

Chapter 14: Documentation in Support of the Pro-Family Position

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Why Government Should Actively Promote Marriage and Family in Public Policy and Law

This Fact Sheet is largely drawn from *Can Government Strengthen Marriage: Evidence from the Social Sciences*, by Maggie Gallagher, published at www.americanvalues.org. Citations are to the footnotes in the original article. The article is also published at www.defendthefamily.com, in the Resource Section under the title *Why Government Should Support Marriage*.

1. All people are better off when they live in communities where there are many natural families (1)
2. High rates of divorced parents and unwed. mothers in a community are associated with high rates of crime, drug use, child abuse, chronic illness, school failure, domestic violence and poverty for both adults and children (2).
3. High rates of divorce and unwed births create a substantially increased tax burden for government in the following areas:
 - police, jails and courts
 - medical care
 - child protective care
 - school remedial programs
 - childcare programs
 - welfare payments and government food programs
 - family intervention programs to prevent domestic violence, remove children, etc.
4. Men, women and children have been shown to be happier, healthier, financially better off and better citizens when they live in married, intact families (3).
5. Children, in particular, who do not live in intact natural families are much more at risk for criminal behavior, poverty and government dependency, school failure, drug and alcohol abuse, health problems (including high rates of sexually-transmitted disease), domestic violence, mental health problems, poor family relationships, unwed teen pregnancy and child abuse (4). These problems tend to continue into their adult lives.
6. Even a small reduction in the divorce and unwed childbearing rates would be likely to mean a large reduction in government costs.
7. Once the decline in marriage has started, it tends to increase over time, since children from broken families are often unable to make or sustain successful marriages.
8. Marriage is a public institution as well as a private relationship whose rights and responsibilities are recognized formally by virtually every known society, and thus is a proper concern of government (6).

9. Marriage is a relationship which is recognized by society to require certain valued behaviors, such as fidelity, commitment, nurturing and economic responsibility. Without strong public recognition and respect for these behaviors, individuals are less likely to engage in them and marriage is weakened.

10. Marriage is essential to a free and self-regulating society; the weakening of marriage inevitably causes social problems which require large amounts of government intervention.

11. Social scientists have accumulated a large amount of data which indicates that the benefits of marriage to society are so great, and the threat to society of weakening of marriage so severe, that supporting marriage is “clearly a matter of legitimate public concern” (7).

12. The goal of government should be to increase the proportion of children who are raised by their own two parents in a low-conflict marriage.

13. Government should not adopt policies which treat marriage as equal to other relationships, such as cohabiting couples. Once the special status of marriage is lost, it becomes harder for society to maintain the norms that support necessary marriage behaviors (fidelity, responsibility, etc.). People become confused about what marriage is.

14. Government should positively support these behaviors in law and public policy regarding marriage:

- fidelity
- permanence
- financial responsibility
- mutual support
- avoidance of violence and unnecessary conflict

15. Government should aim to reduce the number of births outside marriage by actively promoting the ideal of marriage as the desirable goal to young people, rather than simply encouraging young people to finish their education before having children.

16. Government should promote marriage over cohabitation because cohabiting relationships are intrinsically less stable than marriage. Cohabiting couples are less likely to remain together than married couples (14) and are more likely to be poor and to depend on government financial assistance (15).

17. Government should promote marriage preparation and marriage-strengthening programs. These programs have been shown to be effective in producing better marriages and limiting divorce (16) (17).

18. These programs can be relatively inexpensive, since they are able to be administered effectively by clergy and non-professional persons (21), and they are likely to reduce many of the expenses of government in other areas.

19. Government should adopt a policy of promoting marriage in every situation where childbearing is an issue: sex education for young students, people in situations where a child is going to be born outside of marriage (government-sponsored prenatal care or paternity identification programs). Government should also promote the strengthening of at-risk marriages (through divorce-court programs, domestic violence intervention, etc.).

20. There is no age-related advantage for unmarried childbearing. Unmarried women who had children outside marriage in or after their twenties were as much at risk as teenage women for poverty, physical and mental health problems. Furthermore, they were less likely to get married later than the teenage women studied (25, 26, 27, 28, 29).

21. The current trend in many countries is toward more unmarried births among older single women or cohabiting couples. Not only are these parents and their children at risk for many problems, but they often avoid marriage, seeing it as a risk (38).

