

# Immoralism, Homosexual Unhealth, and Scripture

A Response to Peterson and Hedlund's  
"Heterosexism, Homosexual Health, and the Church"

## Part I: Introduction and General Response

by

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### I. Introduction

In 2004 Charles R. Peterson (M.D., a retired physician) and Douglas A. Hedlund (M.D., a psychiatrist) wrote a very nasty and distorted online critique of my book *The Bible and Homosexual Practice: Texts and Hermeneutics* (Abingdon Press, 2001), with a secondary focus (equally nasty and distorted) on work by Dr. Roy Harrisville III (Executive Director of Solid Rock Lutherans), Dr. Merton P. Strommen (author of *The Church and Homosexuality: Searching for a Middle Ground* [Kirk House, 2001]), and Rev. Russell E. Saltzman (editor of *Forum Letter*). Essentially Peterson and Hedlund accuse me and the aforementioned, repeatedly and explicitly, of being unethical, hateful, and lacking in integrity in talking about what Scripture and science have to say about homosexuality. However, the only way that they can make such an accusation stick is by misrepresenting not only what I say about Scripture and science on homosexuality but also what Scripture and science do in fact tell us.

Their "Critique" is the second and main portion of their essay entitled "Heterosexism, Health, and the Church." The Critique is divided into a part 1 on science and a part 2 on Scripture, followed by a "Discussion" and "Conclusions." For those interested, their critique can be accessed in its various parts at:

<http://perham.eot.com/~vati/peterson/doc2.html> for part 1 (on science)  
<http://perham.eot.com/~vati/peterson/doc3.html> for part 2 (on Scripture)  
<http://perham.eot.com/~vati/peterson/doc4.html> for "Discussion"  
<http://perham.eot.com/~vati/peterson/doc5.html> for "Conclusions"  
<http://perham.eot.com/~vati/peterson/end.html> for end notes  
<http://perham.eot.com/~vati/peterson/abstract.html> for the abstract  
<http://perham.eot.com/~vati/peterson/abbr.html> for the "Critique Abbreviated"

There is also a “History Paper” section which, though also distorted, is of less relevance.

**Part 1** of my response deals generally with Peterson and Hedlund’s Critique.

**Part 2** puts a magnifying glass over the first part of their Critique, the section covering science, and specifically pp. 1-7, where the greatest attempt to misrepresent my work is made. Here they treat what I allegedly say in my first book, *The Bible and Homosexual Practice: Texts and Hermeneutics* (Abingdon Press, 2001) as regards four main rubrics: “1. The inherent pathology of homosexuality”; “2. The problem of pedophilia”; “3. Sexual promiscuity”; and “4. Serious health problems associated with homosexuality.” I show how, in each of these sections, they distort what I say about scientific studies, give little indication that they understand my arguments, and ignore significant research that contradicts their premises.

**Part 3** assesses the second part of their Critique, the section covering Scripture. If you come to the conclusion that their work on the scientific evidence is not done well overall, stick around: Their interpretation of Scripture is even worse. What is striking is their arrogance in repeatedly accusing me of distorting the biblical text under the motivation of “heterosexism” when over and over they show how little grasp they have of the biblical text in its theological and historical context. Most of the time it is clear that they have not even read thoroughly what I have said on a given subject. What they have read they have generally misrepresented. Of particular note in this critique is a relatively concise layout of how we know that St. Paul’s indictment of homosexual practice included (a) committed homosexual unions and (b) those with some congenital predisposition to homosexual practice.

## II. Overall Characterization of Their Critique

Responding to critiques of the kind produced by Peterson and Hedlund is always difficult and unpleasant because of the level of misrepresentation and the personal, hurtful nature of the attack. I generally find that there is an inverse relationship here: the more heat that such critiques produce, the less light they generate. To put it more plainly: the less weighty the argumentation, the more caustic the rhetoric. This is what I have come to expect from critics who paint themselves as “tolerant,” “loving,” and “inclusive”: lots of inflammatory name calling. On this score Peterson and Hedlund don’t disappoint.

