey Satinover notes that the factors influencing the sexual development of young people are largely contained in the social and family context. He concludes therefore, a society that promotes homosexuality will result in increasing numbers of people who identify themselves as homosexuals.¹²⁴

Seventeen: "Gender disorientation pathology will lead to increased levels of drug abuse and partner violence."

Evidence shows that there are increased risks of drug abuse, partner violence, suicide and other problems associated with the homosexual lifestyle. Gender disoriented relationships tend to derive from dysfunctional families of origin, and also tend to repeat the pattern. Higher incidences of drug abuse, violence and suicide indicate that same sex relationships struggle to meet emotional needs or provide fulfilment and stability.

Gender disorientation has been demonstrated to lead to increased substance abuse. In a 2001 study, involving 7000 people, lesbian women reported a higher rate of substance abuse than heterosexual women.¹²⁵

Also, a study of 16,000 adolescents in America, as reported in the *Archives of Paediatrics and Adolescent Medicine*, found that lesbian and bi-sexual teenagers are more likely to smoke and more vulnerable to cigarette marketing than their straight sisters. Almost 40 per cent of lesbians and bisexuals smoked, compared to just 6 per cent of heterosexual teenage girls. This finding is in keeping with previous studies on the subject.¹²⁶

In addition, according to the *International Journal of Eating Disorders*, homosexual men are at a greater risk of developing eating disorders, such as anorexia and bulimia, than heterosexual men.¹²⁷

In a 2003 study in six major US cities among 4,295 men who participated in anal sex in the previous six months, over 50 per cent did so without protection, and in the survey “drug and alcohol use were significantly associated with unprotected anal sex”.¹²⁸

In Australia, gender confused individuals have a higher incidence of illicit drug use than the general community. A study of homosexual men in Sydney found that 78.3 per cent of the homosexual men interviewed had used illegal drugs in the six months prior to the date of the study.¹²⁹ In contrast, the rate of illicit drug use in the last twelve months for the general community was around 16 per cent.¹³⁰

Partner violence in male and female homosexual relationships has consistently been shown to be higher than that within heterosexual relationships. In a 1997 study among 283 homosexuals and lesbians 29.7 per cent of homosexual men and 47.5 per cent of the lesbians reported victimisation by a same-sex partner.¹³¹

Earlier a 1994 study revealed that 90 per cent of the lesbians interviewed had received acts of verbal aggression from their partners in the previous 12 months, and 31 per cent reported at least one act of physical abuse.¹³² In 1991 a study reported incidents of violence within homosexual male households to be almost double that of the heterosexual population.¹³³ The authors of this study, two homosexual men, state that “the homosexual community needs to recognize that wealthy, white, educated, ‘politically correct’ homosexual men batter their lovers”.¹³⁴

A recent study by the AIDS Council of NSW said this: “It has been argued that domestic violence is the third most severe health problem for gay men, following HIV/AIDS and substance abuse”.¹³⁵

The homosexual press itself also highlights this problem. For example, the NSW Anti-Violence Project has warned homosexual people about “dangers of violence from members of their own community” It spoke of a “series of recent gay-on-gay attacks around Oxford Street” in Sydney. A spokesman for the group said that in addition to violence from without, “we should be prepared to respond to violence from within the community as well” and that these actions should be reported.¹³⁶

Eighteen: "Gender disorientation pathology will increase the risk of communicable disease and the

likelihood of suffering bad health."

There are a wide range of diseases associated with the homosexual lifestyle, not least of which is HIV/AIDS. This lifestyle is a high risk lifestyle, leading to a number of health problems. Substantial risks associated with male homosexuality are due to receptive anal sex and increased levels of promiscuity. Anal sex renders participants particularly vulnerable to contracting HIV/AIDS. Transmitted through body fluids, it asserts its claim on the body through the bloodstream. The anus is more vulnerable to tearing during intercourse, exposing the bloodstream to the virus if the penetrator's discharge carries it.

Levels of promiscuity in homosexuality are much higher than average. Gabriel Rotello, a homosexual author, wrote: "homosexual liberation was founded ... on a sexual brotherhood of promiscuity and any abandonment of that would amount to a communal betrayal of gargantuan proportions"¹³⁷ Many surveys show how this attitude is reflected in homosexual practice. The Grim Reaper advertising campaign of the 1980's made the need for "safe sex" clear, initially causing average numbers of homosexual partners per month to decrease from 6 to 4. More recently the US Center for Disease Control reported that "from 1994 to 97, the percentage of homosexual men reporting multiple partners and unprotected sex increased from 23.6 per cent to 33.3 per cent."¹³⁸

'Barebacking', anal sex without the use of condoms, is on the increase. There is a culture among some Australian homosexuals to '*bug-chase*', and to '*gift give*'. The former seek solidarity with other homosexuals who have contracted AIDS/HIV, the latter, having a twisted sense of benevolence, desire to impart it.¹³⁹

The lifestyle which encompasses gender disorientation pathology causes increased incidents of other physical illnesses. Diseases such as anal cancer, herpes simplex virus, human papilloma virus, microsporidia, gonorrhoea, viral hepatitis types B and C are particularly common among homosexual men. These diseases are much less prevalent among heterosexual men. Syphilis, though found among heterosexuals, is far more prevalent among homosexuals.¹⁴⁰ Anal intercourse causes increased frequency of such physical conditions as haemorrhoids, anal fissures, anorectal trauma and extremely high rates of parasitic infections.¹⁴¹ Men with HIV are 90 per cent more likely than other people to suffer with anal cancer.¹⁴²

Lesbians are also more exposed to certain diseases. Bacterial vaginosis. Hepatitis B and Hepatitis C, alcohol abuse and intravenous drug use was significantly higher among lesbians than among heterosexual women.¹⁴³ In one study of lesbian women 30 per cent had bacterial vaginosis, which is associated with high risk for pelvic inflammatory disease and other sexually transmitted infections.¹⁴⁴ Two independent studies have found that lesbians are three times more likely to be diagnosed with breast cancer than heterosexual women.¹⁴⁵

Increased incidence of these physical diseases is accompanied by increased incidence of emotional/psychological diseases among the homosexual population. Lesbians are more than twice as likely to be overweight and obese as heterosexual women.¹⁴⁶

According to other study results more than 15 per cent of homosexual or bisexual men had at some time suffered anorexia, bulimia or binge-eating disorder, or at least certain symptoms of those disorders, compared with less than five percent of heterosexual men.¹⁴⁷ Probably the emphasis on youthfulness, body shape and image of many homosexuals causes higher levels of eating disorders through risky eating practices. Typically, homosexuals lust after one another's bodies, creating a masculine sub-culture particularly sensitive to body shape. This probably accounts for the higher incidence of eating disorders among gender disoriented men.

Finally, an analysis of the California Quality of Life Survey, from a survey of 2272 adults found that homosexual men and bisexual and homosexually experienced heterosexual individuals had higher levels of psychological distress compared with exclusively heterosexual individuals.¹⁴⁸

It has been a major victory of the homosexual movement to deflect attention away from homosexual behaviour and practice, and to refocus it on more neutral areas like "rights" and "discrimination". This is all according to plan. As one influential homosexual activist manual put it, "The public should not be shocked and repelled by premature exposure to homosexual behavior itself".¹⁴⁹

Or as one Australian homosexual activist put it, “The greatest single victory of the gay movement over the past decade has been to shift the debate from behavior to identity, thus forcing opponents into a position where they can be seen as attacking the civil rights of homosexual citizens rather than attacking specific and (as they see it) antisocial behavior.”¹⁵⁰

Nineteen: "Gender disorientation pathology will decrease life expectancy."