22. Marriage counseling has been effective for many types of at-risk couples(40, 41, 42, 43, 44, 45). There are effective marriage-counseling programs for certain problem areas such as alcohol and drug abuse and domestic violence (48, 49, 50, 51, 52). By preserving families intact, these programs can save government far more tax dollars than they cost.

23. Tax policies and subsidy policies should offer advantages to intact, childbearing, married families. When such policies treat married and unmarried persons the same, they encourage the more unstable and fragile family groupings and discourage marriage.

24. Marriage-positive tax and subsidy policies can both encourage population replacement and discourage emigration, by encouraging a society of healthy married families in which all individuals have better lives, more hope for the future, and stronger ties to their home community.

25. Marriage-positive tax and subsidy policies benefit a nation's economy and tax base because married people have higher incomes and greater financial stability (3, 73).

Fact Sheet on Homosexuality and Mental Health

Serious mental health problems are also associated with same-sex relationships. A government-sponsored study of 5,998 Dutch adults ages 18 to 64 was published in the January, 2001 issue of the *Journal of the American Medical Association*. Specifically, the study found that -

Compared to heterosexual men, males who engage in homosexual behavior are:

- 727 percent more likely to have suffered bipolar disorders at some point in their lives, and 502 percent more likely in the last twelve months.
- 718 percent more likely to have suffered obsessive-compulsive disorder in the last twelve months, and 620 percent more likely at some point in their lives.
- 632 percent more likely to have suffered agoraphobia (fear of leaving home or being in public) in the last twelve months, and 454 percent more likely at some point in their lives.
- 421 percent more likely to have suffered panic disorder, and 229 percent more likely to have suffered social phobia at some point in their lives.
- 375 percent more likely to have suffered simple phobia in the last twelve months, and 361 percent more likely at some point in their lives.
- 311 percent more likely to have suffered mood disorders at some point in their lives, and 293 percent more likely in the last twelve months.
- 261 percent more likely to have suffered anxiety disorders in the last twelve months, and 267 percent more likely over the course of their lifetimes.
- 270 percent more likely to have suffered two or more psychiatric disorders during their lifetime.
- 235 percent more likely to have suffered major depression at some point in their lives.

Compared to heterosexual women, females who engage in homosexual behavior are:

- 405 percent more likely to have suffered a substance use disorder.
- 241 percent more likely to have suffered mood disorders during their lifetimes.
- 209 percent more likely to have suffered two or more mental disorders during their lifetimes.¹

As summarized by the researchers, “[t]he findings support the assumption that people with same-sex behavior are at greater risk for psychiatric disorders.”² Lest the reader assume that the mental health problems identified here result from general societal disapproval and/or stigmatization of homosexual behavior, it must be noted the country from whose population the participants were drawn, the Netherlands, is generally considered the most tolerant and homosexual-affirming in the world.

1 Sandfort, Theo G.M, et. al., “Same-Sex Sexual Behavior and Psychiatric Disorders,” *Archives of General Psychiatry* (Journal of the American Medical Association), Vol. 58, No. 1, January 2001.

2. *Ibid.* #####

Fact Sheet on Same Sex Attraction and Immutability

1) There is no reason to regard homosexuals as a distinct biological group in society.

Numerous studies have found that SSA (same-sex attraction) is not a stable condition. The majority of those who experience SSA during adolescence find the problem has disappeared by the time they reach 25 without any intervention.(1) . Gay activists have references to support their claims that homosexuality is innate, but the majority of their "research" suffers from serious methodological errors, and the rest actually contradict the gay activists' claims.(2)

2) There is good reason to promote treatment of homosexuals, and such treatment may be able to forestall the expensive measures required to treat diseases and other adverse conditions associated with homosexual practice (see Item 4).

Research has documented the benefits of therapy.(3) In fact, a study specifically designed to document the damage done by therapy directed at resolving SSA found that a number of subjects reported being helped by the therapy.(4)

Research shows that gender identity disorder in childhood puts a child on the path to SSA, but defenders and promoters of homosexuality oppose treatment of these children, even though such intervention can eliminate childhood isolation, anxiety, and depression.(5)

3) Adolescents should not be encouraged to embrace homosexuality.