What they have produced is essentially a piece of hate literature that is even inaccurate in portraying what they hate. I suppose that there is some benefit to have such rhetoric out in the open before the ELCA and other mainline denominations might change their position on homosexual practice. For after a change is made, those who continue to uphold Scripture can expect the same hostility, only now with institutional teeth to go after those with whom they disagree.

As wearisome as it is to read and respond to such attacks, it is often necessary to do so in order that others might not be taken in and deceived. Although their article generates

occasional points that are worthy of discussion (not necessarily agreement), on the whole their critique is a pastiche of inflammatory rhetoric, *ad hominem* attacks, unintelligible “representations” of the logic of my arguments, ignoring or simply not reading the defenses of positions as given, ignoring significant studies that contradict their views (even those cited in my book), quotations taken out of context, half-truths, and even outright falsehoods about what I allegedly say or don’t say.

Peterson and Hedlund attempt to justify this style of writing on p. 1 of their “Discussion”:

Some theologians in this group we critiqued may object that this summary is not representative of one or another’s individual’s view. But we think our conflation is reasonable for discussion because . . . [readers] will extrapolate even more inaccurate conclusions from [their stance].

In other words, because readers may draw “even more inaccurate conclusions” from Gagnon et al.’s works than we have, our own inaccurate conclusions are permissible. That is not a very high standard for accuracy. As bad as their reasoning is, the results are worse, for I have encountered no one *more* inaccurate and just plain mean-spirited in “representing” my work than Peterson and Hedlund. To be sure, I have encountered some who are equally or nearly so, such as [Prof. David Balch](#), [Prof. Walter Wink](#), [Prof. William Countryman](#), and [Eric Thurman](#), but still no one more so. Hence, Peterson and Hedlund have no reason to fear that readers will be more inaccurate than they. That base they have covered well.

They go on:

We acknowledge that in attempting to critique about one thousand pages of writing in less than thirty pages, our representation of those critiqued is less than perfect. But we have attempted to be fair in representing important points well enough to give what we think is better balance to the discussion, especially as it relates to scientific evidence relevant to the health of gay and lesbian persons.

The admission that they have produced a “less than perfect” “representation of those critiqued” is certainly an understatement. This new justification, namely that they had “less than thirty pages” to do the critique (the total of all the parts is actually about 40 pages, but let’s not quibble), is not the reason for this most imperfect product. Page after page of inaccuracy and outright maliciousness cannot be corrected by more pages of the same. It can only be corrected by a change of heart and mind.

The last sentence of the block quote suggests that the authors think they have done their best and most accurate work in critiquing our work on the scientific evidence: “we have attempted to be fair . . . especially as it relates to scientific evidence.” They are certainly right to recognize the less than fully satisfactory quality of their Scripture work—though, of course, their recognition doesn’t go far enough. However, their lack of expertise cannot excuse their distortions in working with Scripture since even non-experts are expected to read carefully, to represent accurately the views that they read, and to acknowledge when their counterarguments are already addressed by the person whom they seek to criticize. Unfortunately, their work with scientific research and their

representation of what I have to say on the subject of science and homosexuality are not much better than their Scripture work.

### III. A Summary of Their Position and My Response

As I read the position of Peterson and Hedlund I see basically six elements to their Critique:

1. The only problem with homosexual behavior is its typical promiscuity.
2. It is this promiscuity, along with societal homophobia, that is the primary source of homosexual health ills. The primary fault for homosexual promiscuity is ecclesiastical and societal “heterosexism” against homosexual persons, which I, Harrisville, Strommen, Saltzman, and persons like us allegedly promote in the Lutheran context. If church and society grant homosexual persons the right to marry and encourage them toward monogamy, fidelity, and lifelong commitment, the problem of homosexual promiscuity with its negative effects on the health of homosexual persons will be largely solved.
3. Since few, if any, homosexual persons can radically change their sexual orientation, it is immoral and cruel to continue to uphold an other-sex requirement for marriage.
4. Gagnon, Strommen, and Harrisville have, in an unethical manner, deliberately distorted what science has to say on the subject, selectively misreading and misrepresenting the data to suit their own heterosexist inclination and making it seem as if there is something endemic to homosexuality itself, something other than heterosexism, that could be the prime cause of homosexual unhealth.
5. Gagnon has distorted what Scripture has to say on the subject of homosexual practice, making it seem as if the writers of Scripture were opposed to committed homosexual unions engaged in by homosexually inclined persons when in fact they opposed only exploitative same-sex relations committed by heterosexually inclined persons.
6. Anyone who disagrees with these points is a bigoted “heterosexist” who holds a “restrictive” position.