There are many high mortality health risks associated with gender disorientation pathology. Life expectancy has been shown to be lower for homosexuals than for non-homosexuals.

Scandinavian research has shown that married homosexuals' and lesbians' life spans are 24 years shorter than heterosexual couples. In Denmark over the 12 years after 1990, the average age of death of hetero men was 74, whereas the 561 partnered homosexual men who died in the same period did so at an average age of 51. Married women died at an average age of 78, whereas the nine lesbian women who died, did so at an average age of 56. In Norway the figures were similar – married heterosexual men died at an average age of 77, the 31 homosexuals at 52; heterosexual women died at 81, while the 6 lesbians who died, did so at mean 56.¹⁵¹

In a major Canadian centre, life expectancy at age 20 years for homosexual 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 homosexual and bisexual men currently aged 20 years will not reach their 65th birthday. Under even the most liberal assumptions, homosexual and bisexual men in this urban centre are now experiencing a life expectancy similar to that experienced by all men in Canada in the year 1871.¹⁵²

Promiscuity, AIDS and other diseases cause sexually active males who suffer from gender disorientation pathology to lose up to 20 years of life expectancy. As one writer has summarised the situation, “For the vast majority of homosexual men, and for a significant number of homosexual women - even apart from the deadly plague of AIDS - sexual behaviour is obsessive, psychopathological and destructive to the body.”¹⁵³

Twenty: "Gender disorientation pathology is preventable and treatable."

Many have left the homosexual lifestyle, and genuine healing is possible. While it may well be a slow and difficult process, substantial healing and freedom is possible, as experienced by many thousands of former sufferers of gender disorientation pathology. Like all sexual addictions, it takes a lot of effort to break free, but it can be done. Not only can the activities stop, but many have found that even the orientation or proclivity toward homosexuality can be reduced, if not eliminated.¹⁵⁴

Conclusive evidence for the possibility of change is given in Professor Dr Robert Spitzer's 2001 study “Can Some Homosexual Men and Lesbians Change Their Sexual Orientation?”¹⁵⁵ Spitzer himself had led the task force in 1973 which removed homosexuality from the American Psychiatric Association's list of mental disorders, citing the condition was both normal and unchangeable. Challenged by reformed homosexuals to study the authenticity of their change, he agreed.

The 200 chosen participants satisfied two criteria: they had suffered predominant homosexual attraction for many years and, since their therapy they have sustained a decrease of at least ten points in their homosexual attraction, over five years:

- 143 men (average age 42) and 57 women (average age 44) participated in the study.
 - 21 per cent of the men and 18 per cent of the women were married prior to beginning the therapy.
 - 85 per cent of the men and 61 per cent of the women had same sex attraction as teenagers.
 - 62 per cent and 42 per cent respectively had no opposite sex attraction in their teens.
 - 13 per cent and 4 per cent had never participated in consensual homosexual sex.
 - 34 per cent and 2 per cent had engaged homosexually with more than 50 partners.
 - 53 per cent and 33 per cent had not experienced consensual heterosexual sex before their therapy.
- Their therapy was not of one particular type, and included different mixes of group work, individual counselling and mentoring in different settings.

Spitzer wrote in his conclusion, “Many patients, provided with informed consent about the possibility that

they will be disappointed if the therapy does not succeed, can make a rational choice to work toward developing their heterosexual potential and minimizing their unwanted homosexual attractions.”

“If there was significant bias, one might expect that many participants would report complete or near complete change in all sexual orientation measures [after starting therapy]. Only 11 per cent of the males and 37 per cent of the females did so. One might also expect that many participants would report a rapid onset of change in sexual feelings after starting therapy. In fact, participants reported that it took, on average, a full two years before they noticed a change in sexual feelings..... Change in sexual orientation should be seen as complex and on a continuum.”¹⁵⁶

Many other experts also agree that “diverse forms of therapy, counseling, and guidance can help change a homosexual orientation - at least in part in most cases, and in a minority of cases, deeply and radically.”¹⁵⁷

Factors which need to be addressed in the transformation process are parental and other significant influences on formative gender identity, sexual abuse, initial sexual experience, cognitive therapy for unwanted sexual behaviour patterns, facing and healing emotional pain and the forgiveness of significant people who contributed to its cause. Mental, emotional, volitional, spiritual and physical aspects of broken sexuality need to be addressed separately and together as part of the holistic process of healing.

One significant researcher and psychiatrist has written, “If there's significant self-knowledge, forgiveness and a spiritual component to the treatment... we find the emotional pain that causes the Same Sex Attraction can be healed.....the inner emptiness can be filled, the loneliness healed and the confidence strengthened. No longer does the person feel angry with his father or peers for not building or for damaging male confidence. Instead, he appreciates that his male gifts and identity are special, God-given and meant for a particular mission in life.”¹⁵⁸

A recent survey responded to by 189 same-sex attracted men who are seeking change in their sexual orientation reported that their major reasons for wanting change were to heal the emotional hurts they believed caused their condition initially. Spirituality, the desire to have a family and to be able to engage in non-sexual relationships with men were cited among other major reasons for wanting change. Only three per cent cited outside pressure as a major reason.¹⁵⁹

For many, intensive therapy is not necessary. Recent research shows distinct decline in homosexual/bisexual self-identification in early adulthood. The most significant decline occurs after the age of 18. Many researchers are recognizing the significance of trends and pressures which influence young people towards periods of homosexual identification, but which changes with maturity. The pathology of gender disorientation is much more likely to occur while people are young and vulnerable. University education, for instance, is correlated with higher rates of reported same sex attraction.¹⁶⁰ One report demonstrates how college girls change more often than any other group, switching between straight, homosexual and bisexual attractions.¹⁶¹ This shows that orientation is very much choice-based, or environmental-based.

Dr. Satinover extensively outlines research that suggests the impulse to homosexuality (which most frequently manifests itself during adolescence) will spontaneously decrease over time, and will eventually disappear, unless it is given support and encouragement. “The reality is that since 1994 - for ten years - there has existed solid epidemiological evidence, now extensively confirmed and reconfirmed, that the most common natural course for a young person who develops a ‘homosexual identity’ is for it to spontaneously disappear unless that process is discouraged or interfered with by extraneous factors,”¹⁶²

The Australian context provides testimony of many changing sexual orientation or same sex practice. Four books have been written by Australian authors detailing theirs or others’ journey out of homosexuality or lesbianism.¹⁶³ Organisations to help same sex strugglers at least to overcome their addictions, and beyond that to process the transition to hetero orientation, exist in Brisbane, Sydney, Canberra, Melbourne and Perth, led by men who have made the transition from homosexuality or other forms of gender disorientation.¹⁶⁴

Though substantial change can occur in attitude, orientation, sexual desire and behaviour, because disused neural associations are not eliminated, the transformed person may still be faced with occasional temptation and stirrings of desire. These need to be submitted to their new choices and realities. This provides no cause for accusations of not having been changed, because true greatness depends on how one controls and rises above personal weakness. Gender disorientation pathology, like most other pathologies, is curable over time.

Twenty-one: "Gender disorientation pathology encourages the sexual and psychological exploitation of children."

Children are most at risk when they are part of a household made up of other than the natural family unit. Research on this is quite clear. Children do best, by every indicator, when raised in a two-parent, married household.