Acting on SSA puts adolescents at risk. In spite of intensive AIDS education, young men of any age who have sex with men are at extremely high risk for infection with STDs, including HIV/AIDS, involvement with alcohol and drugs, in particular crystal meth, and depression.(6) Condom education with this population has been a failure. While condoms properly used provide some protection against certain STDs, research shows that those most at risk do not use condoms with every sexual contact. The combination of drugs and high risk sex has reignited an STD/HIV epidemic among men having sex with men.(7)

4) Not only is homosexuality associated with many serious medical conditions and diseases, it is also highly correlated with psychological disorders, substance abuse and domestic violence. All of these factors are both damaging and costly to a society.

While homosexuality is claimed to be a normal variant of human sexuality and that persons with SSA are as psychologically healthy as the rest of the population, research refutes this generalization. Four recent, well-designed studies have found that persons with SSA have significantly higher rates of psychological disorders, substance abuse problems, and suicidal ideation than the general public.(8) Published research demonstrates a high prevalence of partner abuse in homosexual relationships.(9)

Gay activists insist that all these problems are caused by society's negative attitudes, but the problems are just as prevalent in extremely tolerant countries, such as the Netherlands and New Zealand.(10).
5) **“Gay marriage” should not be treated as a beneficial social structure. In addition to being non-procreative, homosexual relationships, unlike marriage relationships, are characterized by instability / promiscuity rather than stability / fidelity.**

Promoters of "gay marriage" claim that same-sex relationships are just like marriages and therefore deserve all the benefits of marriage, but research shows -- *and activists admit* -- that it is unrealistic to expect male couples to be faithful.(11)

6) **Homosexual couples should not adopt children.**

Studies used to “prove” there are no differences between children raised by same-sex couples and those raised by their biological married mother and father are, virtually without exception, internally and externally invalid.(12) In many cases the authors have misreported their own findings. Given the extensive literature on the damage done to children through father or mother absence, it is deceitful to suggest that purposely and premeditatedly depriving a child of a mother or a father will not have consequences for that child.(13)

The material above is adapted from an article titled *Facts, not flattery, about same-sex attraction*, published at www.narth.com, and signed by the following physicians, therapists and researchers:

Dean Byrd, PhD, President elect of the National Association for Research & Therapy of Homosexuality (NARTH); Michelle A. Cretella, MD, Board of Directors, American College of Pediatricians; Joseph Nicolosi, PhD, President of NARTH; Richard Fitzgibbons, MD; Scientific Advisory Committee, NARTH; Dale O’Leary, author of *The Gender Agenda*, co-author of *Homosexuality and Hope*; George A. Rekers, PhD, Distinguished Professor of Neuropsychiatry & Behavioral Science Emeritus, University of South Carolina School of Medicine; Robert Saxer, MD, President, Catholic Medical Association; Philip M. Sutton, PhD, Scientific Advisory Committee, NARTH; Gerard van den Aardweg, PhD Netherlands, Scientific Advisory Committee, NARTH; Joseph Zanga, MD, FAAP, FCP, Past President, American College of Pediatricians.

Notes

(1) National Health and Social Life Survey (1994). In. E. O. Laumann, et al, *The Social Organization of Sexuality: Sexual Practices in the United States*, Chicago: University of Chicago Press, pp. 294-296); Nigel Dickson, C. Paul, P. Herbison, (2002). “Same-sex attraction in a birth cohort: prevalence and persistence in early adulthood,” *Social Science & Medicine*, 56, 1607-1615.

(2) Jeffrey Satinover (2005), “The Trojan Couch: How the Mental Health Associations Misrepresent Science.” [Narth.com](http://www.narth.com).

(3) Irving Bieber, et al. (1962). *Homosexuality: A Psychoanalytic Study of Male Homosexuals*, NY: Basic Books, 276; Robert Spitzer, (2003). “Can some gay men and lesbians change their sexual orientation? 200 participants reporting a change from homosexual to heterosexual orientation,” *Archives of Sexual Behavior*, 32 (5) 403-417; Glenn Wyler (April, 2004). “Anything but Straight: A Book Review,” *NARTH Bulletin*, 32- 45.

(4) Ariel Shidlo & Michael Schroeder, (2002). “Changing Sexual Orientation: A Consumer’s Report,” *Professional Psychology: Research and Practice*, 33 (3), 249-259.