In response I make the following points (corresponding to the point numbers above):

1. **The primary problem with homosexual behavior is not its typical promiscuity but its distorted homosexual aspect**; namely, sexual arousal for, and merger with, the sex that one already shares in common; that is, treating a sexual same as one’s sexual counterpart when God formed man and woman as complementary sexual counterparts.
2. **The disproportionately high rates of relational and health problems associated with homosexual behavior**—incidentally, rates that differ significantly for homosexual males and homosexual females—**are mostly attributable to basic biological differences between men and women**, the healthy interaction of which is absent from same-sex erotic unions. Endorsement

of homosexual unions would achieve only modest improvement of homosexual relational and health problems and would do so at a much higher price to church and society.

3. **The degree to which a desire is biologically caused and resistant to change carries no inherent moral implications**, since (a) all desires are biologically caused and (b) many that are highly resistant to change are rejected on moral grounds even in the absence of intrinsic, measurable harm. This includes strong sexual attractions for structurally incompatible (but not intrinsically harmful) sexual unions. Jesus and New Testament authors call on persons to put to death deeply ingrained desires even at the cost of a significant feeling of deprivation. Change is a multifaceted concept that for some will involve the elimination of unwanted desires but for most will entail not coming under their behavioral sway. **It is cruel to provide incentives for persons to engage in a form of behavior that (a) carries disproportionately high health risks, (b) likely will lead to an increase in persons oriented to such behavior, and (c) will, according to Scripture, put people at risk of not inheriting an eternal place with God.**
4. **It is Peterson and Hedlund who have manipulated the interpretation of scientific data to reach a desired ideological outcome.** Contrary to what Peterson and Hedlund argue, scientific data does not support the conclusion that higher levels of mental health problems are primarily attributable to societal moral discomfort with homosexual behavior. Nor does it support the conclusion that the high numbers of lifetime sex partners and the high rates of sexually transmitted disease on the part of male homosexuals—neither of which problems afflicts homosexual women to nearly the same degree—are primarily due to societal “homophobia.” Nor does the scientific data support the conclusion that homosexual development is as unrelated to pedophilia as heterosexual development. Nor does the scientific data establish that no amount of societal variables or individual circumstances has any impact on homosexual development. Peterson and Hedlund not only misrepresent and ignore studies incompatible with their ideological convictions, they also misrepresent and ignore arguments that I make for which they have no good response.
5. **Peterson and Hedlund consistently distort what Scripture has to say about homosexual practice in its historical and cultural context and what I have to say about such matters.** This includes their view of the creation stories as having no bearing on homosexual practice; their claim that the Sodom and Gibeah narratives show disfavor only for coercive same-sex sexual acts committed by heterosexuals; their claim that there is no evidence that Jesus would have been strongly opposed to homosexual practice; or their claim that Paul was opposed only to particularly exploitative forms of homosexual practice and/or homosexual behavior engaged in by heterosexuals. They consistently distort the fact that Scripture’s other-sex structural requirement for sexual relations is second only to an inter-human (non-bestial) requirement as a core or foundational value for sexual ethics; that ancient Israel, early Judaism, and early Christianity exhibited

the strongest, most pervasive, and most absolute opposition to homosexual practice of any known culture in the ancient Near East or the Greco-Roman Mediterranean basin.