The sad truth is, homosexual abuse of children is proportionately higher than heterosexual abuse of children. It must be stressed that most homosexuals do not abuse children, and most are not paedophiles, but it seems a significant number do, and are.

A survey done by two homosexual authors revealed that three-fourths of homosexuals had at some time had sex with boys sixteen to nineteen or younger.¹⁶⁵ A coalition of homosexual groups since as early as 1972 has sought the repeal of age of consent laws, arguing that children as young as 8 years have a right to decide whether they enter into a sexual relationship with an adult.¹⁶⁶

While mainstream "heterosexual" pornographers, like *Playboy*, have conspiratorially engaged in pedophile tactics, they have often done so in a fairly subtle fashion. However, homosexual writings have not always been so subtle.

For example, a Boy Scout illustration is the official mascot adorning *The Queens' Vernacular*, written by homophile language anthropologist Bruce Rodgers. *The Queens' Vernacular* is fully identified as the key dictionary for the homosexual movement, republished in 1979 as [G]ay [T]alk. *The Queens' Vernacular* contains 12,000 words of which 254 words describe sex with boys - generically referred to as "chicken." Some examples of how to handle chicken include: "ready to crack," "pluck some feathers," "chicken dinner," "butchered chicken," etc. A "boy-scout queen," is defined as "one who pretends to snooze as he is [expletive] or [expletive]." ¹⁶⁷

Advertisements in the popular heterophobic periodical *The Advocate* were considerably less subtle than the illustrations. For years a full-page "Penetratable Boy Doll" advertisement appeared regularly in *The Advocate*: "Available in 3 Provocative Positions: Choose the Model That Will Fill All Your Needs...."¹⁶⁸

A recent review of the child molestation literature as it appears in medical and psychological journals concluded that between 25 and 40 per cent of all recorded child molestation was homosexual.¹⁶⁹ Also, a Family Research Institute's national (US) random survey of 4,340 adults found that about a third of those who reported having been molested were homosexually molested. Other polls have come out with similar findings.¹⁷⁰ Also, homosexual pedophiles victimise far more children than do heterosexual pedophiles (150 to 20).¹⁷¹

There is also the question of how children fare when raised in same-sex families. One person who has spent a lot of time looking into this question is psychologist Dr Joe Nicolosi. He argues that kids raised by homosexuals are traumatised emotionally and socially.

Children, he argues, are profoundly affected by parental behaviour. For example, children of smokers often become smokers. "Homosexuality," says Nicolosi, "is primarily an identity problem, not a sexual problem, and it begins in childhood. The process begins when a child realizes that the world is divided between male and female and that he is not equipped to be identified as male. His father fails to sufficiently encourage male-gender identity. Because he is not fully male-gender-identified, he is not psychologically prepared to feel heterosexual attractions. In order to be attracted to women, a male must feel sufficiently masculine. Faced with this predicament, he goes into a world of fantasy and denies the imperative of being either male or female."¹⁷²

The absence of role models presents other problems, especially to young men exposed to the fantasies and images of women in popular media entertainment and mainstream pornography. How will a man raised by two men know how to relate to a woman? Or how will a man raised by two women know how to relate to men? Thus the Beatles were wrong: love is *not* all you need, at least when it comes to parenting. As two family experts point out: "The two most loving mothers in the world can't be a father to a little boy. Love

can't equip mothers to teach a little boy how to be a man. Likewise, the two most loving men can't be a mother to a child."¹⁷³

They continue, "Love does little to help a man teach a little girl how to be a woman. Can you imagine two men guiding a young girl through her first menstrual cycle or helping her through the awkwardness of picking out her first bra? Such a situation might make for a funny television sitcom but not a very good real-life situation for a young girl."¹⁷⁴

One woman who was raised by lesbians now runs a support and recovery program for those coming out of the heterophobic/homosexual lifestyle and their families. She put it this way: "I realise that homosexuals feel they can give a child love and support that even many straight families can't provide, but I've been there. I know the finger-pointing and the shame one carries. For years, you struggle with the thought that you might be a homosexual. People say 'like mother, like daughter.' Most of us become promiscuous to prove we're straight."¹⁷⁵

Another woman says this of her upbringing by two men suffering from gender disorientated pathology: "From 40 years of experience, I can tell you that, even though my father loved me, his homosexual orientation handicapped my ability to learn to relate to life in a healthy way. My homosexual home stunted my growth as a person and as a woman, not to mention the damaging effect of 16 years of drugs and alcohol abuse on my early childhood development. I spent the first 20 years of my life in a family that nearly destroyed me and the last 20 years analysing and being analysed in order to make sense of it. The bottom line is: I was dearly loved by my father. His love alone was not enough to give me the foundation that I needed to grow into a secure young woman.... My father and I have looked back through the past and discussed the issue of homosexual parenting. With great remorse, he agrees the homosexual lifestyle, no matter how conservative, is not healthy for children. My father and I agree: homosexuality and raising healthy children exclude each other."¹⁷⁶

Or consider the tragic case of a twelve-year-old Melbourne boy who has run away from home five times. The reason? He refuses to live with his mother and her lesbian partner. The boy's father has repeatedly been denied access to the child, and the boy has threatened to kill himself as a result.¹⁷⁷

And lastly, someone who can speak from experience in this area. A lesbian mother has publicly expressed her regret at bearing three children through artificial insemination. The New Zealand woman, who says she is "now in the process of becoming a heterosexual," had a stormy relationship with her lesbian lover, which eventually broke down. Her comments are worth noting: "I realise now that I deprived my kids of their right to a father, and I see the hurt in their faces every day. . . . I believe children should have the best opportunities in life. The best way they can have a balanced view of what is normal is with heterosexual parents."¹⁷⁸

Children need to see how men and women interact together. A homosexual or lesbian union cannot provide that role model. But the interests of the child is the last thing being considered in this debate. These days everyone is demanding his or her 'rights', but few realise that rights must be balanced by responsibilities. It is the responsibility of our society to protect children from psychological and sexual exploitation. It is the right of the child to know and have a relationship with their biological mother and father. It is the right of the child to be protected from sexual exploitation. Gender disorientation pathology greatly increases the risk that children will suffer sexual exploitation. It is our duty to protect them.

An Appropriate Public Policy Response

Masculinity and femininity is something to be celebrated and championed, not denied and belittled. Attempts by the gender feminists and the new androgynists to suggest that gender is simply a social construct, and that gender is essentially malleable and fluid, are not founded in fact and should be rejected.

While there are rare cases of gender ambiguity, these should not be used to blind us to the reality of gender: that as humans we are born either male or female, and that these gender differences are important for the individual and for society. That those struggling with gender confusion and/or gender disorientation pathology deserve respect and compassion. For this reason it is important to have help and therapy readily available for those who suffer from these conditions.

Given the importance of the two genders, it is imperative to promote heterosexual marriage and the biological two-parent family. The evidence makes it clear that these two institutions provide the best environment for individuals, for societies, and for children.

The institutions of marriage and family have survived many assaults over the millennia. However in order to successfully preserve marriage and family, there needs to be ongoing resistance to those who seek to redefine, and thus undermine, these two invaluable institutions. It is important to withstand the gender deconstructionists in their bid to destroy marriage and the natural family. Therefore the Dads4Kids Fatherhood Foundation believes that marriage should remain as it is, **“the union of a man and a woman to the exclusion of all others, voluntarily entered into for life”**.