(5) Robert George & David Tubbs, “Redefining Marriage Away,” *City Journal*, (Summer 2004). Quoting “Queer Liberalism?” (June 2000), *American Political Science Review*; James Nelson (1982). “Religious and moral issues in working with homosexual clients,” in Gonsiorek (ed.), *Homosexuality and Psychotherapy*, NY:

Haworth Press, 173.

- (6) Gary Remafedi, et al (1991). "Risk factors for attempted suicide in gay and bisexual youth," *Pediatrics*, 87 (6), 869-875.
- (7) US Centers for Disease Control and Prevention (2004). HIV Testing Survey 2002, Special Surveillance Report Number 1: 1-26.
- (8) David Fergusson, L. Horwood & A. Beautrais, (1999). "Is sexual orientation related to mental health problems and suicidality in young people?" *Archives of General Psychiatry*, 56 (10), 876-888; Richard Herrell, et al (1999). "A co-twin control study in adult Men: Sexual orientation and suicidality." *Archives of General Psychiatry*, 56 (10), 867- 874; Susan Cochran & Vickie Mays (2000). "Lifetime prevalence of suicide symptoms and affective disorders among men reporting same-sex sexual partners: Results from NHANES III," *American Journal of Public Health*, Vol. 90, (4) , 573-578; Theo Sandfort, et al (2001). "Same-sex Sexual Behavior and Psychiatric Disorders: Findings from the Netherlands Mental Health Survey and Incidence Study (Nemesis)." *Archives of General Psychiatry*, 58, 85-91.
- (9) Greenwood, G., et al. (2002). Battering Victimization Among a Probability-Based Sample of Men Who Have Sex With Men, *Amer. J. Pub Health*, 92 (12), 1964-69; Lisa Walder-Haugrad, Linda Vaden Gratch, & Brian Magruder (1997), "Victimization and Perpetration Rates of Violence in Gay and Lesbian Relationships: Gender Issues Explored", *Violence and Victims*, 12, 173-184.
- (10) Sandfort (ibid); Fergusson. (ibid).
- (11) Kenneth Zucker & Susan Bradley (1995). *Gender Identity Disorder and Psychosexual Problems in Children and Adolescents*, NY: Guilford,
- (12) Robert Lerner & Althea Nagai (2001). *No Basis: What the studies don't tell us about same-sex parenting*, Washington, DC: Marriage Law Project.
- (13) George A. Rekers (2005). "An Empirically Supported Rational Basis for Prohibiting Adoption Foster Parenting and Contested Child Custody by Any Person Residing in a Household that Includes a Homosexually-Behaving Member," *St. Thomas Law Review*, 18 (2), 325-424.

The Falsification of Evidence on Homosexuality by the U.S. Mental Health Associations

This Fact Sheet is drawn largely from *The Trojan Couch: How the Mental Health Associations Misrepresent Science*, by Jeffrey B. Satinover, M.S., M.D, published at www.narth.com.

1. Recent, major judicial rulings granting homosexuals various types of social status as a distinct group, decriminalizing homosexual behavior, and identifying homosexuals as a discriminated class, have been based on one central idea: *that homosexuality is a distinct, innate and immutable trait which can be defined and which is equivalent to heterosexuality.*
2. The following types of claims have been used to influence these rulings:
 - There are three “sexual orientations,” heterosexual, homosexual and bisexual, and they are largely innate
 - Sexual orientation becomes fixed by adolescence and is stable throughout life
 - Research indicates that homosexuals are psychologically normal; any psychological distress suffered by homosexual individuals is the result of social disapproval and discrimination
 - Homosexuality is no longer considered as an abnormal or treatable condition by mental health practitioners
3. The scientific support for these claims has been, at best, outdated, minimal and not supported by more recent data. At worst, it has been drawn from fully discredited sources and/or blatantly misrepresented to prove the claims cited above.
4. The professional guilds (psychiatric and psychological associations) which have declassified homosexuality as a disorder or eliminated it as a subject of treatment have done so under intense political pressure from gay-activist groups, and not as a result of professional experience or dispassionate scientific evaluation.
5. Studies which claim to demonstrate a genetic cause for homosexuality (primarily twin studies and research on brain characteristics) have been either inconclusive or scientifically unacceptable in their design and interpretation of results. A list of these studies and peer critiques of them is attached. These studies have not even been used in briefs prepared by professional guilds to influence judicial rulings.
6. Studies which are referenced to demonstrate that homosexuality is normal and stable fall into two general categories: those which are outdated, ideologically motivated, and do not meet minimum standards of research, and those whose results *contradict* the claims above, but are misrepresented in the briefs.