6. **Peterson and Hedlund portray those who disagree with their views as “heterosexist,” a term that parallels the bigotry of a racist. The term is as absurd as calling those who maintain a monogamy standard “monosexualists,” or those who maintain an age requirement “teleiosexualists”** (*teleios* = full grown, mature, adult), **or those who require a certain degree of blood unrelatedness “exosexualists”** (*exo* = outside, here as in “outside the family”), **or those who require sex only within the human species “anthrosexualist”** (*anthropos* = human). We rightly recognize these other terms as ludicrous because each of the standards being maintained are requirements for structural congruity that are creation- and Scripture-based. So too the opposition to homosexual practice. The whole comparison with race or sex is misguided. For example, race is an intrinsically benign, absolutely immutable, and primarily non-behavioral condition. Sexual desires are not intrinsically benign. They are not absolutely immutable to cultural influences and individual life experiences. And, as impulses, they are oriented toward specific sexual behaviors.

**Peterson and Hedlund also like to throw around as a slur against those who accept Scripture’s clear witness the label “restrictive (Christians).”** Think about the use of such a term. **Do we as a church want to reach the regressive point where we strive for “inclusivity” as regards permitting all sorts of sexual behaviors?** “Inclusivity” and “diversity” are grossly misplaced values when it comes to defining acceptable sexual behavior. Jesus himself is the prime example of someone who worked to further limit the already carefully circumscribed sexual ethic given to him in the Hebrew Bible. He was no “inclusivist” as regards sexual standards. But, apparently, that is the prime rubric that Peterson and Hedlund want to adopt for the church’s stance on sexual behavior. Not holiness. Not conformity to God’s will as expressed in creation and reiterated by Jesus and followed by the apostolic leaders of the church. **Christians who reject homosexual practice do so because to do otherwise would be an “immoralist” act,** not because they value being “restrictive” or discriminatory in a prejudicial sense. Peterson and Hedlund are not sexual libertines. But the categories that they use to tar those with whom they disagree are morally and spiritually bankrupt. They are immoralist categories when applied to sexual ethics.

The remaining part of this essay will expand on the first four points made above.

#### **IV. Overlooking the Core Problem of Structural Incompatibility**

Contrary to Peterson and Hedlund, the first and most significant problem with homosexual practice is not its typical promiscuity. Rather, it is the structurally

incompatible character of merging two people who are already of the same sex. This is an erotic attraction for what one already is as a sexual being and a denial of the reality that man and woman are the two and only two complementary halves of a sexual whole. This sexual attraction is narcissistic if one realizes that it is for the distinctive features of one's own sex and self-deceptive if one does not realize it. Increasing the commitment to such a bond merely increases the commitment to a form of union that is contrary to nature and, from a scriptural perspective, contrary to God's revealed will in creation. Whatever gains might be made in the number of partners lifetime or in relational longevity (which would be minimal at best, as noted below) would be bought at the cost of violating an even more foundational requirement of sexual relationships. The primary problem with homosexual behavior is no more its typical promiscuity than is the potential for birth defects the primary problem with adult incest or jealousy the primary problem with polyamorous unions. A long-term homosexual union merely regularizes the deception of viewing and treating a person of the same sex as one's appropriate sexual counterpart.

Modern secular societies, to say nothing of religious ones, retain the notion that sexual relationships must meet special structural criteria; that is, objective facets of congruity or complementarity that are grounded in nature or physical makeup and that transcend positive dispositions of the heart or mind and even positive behaviors. These include considerations of consanguinity (i.e., no sexual relations with close blood relations), number (i.e., a limitation to one partner at a time), age (no sex with children), and species (no sex with animals). There is a need for multiple levels of structural correspondence between sexual partners.

It is not enough to emphasize the presence of love and commitment in a sexual bond and the absence of scientifically measurable harm or exploitation in all bonds of a given type. Indeed, neither the universal absence of love nor the universal presence of scientifically measurable harm can be demonstrated for any of the above. For non-religious folk it suffices to combine an intuitive nature argument with scientific evidence of a disproportionately high rate of problems attending that genre of relationships. For Christians (to speak to our religious heritage) such arguments are combined with one yet more decisive: the witness of God's word in Scripture, particularly as carried over in the New Testament.