To dispel the current confusion regarding gender issues, and to restore the proper understanding and appreciation of maleness and femaleness, and to protect our children from harm, the following is proposed as a guide to policy makers:

1. That the recognition of male and female, and the celebration of their differences and complementarity, be made the foundation stone of all government policy
2. That the equal worth and value of men and women be fully affirmed, but not at the expense of gender uniqueness and difference.
3. That marriage be forever preserved as the voluntary exclusive union of one man and one woman for life.
4. That marriage be recognised as the building block of families, and that families are the building blocks of the nation; that strong family relationships be recognised as providing the greatest form of social capital; and that marriage and family be promoted by government and society for the greater good of all. Other types of relationships, do not afford society the same moral and social benefits as heterosexual marriage and family arrangements.
5. That social policy consciously affirm and support marriage and family, and discourage the dissemination of maritally disruptive forms of exploitive media entertainment and pornography.
6. That government laws, taxation and other public policy initiatives make marriage and family life their first priority.
7. That family benefits be restricted to actual families, not to alternative lifestyles. Family benefits should be seen for what they are, not as discrimination against those who suffer with gender disorientation pathology, but as incentives for the glue that holds society together.
8. That parenting be understood and defined in terms of the complementarity of motherhood and fatherhood.
9. That measures be implemented to improve boys' education, including the active recruitment of male teachers to serve as role models for boys.
10. That programs to mentor boys, affirm their masculinity, and support transitions to manhood, be affirmed, encouraged and funded by government bodies and the community at large.
11. That programs to mentor girls, affirm their femininity, and support transitions to womanhood, be affirmed, encouraged and funded by government bodies and the community at large.
12. That motherhood and fatherhood be recognised as valuable social institutions with appropriate support and protection in both law and government policy.
13. That the fundamental right of children to know and have a relationship with their biological mother and father be recognised.
14. That access to adoption and to assisted reproductive technologies such as IVF be restricted to heterosexual couples because it is a child's fundamental right to have both a mother and a father.
15. That homosexual civil unions and relationship registers not be recognised.
16. That homosexual relationships not be given the same status as heterosexual marriage.
17. That schools be prevented from being used as a channel for the promotion of the homosexual lifestyle.
18. That public monies not be used to promote the homosexual lifestyle, as this will lead to even more gender disorientation pathology.
19. That public funding be committed to programmes and support networks which assist individuals to overcome gender disorientation pathology.
20. That it be affirmed that homosexuals, *as individuals*, should enjoy the same rights as other individuals, but that homosexual *relationships* not be granted social or legal recognition, since that

would promote greater levels of gender disorientation pathology in the community as a whole, and undermine the unique status of marriage.

For Further Reading: Books on Gender Differences:

- Blum, Deborah, *Sex on the Brain: The Biological Differences Between Men and Women*. Penguin, 1998.
- Brizendine, Louann, *The Female Brain*. Morgan Road Books, 2006.
- Geary, David, *Male, Female: The Evolution of Human Sex Differences*. American Psychological Association, 1998.
- Gilder, George, *Men and Marriage*. Pelican Publishing, 1986.
- Goldberg, Steven, *The Inevitability of Patriarchy*. Open Court, 1993; revised, *Why Men Rule*. Open Court, 1999.
- Gray, John, *Men Are from Mars, Women Are from Venus: A Practical Guide for Improving Communication and Getting What You Want in Your Relationships*. HarperCollins, 1993.
- Gurian, Michael, *What Could He Be Thinking?: How a Man's Mind Really Works*. St. Martin's Griffin, 2004.
- Michael Gurian and Kathy Stevens, *The Minds of Boys: Saving Our Sons From Falling Behind in School and Life*. San Francisco: Jossey-Bass, 2005.
- Hales, Dianne, *Just Like a Woman: How Gender Science Is Redefining What Makes Us Female*. Bantam, 2000.
- Levin, Michael, *Feminism and Freedom*, Transaction Publishers, 1988.
- Moir, Anne, *Why Men Don't Iron: The Fascinating and Unalterable Differences Between Men and Women*. Citadel Press, 2003.
- Moir, Anne and David Jessel, *Brain Sex: The Real Difference Between Men and Women*. Delta, 1992.
- Nadeau, Robert, *S/He Brain: Science, Sexual Politics, and the Myths of Feminism*. Praeger, 1996.
- Pease, Allan and Barbara Pease, *Why Men Don't Listen and Women Can't Read Maps: How We're Different and What to Do About It*. Broadway, 2001.
- Pool, Robert, *Eve's Rib: Searching for the Biological Roots of Sex Differences*. Crown Publishers, 1994.
- Rhoads, Stephen, *Taking Sex Differences Seriously*. Encounter Books, 2004.
- Sax, Leonard, *Why Gender Matters: What Parents and Teachers Need to Know about the Emerging Science of Sex Differences*. Broadway, 2006.

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¹ In 2006, 87% of one-parent families with children under 15 years were headed by mothers. "Australian Social Trends, 2007: One Parent Families." Canberra: Australian Bureau of Statistics, 2007.

² Refer to Section 15.

³ For example, one University of Massachusetts researcher reported that "at least 100 differences in male and female brains have been described so far". Cited in Michael Gurian and Kathy Stevens, *The Mind of Boys*. San Francisco: Jossey-Bass, 2005, p. 46.

⁴ To argue for the innateness of gender differences is of course not to deny that nature is augmented by nurture. Environmental influences certainly have a role to play in all this. For example, from a young age a person's expressions

of their gender (masculinity or femininity) will be shaped both by inner natural drives and also by social and cultural influences. Thus it is important to critically examine cultural norms which may constrain the free and natural expression of males and females. Hence the importance of gender role modelling as a way of helping children and adolescents to develop in healthy ways so that they are able to express their gendered personality in ways that are personally fulfilling within a society.

⁵ See Section 11.

⁶ Steven Rhoads, *Taking Sex Differences Seriously*. San Francisco: Encounter Books, 2004, pp. 4-5.

⁷ See for example, Dale O'Leary, *The Gender Agenda*. Lafayette, LA: Vita Issues Press, 1997.

⁸ Allan Carlson, *Family Questions*. New Brunswick, New Jersey: Transaction Books, 198, p. 44.

⁹ W. Bradford Wilcox, "Reconcilable Differences," *Touchstone*, November 2005.

¹⁰ *Ibid.*

¹¹ One of the earliest articles to identify the deficit in the education and outcomes for boys was: Babette Francis, "Equal Opportunity: The Anti-Sexist Mythology," *Quadrant*, April, 1979.

¹² See for example Leonard Sax, *Why Gender Matters: What Parents and Teachers Need to Know about the Emerging Science of Sex Differences*. Broadway, 2006.

¹³ Simon Baron-Cohen, *The Essential Difference*. New York: Basic Books, 2004. See also Steven Rhoads, *Taking Sex Differences Seriously*. San Francisco: Encounter Books, 2004.

¹⁴ Michael Gurian, *Boys and Girls Learn Differently!* San Francisco: Jossey-Bass, 2002. Also, see Michael Gurian and Kathy Stevens, *The Minds of Boys: Saving Our Sons From Falling Behind in School and Life*. San Francisco: Jossey-Bass, 2005.

¹⁵ Canberra: House of Representatives, [Standing Committee on Education and Training](#), *Boys Getting it Right*. October, 2002.

¹⁶ For example, Peter West, "Single-Sex is Best (Sometimes)". November 2006.

<<http://www.onlineopinion.com.au/view.asp?article=5119>>.