The principle flawed studies used are those of Alfred Kinsey and associates and those of Evelyn Hooker, both works now over 50 years old. (See attached list of these studies and the literature

criticizing them.)

- Kinsey has been discredited because of his unscientific selection of sample groups (he used prison inmates and sex offenders for subjects), his badgering and bribing of subjects, and above all for his mission to socially legitimize aberrant sexual practices: homosexuality, pedophilia, incest and bestiality. Kinsey had homosexual relationships with several of his associates and also practiced pedophilia. His surviving associates have continued to campaign for the normalization of these practices.
- Hooker's major study, conducted in 1957, was unscientifically designed to prove the point that homosexual men did not differ from heterosexual men in psychopathology. She used only 30 subjects from each group, eliminated any subjects who were in psychiatric therapy, administered (without professional expertise) three standardized diagnostic tests and discarded the results of two of them, and used her own personal criteria to evaluate results rather than the reliable standardized test norms. Hooker was also an ideologue, a lifelong champion of gay causes.

The principle studies which contradict the claims made in the briefs are those of Laumann et al., Saghir and Robbins, and Cochran et al. These were referenced through summaries and their major findings were not mentioned.

- The very reputable and 1994 Laumann study (a large study conducted by NORC at the University of Chicago) actually concluded that homosexuality is not a uniform attribute across individuals, that it is unstable over time and that it cannot be easily measured. Further, it found that homosexual behavior tends to *decrease* over time and be replaced by heterosexual behavior. These findings have been confirmed by many other studies all over the world, on hundreds of thousands of subjects, yet the findings were not referenced in the briefs, which in fact cited the Laumann study in *support* of the claim of permanence of sexual orientation.
- The Saghir and Robbins study, used to support the claim that homosexuality is normal (not pathological) cited suffers from grave sampling flaws: homosexual subjects were selected from gay-activist groups and screened to eliminate past psychiatric hospitalization, while heterosexuals were drawn from the general population. Prior to this elimination, 14% of the male and 7% of the female homosexuals, but none of the heterosexuals, had had such hospitalizations. Thus the sampling technique itself reveals that the homosexual population had a much higher rate of psychopathology than the heterosexual one. The same researchers have published other studies in which they have found homosexuality to be associated with both alcoholism and suicidality.

The Cochran and May studies found that homosexuals had higher rates of suicidal symptoms and a slightly greater risk of recurring depression. They also found a tendency to "psychiatric morbidity" which could not be explained as being caused by social discrimination alone. Susan Cochran sat on the committee which prepared one of the guild briefs, which *does not mention* these findings from her own published work. In combination with other researchers, she has also done studies showing

elevated rates of anxiety, mood and substance use disorders among homosexuals and high rates of various mental health problems among lesbians and bisexuals. ###

Documentation in Support of the Assertions Made in Chapter 6:

I. The following articles support the assertions made in the summary of pro-family presuppositions Chapter Six, roughly in the order in which the assertions are made. However, most of the articles support multiple points in the text and are thus not presented in traditional “footnote” format, but as documentation of the entire thesis.