Biological sex (gender) has a just claim to being a foundational criterion for valid sexual unions, the basis or analogical model for others. If committed multiple-partner unions and incestuous unions are unacceptable, then committed homosexual unions should be even more problematic. For the twoness of human sexual relations, on which a prohibition of polygamy is based, is predicated on the deep structure of two sexes. Moreover, the structural requirement of complementary difference, on which a prohibition of incest is based, is more keenly disclosed in sexual differentiation than in blood unrelatedness. Dissolving a two-sex prerequisite for valid sexual unions strikes at the heart of whether there should be *any* requirement of deep structural compatibility between prospective sexual partners that takes its cue from the material structures of creation and transcends the issue of personal affections. For at the heart of all sexual practice is the sex (gender) of the participants. Because there are two sexes and because two sexes are structurally

complementary at many levels, a given individual, by virtue of belonging to only one of these two sexes, interacts sexually as only one incomplete part of a two-part sexual whole. On the crucial level of sex (gender), one's structural complement or counterpart can only be a person of the other sex. There is no escaping the rational basis in nature for this conclusion. When one perceives union with a sexual same as an avenue for completion of the sexual self, the integrity of one's sex is implicitly denied.

## V. Misplacing the Blame for Harm

While it is possible that "gay marriage" might bring some moderate improvement in monogamy and longevity to a fraction of homosexual relationships, evidence to date does not encourage the view that a fundamental shift of behavior would occur. Significantly different levels of problems between male homosexual unions and female homosexual unions—for example, higher numbers of partners and sexually transmitted disease among the former and shorter-term relationships and a higher incidence of mental health problems among the latter—suggests rather that disproportionately high rates of harm are traceable in large measure to basic biological differences between men and women. Notice again that I don't say inherent or intrinsic, scientifically measurable harm (as Peterson and Hedlund falsely claim that I say) but rather disproportionately high rates that are the product of inherent or intrinsic deficiencies in homosexual unions, specifically in combining two persons of the same sex rather than combining one person of each of the two sexes. Male-female biological differences contribute markedly to the health of heterosexual unions. In a sexual bond between persons of the same sex the extremes of a given sex are not moderated and true gaps are not filled. To continuously call marriage what almost certainly will not be monogamous *and* of twenty-years duration or more (let alone lifelong) can only have a long-term cheapening effect on the institution of marriage. All this is spelled out in greater detail in Part 2 of our essay.

In addition, this cheapening effect on the institution of marriage would be reinforced by the effective elimination of structural prerequisites for marriage that transcend both mutual commitment and an inability to prove inherent, measurable harm. This would leave society with little justification for holding the line against other forms of committed sexual relationships for which at most only a disproportionately high level of harm, but not universal harm, could be surmised: various kinds of polyamorous relationships, incest, adult-adolescent relationships, and perhaps even adult-child relationships and bestiality. Proponents of homosexual marriage may protest that they are not advocating such unions. Yet the logic of their position moves to that ultimate outcome.

The little information that currently exists regarding the cultural effects of homosexual marriage does not encourage much optimism. First, the rate of homosexual persons taking advantage of current domestic partnership laws or even civil marriage is too small to effect a significant change of behavior in the homosexual population. For example, although homosexual activists had been clamoring for "gay marriage" for over a decade in the Netherlands, only 3% of adult homosexual persons and only one out of ten

homosexual couples were married in the first three years that homosexual marriage was available (2001-2004). Whatever the motivations of its proponents, “gay marriage” ends up being more about validating the homosexual life than about strengthening marriage or domesticating homosexual unions. Second, a series of articles mostly published in *National Review* in 2004 by Stanley Kurtz, a Harvard-trained social anthropologist and fellow at the Hoover Institution, show that the introduction of same-sex registered partnerships or homosexual marriage in Scandinavia and the European lowland countries has coincided with a sharp rise in out-of-wedlock births. This is not surprising given that the validation of homosexual unions depends on rhetoric that ultimately decouples marriage from the raising of children. Supporting homosexual practice would also likely encourage an increase in homosexual self-identification, homosexual practice, and even homosexuality itself (see VI. below).