¹⁷ See two important books by Australian education expert, Kevin Donnelly: *Why Our Schools are Failing*. Sydney: Duffy and Snellgrove, 2004; *Dumbing Down*. Melbourne: Hardie Grant, 2007.

¹⁸ Pru Goward, "The Crisis of Masculinity – is there the need for a men's movement?" Speech delivered by the Federal Sex Discrimination Commissioner, as part of the Oz Prospects Lecture Series, State Library of Victoria, 20 April, 2004.

¹⁹ Michael Gurian and Kathy Stevens, *The Mind of Boys*. San Francisco: Jossey-Bass, 2005, pp. 46, 52.

²⁰ Susie O'Brien, "Male Teachers Rule," *The Herald Sun*, 1 August 2007, p. 9.

²¹ It must be noted that a very small percentage of people are in their own category, and are quite different. I refer to the intersex condition, where genetic abnormalities results in sexual confusion, as in ambiguous genitalia, chromosomal imbalances – eg, having an extra sex chromosome – and so on. These can be found in conditions such as Congenital Adrenal Hyperplasia, Turner Syndrome, Klinefelter's Syndrome, and Androgen Insensitivity Syndrome. Intersex conditions are mostly innate, whereas the unusually low concordance rates in identical twins (who have identical genes and essentially prenatal environment) show that causes of homosexuality are predominantly post-natal.

²² See for example, Dale O'Leary, *The Gender Agenda: Redefining Equality*. Lafayette, LA.: Vital Issue Press, 1997. Also see, Neil and Briar Whitehead, *My Genes Made Me Do It!: A Scientific Look at Sexual Orientation*. Lafayette, LA.: Huntington House, 1999.

²³ See Frank York's review of *Taking Sex Differences Seriously* by Steven Rhoads.

<<http://www.narth.com/docs/uvaprof.html>>.

²⁴ John Colapinto, *As Nature Made Him: The Boy who was Raised as a Girl*. Harper Collins, 2000.

²⁵ Ellen Makkai, "The Sex-Change Charade." January 11, 2003:

<http://www.worldnetdaily.com/news/article.asp?ARTICLE_ID=30442>.

²⁶ Renee Richards in "The Liaison Legacy," *Tennis Magazine*. March, 1999, p. 31-32.

²⁷ *Ibid.*

²⁸ Ellen Makkai, *Ibid.*

²⁹ See for example, David Blankenhorn, *Fatherless America: Confronting Our Most Urgent Social Problem*. New York: Basic Books, 1995; and Wade Horn and Tom Sylvester, *Father Facts*, 5th ed. Gaithersburg, MD.: National Fatherhood Initiative, 2007.

³⁰ See Warwick Marsh, et. al., *Fathers in Families*. Wollongong, NSW: Fatherhood Foundation, 2005.

³¹ Douglas Carlton Abrams, "Father Nature: The Making of a Modern Dad", March/April 2002, pp. 38-47.

³² See for example, Bryce Christensen, ed., *When Families Fail.... The Social Costs*. Lanham, MD.: The University Press of America, 1991; and Linda Waite and Maggie Gallagher, *The Case for Marriage*. New York: Doubleday, 2000.

³³ Bill Muehlenberg, *The Case for the Two-Parent Family*. Melbourne: revised, 2007; and Bill Muehlenberg, William Doherty, et. al., *Twenty-One Reasons Why Marriage Matters*. Wollongong, NSW: National Marriage Coalition, 2004.

³⁴ See for example the wealth of information and documentation in James Dobson, *Bringing Up Boys*. Wheaton, Ill.: Tyndale House, 2001.

³⁵ John Smith, "The Importance of Two-Parent Families," a talk given to the Australian Family Association National Conference in Melbourne, July 7, 1994.

³⁶ For a good recent summary of some of the evidence, see Anne Manne, *Motherhood*. Allen & Unwin, 2005.

³⁷ Landrum B. Shettles, *How to Choose the Sex of Your Baby*. Main Street Books, revised edition, 1996.

³⁸ John Bowlby, *Maternal Care and Mental Health*. World Health Organization, 1951. Later expanded and popularised, *Child Care and the Growth of Love*. Pelican 1953, 1965.

-
- ³⁹ John Bowlby, *Attachment and Loss*, New York: Basic Books, 1969, 1973.
- ⁴⁰ See for example A. Lucas et al, "Breast milk and subsequent intelligence quotient in children born preterm," *The Lancet*, vol. 339, Feb 1, 1999, p. 261.
- ⁴¹ David Nelson, "Newborns: When Formula is Necessary": <<http://www.justhiv.com/new-borns.html>>.
- ⁴² Selma Fraiberg, *Every Child's Birthright: In Defence of Mothering*. New York: Basic Books, 1978.
- ⁴³ See Douglas Carlton Abrams, "Father Nature: The Making of a Modern Dad," *Psychology Today*, March/April 2002, pp. 38-47.
- ⁴⁴ Douglas Carlton Abrams, *Ibid*.
- ⁴⁵ William E May, "Marriage and the Complementarity of Male and Female": <www.christendom-awake.org/pages/may/may.html>.
- ⁴⁶ Frank York, "Gender Differences Are Real": <<http://www.narth.com/docs/york.html>>.
- ⁴⁷ Danielle Crittenden, *What Our Mothers Didn't Tell Us*. Touchstone, 1999, p. 46.
- ⁴⁸ See for example, Glenn Stanton, *Why Marriage Matters*. Pinon Press, 1997; and Rebecca O'Neill, *Does Marriage Matter?* London: Civitas, 2004.
- ⁴⁹ Bill Muehlenberg, *The Benefits of Marriage*. Melbourne: revised, 2007.
- ⁵⁰ David Blankenhorn, *The Future of Marriage*. New York: Encounter Books, 2007, p. 145.
- ⁵¹ Adele Horin, "For Better or Worse," *Sydney Morning Herald*, 21 July 2007. <<http://www.smh.com.au/articles/2007/07/20/1184560040302.html>>.
- ⁵² *Births, Australia, 2005*, Australian Bureau of Statistics, Publication 3301.0, <<http://www.abs.gov.au/AUSSTATS/abs@.nsf/productsbyCatalogue/FF9E15176D6887D8CA2568A9001393B2?OpenDocument>>.
- ⁵³ *Australia's fertility rate: trends and issues*, Resarch FaCS Sheet No. 9, Department of Family and Community Services, February 2001, <[http://www.facs.gov.au/internet/facsinternet.nsf/VIA/ResFaCSsheets/\\$File/FacsSheet9.pdf](http://www.facs.gov.au/internet/facsinternet.nsf/VIA/ResFaCSsheets/$File/FacsSheet9.pdf)>.
- ⁵⁴ Bob Birrell, Virginia Rapson and Clare Hourigan, *Men and Women Apart: Partnering in Australia*. Melbourne: Australian Family Association and Centre for Population and Urban Research, 2004, p. 65.
- ⁵⁵ Allan Carlson, *Conjugal America*. New Brunswick, NJ: Transaction Publishers, 2007, p. 51.
- ⁵⁶ *Ibid*.
- ⁵⁷ Maggie Gallagher, *The Abolition of Marriage*. Washington, DC: Regnery Publishing, 1996, pp. 137-138.
- ⁵⁸ John Locke, *Two Treatises of Government*. Cambridge: CUP, 1698, 1965, p. 319.
- ⁵⁹ J.D. Unwin, "Monogamy as a Condition of Social Energy," *The Hibbert Journal*, v. 25, 1927, pp. 662,663.
- ⁶⁰ David Blankenhorn, *The Future of Marriage*. New York: Encounter Books, 2007, p. 102.
- ⁶¹ Daniel Patrick Moynihan, "The Negro Family: The Case for National Action." Washington, DC: Office of Policy Planning and Research, United States Department of Labor, March, 1965.
- ⁶² Bill Muehlenberg, William Doherty, et. al., *Twenty-One Reasons Why Marriage Matters*. Wollongong, NSW: National Marriage Coalition, 2004.
- ⁶³ A. Dean Byrd, drawing on information from D.P. McWhirter and A.M. Maddison, *The Male Couple: How Relationships Develop*, Englewood Cliffs, NJ: Prentice-Hall, 1984.
- ⁶⁴ R. Michael, J. Gagnon, E. Laumann, and G. Kolata, *Sex in America: A Definitive Survey*. Boston: Little, Brown and Company, 1994.
- ⁶⁵ Kevin Andrews, ed., *To Have and To Hold*. Canberra: House of Representatives Standing Committee on Legal and Constitutional Affairs, 1998, p. 16.
- ⁶⁶ Clive Aspin, et. al., "Melbourne Gay Community Periodic Survey, 2000." Sydney: National Centre in HIV Social Research, 2000.
- ⁶⁷ Iryna Zablotska, et. al., *Gay Community Periodic Survey*. Sydney: National Centre in HIV Social Research, 2007, pp. 14-15.
- ⁶⁸ Robert Lerman, "Marriage and the Economic Well-Being of Families with Children: A Review of the Literature," July 2002, p. 27, available at: http://www.urban.org/UploadedPDF/410541_LitReview.pdf
- ⁶⁹ Donna K. Gunther and Madeline Zavodny, "Is the male marriage premium due to selection?," *Journal of Population Economics*, 14, 2002, 313-328.
- ⁷⁰ *Why Marriage Matters: Twenty-One Conclusions From The Social Sciences*, 2002, Institute for American Values, p. 10.
- ⁷¹ Lerman, *ibid*.
- ⁷² Kevin Andrews, ed., *To Have and To Hold*. Canberra: House of Representatives Standing Committee on Legal and Constitutional Affairs, 1998, p. 50.
- ⁷³ Richard Peterson, "A Re-Evaluation of the Economic Consequences of Divorce," *American Sociological Review*, 61, 1996, pp. 528-536.
- ⁷⁴ "Divorce shrinks income," *The Herald Sun*, 6 April 2005, p. 29.
- ⁷⁵ Paul Amato, "The Impact of Family Formation Change on the Cognitive, Social, and Emotional Well-Being of the Next Generation." *The Future of Children*, 15 (2), Fall, 2005, pp. 75-96, p. 89.
- ⁷⁶ Ed Rubenstein, "Family Values and Growth," *National Review*, October 5, 1992.
- ⁷⁷ Cited in Michael Pirrie, "Child Abuse Law Alert," *The Herald Sun*, 28 August 1993, p. 1.
- ⁷⁸ The various books by Judith Wallerstein are especially important here: Judith Wallerstein and Joan Kelly, *Surviving the Breakup: How Children and Parents Cope with Divorce*. New York: Basic Books, 1980; Judith Wallerstein, and Sandra Blakeslee, *Second Chances: Men, Women and Children a Decade After Divorce*. New York: Bantam Press,