- (1) Brown, Susan & Booth, Alan (1996), “Cohabitation Versus Marriage: A Comparison of Relationship Quality,” *Journal of Marriage and the Family*, 58 (3) 668-78.
- (2) Binstock, Georgina & Thornton, Arland (2003), “Separations, Reconciliations, and Living Apart in Cohabiting and Marital Unions,” *Journal of Marriage and Family*, 65 (2) 432-443.
- (3) Treas, Judith & Giesen, Deirdre (2000), “Sexual Infidelity Among Married and Cohabiting Americans,” *Journal of Marriage and the Family*, 62 (1) 48-60.
- (4) Jeffrey Satinover (2005), “The Trojan Couch: How the Mental Health Associations Misrepresent Science.” *Narth.com*.
- (5) Fagan, Patrick, Johnson, Kirk A. and Butcher, Jonathan (1996), *A Portrait of Family and Religion in America*, based on data from the National Longitudinal Study of Adolescent Health; Charts 2,3,4,5,6 and 8 illustrate the strength of the two types of natural intact families, married and cohabiting natural parents, over all other child raising configurations in preventing destructive behavior by their adolescent children.
- (6) Irving Bieber, et al. (1962). *Homosexuality: A Psychoanalytic Study of Male Homosexuals*, NY: Basic Books, 276; Robert Spitzer, (2003). “Can some gay men and lesbians change their sexual orientation? 200 participants reporting a change from homosexual to heterosexual orientation,” *Archives of Sexual Behavior*, 32 (5) 403-417; Glenn Wyler (April, 2004). “Anything but Straight: A Book Review,” *NARTH Bulletin*, 32- 45.
- (7) Ariel Shidlo & Michael Schroeder, (2002). “Changing Sexual Orientation: A Consumer’s Report,” *Professional Psychology: Research and Practice*, 33 (3), 249-259.
- (8) David Fergusson, L. Horwood & A. Beautrais, (1999). “Is sexual orientation related to mental health problems and suicidality in young people?” *Archives of General Psychiatry*. 56 (10), 876-888.
- (9) Theo Sandfort, et al (2001). “Same-sex Sexual Behavior and Psychiatric Disorders: Findings from the Netherlands Mental Health Survey and Incidence Study (Nemesis).” *Archives of General Psychiatry*, 58, 85-91.

What Same-Sex "Marriage" Has Done to Massachusetts: It's Far Worse than Most People Realize

by Brian Camenker, www.massresistance.org ,October 20, 2008

Anyone who thinks that same-sex “marriage” is a benign eccentricity which won’t affect the average person should consider what it has done in Massachusetts. It’s become a hammer to force the acceptance and normalization of homosexuality on everyone. And this train is moving fast. What has happened so far is only the beginning.

On November 18, 2003, the Massachusetts Supreme Judicial Court announced its Goodridge opinion, ruling that it was unconstitutional not to allow same-sex “marriage.” Six months later, homosexual marriages began to be performed.

The public schools

The homosexual “marriage” onslaught in public schools across the state started soon after the November 2003, court decision.

- **At my own children's high school there was a school-wide assembly to celebrate same-sex “marriage” in early December, 2003.** It featured an array of speakers, including teachers at the school who announced that they would be “marrying” their same-sex partners and starting families either through adoption or artificial insemination. Literature on same-sex marriage – how it is now a normal part of society – was handed out to the students.
- **Within months it was brought into the middle schools.** In September, 2004, an 8th-grade teacher in Brookline, MA, told National Public Radio that the marriage ruling had opened up the floodgates for teaching homosexuality. “In my mind, I know that, ‘OK, this is legal now.’ If somebody wants to challenge me, I’ll say, ‘Give me a break. It’s legal now,’” she told NPR. She added that she now discusses gay sex with her students as explicitly as she desires. For example, she said she tells the kids that lesbians can have vaginal intercourse using sex toys.
- **By the following year it was in elementary school curricula.** Kindergartners were given picture books telling them that same-sex couples are just another kind of family, like their own parents. In 2005, when David Parker of Lexington, MA – a parent of a kindergartner – strongly insisted on being notified when teachers were discussing homosexuality or transgenderism with his son, the school had him arrested and put in jail overnight.
- **Second graders at the same school** were read a book, “King and King”, about two men who have a romance and marry each other, with a picture of them kissing. When parents Rob and Robin Wirthlin complained, they were told that the school had no obligation to notify them or allow them to opt-out their child.
- **In 2006 the Parkers and Wirthlins filed a federal Civil Rights lawsuit** to force the schools to notify parents and allow them to opt-out their elementary-school children when homosexual-related subjects were taught. The federal judges dismissed the case. The judges

ruled that because same-sex marriage is legal in Massachusetts, the school actually had a duty to normalize homosexual relationships to children, and that schools have no obligation to notify parents or let them opt-out their children! Acceptance of homosexuality had become a matter of good citizenship!

Think about that: Because same-sex marriage is “legal”, a federal judge has ruled that the schools now have a duty to portray homosexual relationships as normal to children, despite what parents think or believe!