Another unwanted impact of “gay marriage” for Christians would be to encourage civil and religious intolerance of those who uphold Scripture’s core prerequisite of two sexes in a sexual union. Although supporters of homosexual unions preach tolerance and diversity, the political and religious agenda of most in the movement suggests otherwise. Developments in northern Europe, Canada, and even parts of the United States indicate that civil approval of homosexual relationships brings along a wave of intolerance toward those who publicly express disapproval of homosexual practice (see Alan Sears and Craig Osten, *The Homosexual Agenda* [Nashville, 2003]). Penalties in some Western countries already range from fines, to loss of employment, to even incarceration. Christian colleges and seminaries that have policies against homosexual practice or allow faculty to teach against it will one day risk losing their tax-exempt status, access to federal grants and student loans, and ultimately accreditation itself. Public schools will intensify their indoctrination of children into the acceptability of homosexual unions from kindergarten on and single out for marginalization and ridicule any who question this agenda. Parents’ rights in instilling moral values in their children will be abridged. Indeed, the state could remove self-professed gay and lesbian children from parents who express moral disapproval of homosexual practice on the pretense of “child abuse.” Mainline denominations will comply with societal trends by refusing to ordain “heterosexists” and even disciplining heterosexual clergy. Since approval of homosexual practice can only occur at the cost of marginalizing Scripture, the trend will be toward a hard-left radicalization of mainline denominations.

## **VI. Making a God out of Intense and Persistent Sexual Desires**

Sexual orientation is merely the directedness of sexual desire at any given period in a person’s life—no more, no less. It is not a God. If a person has a sexual orientation that violates structural prerequisites for sexual activity, then it is the gratification of the orientation that must give way, not the structural prerequisites ordained by the Creator as attested in Scripture and still perceptible in nature even to the unredeemed. This is not to make light of the deprivation experienced by such persons but rather to take seriously God’s creation of male and female in his image and his will for that creation. There are surely at least as many people (especially men) who experience dissatisfaction with

monogamy that is as intense, and as “hard-wired,” as any dissatisfaction with other-sex partners experienced by homosexual persons. Certainly, too, a pedophilic orientation is no less intense and resistant to change than a homosexual orientation. A ‘polysexual’ person and a ‘pedosexual’ person feel the deprivation imposed by church and society every bit as keenly as a homosexual person. And if it were ever discovered that some persons have a deeply rooted orientation to incest, would that be sufficient grounds to validate man-mother or woman-brother sexual unions, particularly since universal measurable harm cannot be demonstrated in all circumstances for all persons? Hopefully not.

Orientations to sinful activity, sexual or otherwise, do not mitigate the sinfulness of the activity. Nor do all sins produce scientifically measurable harm such as distress in the participants or an inability to function effectively in society (apart from societal phobias). The existence of an orientation toward behaviors that Scripture categorizes as sinful may affect the pastoral response, inculcating greater sensitivity, patience, and compassion as one recognizes the persistent character of sexual urges and the need for long-term oversight if effective management of these urges is to be achieved. Yet it should not change the evaluation of practice as sinful. Two researchers supportive of homosexual unions have acknowledged that biological causation does not determine morality:

Despite common assertions to the contrary, evidence for biological causation does not have clear moral, legal, or policy consequences. To assume that it does logically requires the belief that some behaviour is non-biologically caused. We believe that this assumption is irrational because the most proximal cause of behaviour is neurophysiological, and thus all behavioural differences will on some level be attributable to differences in brain structure or process. Thus, no clear conclusions about the morality of a behaviour can be made from the mere fact of biological causation, because all behaviour is biologically caused. (B. S. Mustanski and J. M. Bailey, “A therapist’s guide to the genetics of human sexual orientation,” *Sexual and Relationship Therapy* 18:4, 2003, p. 432)

The essence of following Jesus is not the satisfaction of biological urges, no matter how deeply engrained, but rather taking up one’s cross by denying oneself and losing one’s life (Mark 8:34-37; Matt 10:39 par. Luke 17:33; Matt 10:38 par. Luke 14:27 par. *Gos. Thom.* 55:20; John 12:25). One person’s area of difficult denial may be homosexual urges; another’s may be intense polyamorous impulses; another’s may be primary attraction to adolescents or even prepubescent children; another’s alcoholism and still another’s selfishness, anger, or gross materialism. No one gets an exemption for repetitive, self-affirming sinful practices because too much is at stake in inheriting the kingdom of God. Or so Jesus and the witness of New Testament authors indicate.