1989; and Judith Wallerstein, Julia Lewis and Sandra Blakeslee, *The Unexpected Legacy of Divorce*. New York: Hyperion, 2000.

⁷⁹ Karl Zinsmeister, "Raising Hiroko," *The American Enterprise*, March-April 1990, pp. 53-59.

⁸⁰ Bryan Rodgers, "Social and Psychological Wellbeing of Children from Divorced Families: Australian Research Findings," *Australian Psychologist*, vol. 31, no. 3, November 1995, pp. 174-182.

⁸¹ David Popenoe, *Life Without Father: Compelling New Evidence That Fatherhood and Marriage are Indispensable for the Good of Children and Society*. New York: The Free Press, 1996, p. 197.

⁸² R. Green, et. al., "Lesbian Mothers and Their children: A Comparison with Solo Parent Heterosexual Mothers and Their Children," *Archives of Sexual Behaviour* 15, 1986, pp. 167-184.

⁸³ Graham Fitzpatrick, "Percentages of homosexuals and bisexuals in some major Western nations", Unpublished paper, August 2007.

⁸⁴ F. Tasker and S. Golombok, "Adults Raised as Children in Lesbian families," *Developmental Psychology*, 31, 1995, p. 213.

⁸⁵ S. Golombok and F. Tasker, "Do parents Influence the Sexual Orientation of Their Children?," *Developmental Psychology* 32, 1996, p. 9.

⁸⁶ Kay Bussey and D.G. Perry, "The Social Learning Theory of Sex Differences: Imitation is Alive and Well," *Journal of Personality and Social Psychology*, 37, 1979, pp.1699-1712; cited in Ellen Jordan, "Fighting Boys and Fantasy Play: The Construction of Masculinity in the Early Years of School," *Gender and Education*, 7(1), 1995, pp. 69-86, p. 72.

⁸⁷ *Ibid.*

⁸⁸ G.J. Broude, "Initiation and Rites of Passage":

<http://www.berkshirepublishing.com/assets_news/WHTG/articles/InitiationandRitesofPassage_18-Apr-2005.html>.

⁸⁹ A. Van Gennep, *The Rites of Passage*. Chicago: University of Chicago Press, 1960.

⁹⁰ See also, Steve Biddulph, *Manhood*, 3rd ed. Lane Cove, NSW :Finch Publishing, 2002, Chapter 11.

⁹¹ Brian Molitor, *Boy's Passage, Man's Journey*. Emerald Books, 2004, p. 42.

⁹² Eleanor Maccoby and Carol Jacklin, *The Psychology of Sex Differences*. Stanford University Press, 1974.

⁹³ D. McGuiness, and K.H. Pribram, "The Origins of Sensory Bias in the Development of Gender Differences in Perception and Cognition," in *Cognition, Growth and Development*, ed. by M. Bortner. Brunner/Mazel, 1979.

⁹⁴ A helpful summary of these and other differences between the sexes can be found in Steven Rhodes, *Taking Sex Differences Seriously*. San Francisco: Encounter Books, 2004.

⁹⁵ See for example Bill Muehlenberg, *The Case for the Two-Parent Family*. Melbourne: revised, 2007.

⁹⁶ Books include: Nicholas Davidson, ed., *Gender Sanity*. Lanham, MD: University Press of America, 1989; Michael Levin, *Feminism and Freedom*. New Brunswick, New Jersey: Transaction Books, 1987; and Steven Goldberg, *The Inevitability of Patriarchy*. London: Temple Smith, 1973, 1977 (later revised and released as *Why Men Rule*. Chicago: Open Court, 1999).

⁹⁷ Numerous works, often of a more popular variety, have sought to summarise the findings. See for example, Anne Moir and David Jessel, *Brainsex*. Delta, 1992; and Deborah Blum, *Sex on the Brain: The Biological Differences Between Men and Women*. Penguin, 1998. More recently, there is Louann Brizendine, *The Female Brain*. Morgan Road Books, 2006.

⁹⁸ David Blankenhorn, *The Future of Marriage*. New York: Encounter Books, 2007, p. 83.