- In 2006, in the elementary school where my daughter went to Kindergarten, the **parents of a third-grader were forced to take their child out of school because a man undergoing a sex-change operation and cross-dressing was being brought into class** to teach the children that there are now “different kinds of families.” School officials told the mother that her complaints to the principal were considered “inappropriate behavior.”
- **Libraries have also radically changed.** School libraries across the state, from elementary school to high school, now have shelves of books to normalize homosexual behavior and the lifestyle in the minds of kids, some of them quite explicit and even pornographic. Parents complaints are ignored or met with hostility.
- Over the past year, homosexual groups have been using taxpayer money to distribute a large, slick hardcover **book celebrating homosexual marriage** titled “Courting Equality” into every school library in the state.
- **It’s become commonplace in Massachusetts schools for teachers to prominently display photos of their same-sex “spouses” and occasionally bring them to school functions.** Both high schools in my own town now have principals who are “married” to their same-sex partners, whom they bring to school and introduce to the students.
- **“Gay days” in schools are considered necessary** to fight “intolerance” which may exist against same-sex relationships. Hundreds of high schools and even middle schools across the state now hold “gay, lesbian, bisexual, and transgender appreciation days”. They “celebrate” homosexual marriage and move forward to other behaviors such as cross-dressing and transsexuality. In my own town, a school committee member recently announced that combating “homophobia” is now a top priority.

Once homosexuality has been normalized, all boundaries will come down. The schools are already moving on to normalizing transgenderism (including cross-dressing and sex changes). The state-funded Commission on Gay, Lesbian, Bisexual and Transgender Youth includes leaders who are transsexuals.

Public health

- **The Commissioner of the Massachusetts Department of Public Health** is “married” to another man. In 2007 he told a crowd of kids at a state-sponsored youth event that it’s “wonderful being gay” and he wants to make sure there’s enough HIV testing available

for all of them.

- Since homosexual marriage became “legal” the **rates of HIV / AIDS have gone up considerably in Massachusetts**. This year public funding to deal with HIV/AIDS has risen by \$500,000.
- Citing “the right to marry” as one of the “important challenges” in a place where “it’s a great time to be gay”, **the Massachusetts Department of Public Health helped produce The Little Black Book, Queer in the 21st Century**, a hideous work of obscene pornography which was given to kids at Brookline High School on April 30, 2005. Among other things, it gives “tips” to boys on how to perform oral sex on other males, masturbate other males, and how to “safely” have someone urinate on you for sexual pleasure. It also included a directory of bars in Boston where young men meet for anonymous sex.

Domestic violence

Given the extreme dysfunctional nature of homosexual relationships, the Massachusetts Legislature has felt the need to **spend more money every year to deal with skyrocketing homosexual domestic violence**. This year \$350,000 was budgeted, up \$100,000 from last year.

Business

- **All insurance in Massachusetts** must now recognize same-sex “married” couples in their coverage. This includes auto insurance, health insurance, life insurance, etc.
- Businesses must recognize same-sex “married” couples in **all their benefits, activities, etc.**, regarding both employees and customers.
- **The wedding industry is required to serve the homosexual community** if requested. Wedding photographers, halls, caterers, etc., must do same-sex marriages or be arrested for discrimination.
- **Businesses are often “tested” for tolerance by homosexual activists**. Groups of homosexual activists often go into restaurants or bars and publicly kiss and fondle each other to test whether the establishment demonstrates sufficient “equality” — now that homosexual marriage is “legal”. In fact, more and more overt displays of homosexual affection are seen in public places across the state to reinforce “marriage equality”.

Legal profession

- **The Massachusetts Bar Exam now tests lawyers on their knowledge of same-sex "marriage" issues**. In 2007, a Boston man, Stephen Dunne, failed the Massachusetts bar exam because he refused to answer the questions in it about homosexual marriage.
- Issues regarding homosexual “families” are now firmly entrenched in the Massachusetts legal system. In many firms, lawyers in Massachusetts practicing family law **must now attend seminars on homosexual "marriage"**. There are also now several homosexual judges overseeing the Massachusetts family courts.

Adoption of children to homosexual “married” couples

- **Homosexual “married” couples can now demand to be able to adopt children** the same as normal couples. Catholic Charities decided to abandon handling adoptions rather than submit to regulations requiring them to allow homosexuals to adopt the children in their care.
- **In 2006 the Massachusetts Department of Social Services (DSS) honored two men “married” to each other as their “Parents of the Year”.** The men already adopted a baby through DSS (against the wishes of the baby’s birth parents). According to news reports, the day after that adoption was final DSS approached the men about adopting a second child. Homosexuals now appear to be put in line for adopting children ahead of heterosexual parents by state agencies in Massachusetts.

Government mandates

- **In 2004, Governor Mitt Romney ordered Justices of the Peace to perform homosexual marriages when requested or be fired.** At least one Justice of the Peace decided to resign.
- Also thanks to Gov. Romney, **marriage licenses in Massachusetts now have “Party A and Party B” instead of “husband and wife.”** Romney did not have a legal requirement to do this; he did it on his own. (See more on this below.)
- Since homosexual relationships are now officially “normal”, **the Legislature now gives enormous tax money to homosexual activist groups.** In particular, the Massachusetts Commission on Gay Lesbian Bisexual and Transgender Youth is made up of the most radical and militant homosexual groups which target children in the schools. This year they are getting \$700,000 of taxpayer money to go into the public schools.
- **In 2008 Massachusetts changed the state Medicare laws** to include homosexual “married” couples in the coverage.

The public square

- Since gay “marriage”, **annual gay pride parades** have become more prominent. There are more politicians and corporations participating, and even police organizations take part. **And the envelope gets pushed further and further.** There is now a profane “Dyke March” through downtown Boston, and recently a “transgender” parade in Northampton that included bare-chested women who have had their breasts surgically removed so they could “become” men. Governor Patrick even marched with his “out lesbian” 17-year old daughter in the 2008 Boston Pride event, right behind a “leather” group brandishing a black & blue flag, whips and chains!

The media

- Boston media, particularly the Boston Globe newspaper, regularly does **feature stories and news stories portraying homosexual “married” couples where regular married couples would normally be used.** It’s “equal”, they insist, so there must be no difference in the coverage. Also, the **newspaper advice columns** now deal with homosexual "marriage" issues, and how to properly accept it.
- **A growing number of news reporters and TV anchors** are openly “married” homosexuals who march in the “gay pride” parades.

Is gay marriage actually legal in Massachusetts?

Like everywhere else in America, the imposition of same-sex marriage on the people of Massachusetts was a combination of radical, arrogant judges and pitifully cowardly politicians.

The Goodridge ruling resulted in a complete cave-in by politicians of both parties on this issue. Same-sex “marriage” is still illegal in Massachusetts. On November 18, 2003 the court merely ruled that it was unconstitutional not to allow it, and gave the Legislature six months to “take such action as it may deem appropriate.” Note that the Massachusetts Constitution strongly denies courts the power to make or change laws, or from ordering the other branches to take any action. The constitution effectively bans “judicial review” – a court changing or nullifying a law.

Thus, the court did not order anything to happen; it simply rendered an opinion on that specific case. And the Legislature did nothing. The marriage statutes were never changed. However, against the advice of many, Gov. Romney took it upon himself to alter the state’s marriage licenses to say “Party A and Party B” and order officials to perform same-sex “weddings” if asked, though he had no legal obligation to do so. Technically, same-sex marriages are still illegal in Massachusetts.

Nevertheless, we are having to live with it. And furthermore, this abdication of their proper constitutional roles by the Legislature and Governor has caused a domino effect as “copycat” rulings have been issued in California and Connecticut, with other states fearful it will happen there.

Homosexual “marriage” hangs over society like a hammer with the force of law. And it’s only just begun. It’s pretty clear that the homosexual movement’s obsession with marriage is not because large numbers of them actually want to marry each other. Research shows that homosexual relationships are fundamentally dysfunctional on many levels, and “marriage” as we know it isn’t something they can achieve, or even desire. (In fact, over the last three months, the Sunday Boston Globe’s marriage section hasn’t had any photos of homosexual marriages. In the beginning it was full of them.) This is about putting the legal stamp of approval on homosexuality and imposing it with force throughout the various social and political institutions of a society that would never accept it otherwise. To the rest of America: You’ve been forewarned.