⁹⁹ See for example, Allan Carlson, *Family Questions*. New Brunswick, New Jersey: Transaction Books, 1988; and George Gilder, *Men and Marriage*. Gretna, LA: Pelican Publishing, 1973, 1986. A more recent treatment can be found in Stanley Kurtz, "Fanatical Swedish Feminists," National Review online:

<<http://www.nationalreview.com/kurtz/kurtz200602220826.asp>>

¹⁰⁰ Christina Hoff Sommers, *The War Against Boys*. New York: Simon & Schuster, 2000.

¹⁰¹ See for example his 1941 classic, *The Crisis of Our Age*. (Garden City, NY: Doubleday, 1956 reprint).

¹⁰² J.D. Unwin, *Sex and Culture*. Oxford: Oxford University Press, 1934.

¹⁰³ J.D. Unwin, "Monogamy as a Condition of Social Energy," *The Hibbert Journal*, vol. 25, 1927, pp. 662, 663.

¹⁰⁴ Edward Gibbon, *The Decline and Fall of the Roman Empire*. 1776: various editions.

¹⁰⁵ See also, Harold O.J. Brown, *The Sensate Culture*. Dallas: Word Publishing, 1996.

¹⁰⁶ Ronald Bayer, *Homosexuality and American Psychiatry*. New York: Basic Books, 1981, pp. 3-4.

¹⁰⁷ Mark Alexander, "The Homosexual Agenda", <<http://www.patriotpost.us/papers/03-32.asp> 6/6/2006>.

¹⁰⁸ Elizabeth Moberly, *Homosexuality: A New Christian Ethic*, Cambridge: James Clarke, 1983, p. 9.

¹⁰⁹ Jeffrey Satinover, *Homosexuality and the Politics of Truth*. Grand Rapids: Baker Books, 1997, p. 142.

¹¹⁰ T.G.M. Sandfort, et al., "Same-sex behavior and psychiatric disorders," *Archives of General Psychiatry*, 58, 2001, pp. 85-91.

¹¹¹ J. Bradford, C. Ryan, and E. Rothlum, "National Lesbian Health Care Survey: Implications for mental health care," *Journal of Consulting and Clinical Psychology*, 62 (2), 1994, pp. 228-242.

¹¹² J.M. Bailey, "Homosexuality and Mental Illness," *Archives of General Psychiatry*, 56, 1999, pp. 883-884.

¹¹³ Susan Cochran and Vickie Mays, "Physical Health Complaints Among Lesbians, Gay Men, and Bisexual and Homosexually Experienced Heterosexual Individuals: Results from the California Quality of Life Survey," *American Journal of Public Health, First look*, April 26, 2007: <<http://www.ajph.org/cgi/content/abstract/AJPH.2006.087254v1>>.

¹¹⁴ See the important paper by J.A. Reisman, "Crafting Bi/Homosexual Youth," *Regent University Law Review*, 14:2, Spring 2002, pp. 283-342.

¹¹⁵ Dr Francis Collins, quoted in Dean A Byrd, "Homosexuality is Not Hardwired":

<www.narth.com/docs/nothardwired.html>.

¹¹⁶ G. J. M. van den Aardweg, *The Battle For Normality: A Guide for (Self) Therapy for Homosexuality*. San Francisco: Ignatius Press, 1997, pp. 33-50.

¹¹⁷ See a summary of this research at <www.peoplecanchange.com>.

¹¹⁸ J.A. Reisman, "Crafting Bi/Homosexual Youth," *Regent University Law Review*, Vol. 14:2, Spring 2002, pp. 283-342.

¹¹⁹ D. Shrier and R. Johnson, "Sexual victimization of boys: An ongoing study of an adolescent medicine clinic population," *Journal of the National Medical Association*, 80(11), 1988, 1189-1193.

¹²⁰ J. Bradford and RC Rothblum, eds., "National Lesbian Health Care Survey: Implications for Mental Health Care," *Journal of Consulting and Clinical Psychology*, 62(2), 1994, 228-242.

¹²¹ Morten Frisch and Anders Hviid, "Childhood Family Correlates of Heterosexual and Homosexual Marriages: A National Cohort Study of Two Million Danes," *Archives of Sexual Behavior*, Oct 13, 2006, pp. 533-548.

¹²² *Ibid.*

¹²³ *Ibid.*

¹²⁴ Jeffrey Satinover, "The 'Trojan Couch': How the Mental Health Associations Misrepresent Science." NARTH, 2005: <<http://www.narth.com/docs/TheTrojanCouchSatinover.pdf>>.

¹²⁵ Sandfort, de Graaf, Bijl, and Schnabel. "Same-sex behavior and psychiatric disorders," *Archives of General Psychiatry*, 58, 2001, 85-91.

¹²⁶ As reported in "Up in smoke," *MCV*, 23 April 2004, p. 11.

¹²⁷ "Gay men face eating disorders," *B.News*, 25 April 2002, p. 14.

¹²⁸ Koblin et al., "High-risk behaviors among men who have sex with men in 6 U.S. Cities: Baseline data from the EXPLORE Study," *American Journal of Public Health*, 93(6), 2003, 926-932.

¹²⁹ S.A. Knox, S. Kippax, P. van de Ven and G. Prestage, "Recreational Drug Use among Gay Men in Sydney, Australia: The Normative Role of Drug Use in Gay Social and Sexual Identity." Sydney: National Centre in HIV Social Research, 1998: <<http://gateway.nlm.nih.gov/MeetingAbstracts/102228049.html>>.

¹³⁰ "Illicit Drugs and Alcohol: Recent Use of any Illicit Drug, Australia, 2004." Australian Institute of Criminology, 2004: <http://www.aic.gov.au/stats/crime/drugs/drug_use.html>.

¹³¹ Waldner-Haugrud et al., "Victimization and Perpetration Rates of Violence in Homosexual and Lesbian Relationships: Gender Issues Explored," *Violence and Victims*, 12(2), 1997, 173-185.

¹³² L. Lockhart, "Letting out the Secret: Violence in Lesbian Relationships," *Journal of Interpersonal Violence*, 9, 1994, pp. 469-492.

¹³³ David Island and Patrick Lettellier, *Men Who Beat the Men Who Love Them: Battered Gay Men and Domestic Violence*. New York: Haworth Press, 1991.

¹³⁴ See J.A. Reisman, "Crafting Bi/Homosexual Youth," *Regent University Law Review*, Vol. 14:2, Spring 2002, pp. 283-342.

¹³⁵ "Fair's Fair: A Snapshot of Violence and Abuse in Sydney LGBT." A report by the AIDS Council of NSW and the Same Sex Domestic Violence Interagency:

<http://www.ssdv.acon.org.au/providerinfo/documents/SSDV_A4report.pdf>.

¹³⁶ "Gays threaten gays, AVP says," *MCV*, 24 October 2003, p. 5.

¹³⁷ Gabriel Rotello, *Sexual Ecology: AIDS and the destiny of homosexual men*. New York: Penguin Group, 1997.

¹³⁸ Center for Disease Control, "Increases in unsafe sex and rectal gonorrhoea among men who have sex with men, San Francisco, California, 1994-1997," *Mortality and Morbidity Weekly Report*. 48(3), 45-48. January 29, 1999.

¹³⁹ See for example, Garrett Prestage, et. al., *Sydney Gay Community Periodic Survey*. Sydney: Report Series C.4.: "Changes in Behaviour over Time". Sydney: National Centre in HIV Epidemiological and Clinical Research and National Centre in HIV Social Research, January 2000, p. 9.

¹⁴⁰ J.R. Diggs, "The Health Risks of Homosexual Sex." Corporate Research Council, 2002.

¹⁴¹ J.E. Barone, J. Yee, and T.F. Nealon, "Management of foreign bodies and trauma of the rectum," *Surgery, Gynecology and Obstetrics*, 1983, 156(4), 453-457.

¹⁴² John-Henry Westen, "Syphilis Rate Rises in US Homosexual and Bisexual Men but Declines in General Population," LifeSite, April 26, 2007: <<http://www.lifesite.net/ldn/2007/apr/07042604.html>>.

¹⁴³ K. Fethers and M. Caron, "Sexually transmitted infections and risk behaviors in women who have sex with women," *Sexually Transmitted Infections*, 76(5), 2000, pp. 345-349.

¹⁴⁴ B. Berger, et. al., "Bacterial vaginosis in lesbians: a sexually transmitted disease," *Clinical Infectious Diseases*, 21, 1995, pp. 1402-1405.

¹⁴⁵ Burnett, et. al., "Patterns of breast cancer screening among lesbians at increased risk for breast cancer," *Women and Health*, 29(4), 1999, pp. 35-55; The Medical Institute for Sexual Health, 1999; see also, K. Campbell, "Specialist weighing mammogram advice," *The Washington Blade*, 19 December 1994, p. 2.

¹⁴⁶ Ulrike Boehmer, Deborah Bowen and Greta Bauer, "Overweight and Obesity in Sexual-Minority Women: Evidence From Population-Based Data," *American Journal of Public Health*, June 2007, Vol. 97, Iss. 6, pp. 1134-1140.

¹⁴⁷ See an abstract of the article in the *International Journal of Eating Disorders*: <<http://www3.interscience.wiley.com/cgi-bin/abstract/114099467/ABSTRACT>>.

¹⁴⁸ Susan Cochran and Vickie Mays, "Physical Health Complaints Among Lesbians, Gay Men, and Bisexual and Homosexually Experienced Heterosexual Individuals: Results from the California Quality of Life Survey," *American Journal of Public Health, First look*, April 26, 2007: <<http://www.ajph.org/cgi/content/abstract/AJPH.2006.087254v1>>.

-
- ¹⁴⁹ Marshall Kirk and Hunter Madsen, *After the Ball: How America Will Conquer Its Hatred and Fear of Homosexuals in the 90s*. New York: Plume, 1990, pp. 177-178.
- ¹⁵⁰ Dennis Altman, *The Homosexualization of America*. New York: St. Martin's Press, 1982, p 9.
- ¹⁵¹ Paul Cameron, "Federal Distortion of The Homosexual Footprint.":
<http://www.lifesite.net/ldn/2007_docs/CameronHomosexualFootprint.pdf>.
- ¹⁵² R.S. Hogg and S.A. Strathdee, "Modeling the impact of HIV disease on mortality in homosexual and bisexual men," *International Journal of Epidemiology*, 26(3), 657-661, 1997, p. 657.
- ¹⁵³ Thomas Schmidt, *Straight & Narrow: Compassion & Clarity in the Homosexuality Debate*. Downers Grove, Illinois: InterVarsity Press, 1995, p. 130.
- ¹⁵⁴ See for example, Joe Nicolosi, *Reparative Therapy of Male Homosexuality*. Jason Aronson, 1991.
- ¹⁵⁵ Robert Spitzer, "Can Some Homosexual Men and Lesbians Change Their Sexual Orientation?," *Archives of Sexual Behaviour*, vol 32, no 5, Oct. 2003, pp 403-417.
- ¹⁵⁶ *Ibid.*
- ¹⁵⁷ G J M van den Aardweg, *The Battle For Normality: A Guide for (Self) Therapy for Homosexuality*. San Francisco: Ignatius Press, 1997, pp93-95. These comments were made in response to the US Catholic Conference of Bishops' document: "Ministry to Persons with a Homosexual Inclination," Nov. 11, 2006.
- ¹⁵⁸ An interview in MercatorNet: "Schools withhold sad facts about homosexual lifestyle," 3 November 2006 with Dr. Richard Fitzgibbons, a psychiatrist and Director of Comprehensive Counselling Services in W. Conshohocken, Pennsylvania.
- ¹⁵⁹ "Survey on Factors Motivating Desire to Change," <http://www.peoplecanchange.com/Why_Change.htm >.
- ¹⁶⁰ Gudrun Schultz, "Society that promotes homosexuality results in more self-identified homosexuals." NARTH, February 9, 2006: <<http://www.lifesite.net/ldn/2006/feb/06020902.html>>.
- ¹⁶¹ Jeffrey Padgett, "Homosexuality not genetic," *Western Courier*, September 10, 2006:
<http://www.westerncourier.com/home/index.cfm?event=displayArticlePrinterFriendly&uStory_id=930fa2de-4ff9-49c1-977e-73b83ae38013>.
- ¹⁶² Gudrun Schultz, *ibid.*
- ¹⁶³ Jeff Morrow, *Once homosexual Always homosexual?: Homosexual to Husband* Sydney, 2005; Shirley Baskett, *The Woman Who Outran the Devil: The Extraordinary Story of One Woman's Search For Real Love*. Monarch, 2005; Christopher Keane, ed., *What Some of You Were: Stories About Christians and Homosexuality*. Matthais Media 2001; and Ron Brookman, *Crossing Over: A Journey Of Transformation From Homosexuality and Other Dysfunctions Towards Wholeness*, awaiting publication.
- ¹⁶⁴ Liberty, Courage and Living Waters Groups.
- ¹⁶⁵ Cited in Roger Magnuson, *Are Homosexual Rights Right?* Portland, Oregon: Multnomah Press, 1990, p. 46.
- ¹⁶⁶ Reported in George Grant and Mark Horne, *Legislating Immorality: The Homosexual Movement Comes Out of the Closet*. Chicago: Moody Press, 1993, pp 40, 42.
- ¹⁶⁷ See J.A. Reisman, "Crafting Bi/Homosexual Youth," *Regent University Law Review*, Vol. 14:2, Spring 2002, pp. 283-342.
- ¹⁶⁸ *Ibid.*
- ¹⁶⁹ Reported in Paul Cameron, *Exposing the AIDS Scandal*. Lafayette, Louisiana: Huntington House Publishers, 1988, p 39.
- ¹⁷⁰ *Ibid.*
- ¹⁷¹ K. Freund and R.I. Watson, "The proportions of heterosexual and homosexual pedophiles among sex offenders against children: an exploratory study," *Journal of Sex and Marital Therapy*, vol. 18, Spring 1992, pp. 34-43.
- ¹⁷² Michael Ebert, "Joseph Nicolosi, PhD., is the Fugitive," *Focus on the Family Citizen*, June 20, 1994, pp. 10-12.
- ¹⁷³ Glenn Stanton and Bill Maier, *Marriage on Trial*. Downers Grove, Ill.: InterVarsity Press, 2004, p. 71.
- ¹⁷⁴ *Ibid.*
- ¹⁷⁵ Cited in Don Feder, "Dangers of Homosexual Parenting are Underrated," *The Boston Globe*, September 27, 1993.
- ¹⁷⁶ Testimony of Suzanne Cook before the Oregon State Senate, April 3, 1997.
- ¹⁷⁷ Kylie Smith, "I prefer suicide to lesbian mum," *The Herald Sun*, 24 November 2002, p. 6.
- ¹⁷⁸ Patrick Smellie, "Mum no more," *The Australian*, 24 January 1995.