Peterson and Hedlund make much of data that they allege proves that homosexual persons rarely make radical changes. The truth is that we don’t know how often or how much change is possible. I think the prospect for change is probably as likely and of the same kind as that possible for pedophilic dispositions or alcoholism. It might even be a little more difficult, not because of anything inherent in homosexual orientation but because in our current cultural climate there is strong support for “coming out” as “gay and lesbian,” at least among most of the institutional elite, and strong opposition to ministries and

counseling groups valiantly working to help persons not be enslaved by desires that are structurally incongruous to God's creation of two complementary sexes. (Note here that Peterson and Hedlund frequently limit my understanding of complementarity to anatomy. If they had read my work carefully, they would know that I understand anatomical complementarity as part of, but also emblematic or symbolic of, a broader range of male-female features that work remarkably well together in a sexual union involving both sexes.) One of many ironies in Peterson and Hedlund's critique is that persons such as they make the work of groups like NARTH or Exodus International that much more difficult by their strenuous opposition and denials of substantive change. Why bother changing when one receives so much cultural support nowadays for expressing homosexual attractions?

For a more reliable assessment of sexual reorientation therapy than the one provided by Peterson and Hedlund, who have no personal dealings with such, see the work of Dr. Warren Throckmorton, an Associate Professor of Psychology at Grove City College and past president of the American Mental Health Counselors Association. Throckmorton has produced articles on the subject published in the *Journal of Mental Health Counseling* (1998) and in *Professional Psychology: Research and Practice* (2002). These articles and other resources are available on his website at <http://www.drthrockmorton.com/>. For example, see the piece "[Reorientation Redux](#)" which compares the study by Spitzer documenting successes in reorientation therapy, which Peterson and Hedlund largely dismiss, and the study by Shidlo and Schroeder alleging significant harm done by reorientation therapy, which Peterson and Hedlund hold up as a model study of scientific objectivity.

[Proponents of homosexual practice] cannot logically dismiss Dr. Spitzer's study unless they are prepared to dismiss the Shidlo and Schroeder study of people harmed by reorientation therapy. Essentially, they are similar studies but with different groups of people. Drs. Shidlo and Schroeder used no control groups and stated publicly that they were looking for people to document the damage of "homophobic therapies." Dr. Spitzer deliberately looked for people who said they were helped and had changed. Furthermore, the Shidlo and Schroeder study took five years to find 176 people who were willing to say that they were harmed; it took Dr. Spitzer two years to find his 200 participants.

If one is concerned about objectivity, one could make a case that Dr. Spitzer's study has an advantage. Dr. Spitzer is historically associated with the American Psychiatric Association's action to discontinue seeing homosexuality as a mental disorder. He favors gay civil rights. He had no ideological rationale to distort his perceptions or his findings. Drs. Shidlo and Schroeder are gay psychologists who set out to find what they found. Even so, I do not dispute the potential for certain practices to cause harm. Why do opponents of reorientation continue to dispute the word of people who say they have been helped by seeking change?

. . . I have to wonder why the APA made policy regarding reorientation therapy in the absence of data. If one doubts that the APA acted in this manner, consider what Drs Shidlo and Schroeder said in their 2002 *Professional Psychology* article about the APA's position regarding reorientation therapy: "This position [the APA position on reorientation therapy] is consistent with theoretical and clinical arguments echoed in the writings of several clinicians . . . but lacks the support of a systematic base of empirical data. No large-scale study has been made with the specific goal of looking at the

harmfulness of conversion therapies. The current investigation seeks to remedy that.” The position came first, the data thereafter.

Let us return to my point that the prospect for change in homosexual orientation is probably as likely and of the same kind as that possible for pedophilic dispositions or alcoholism. The goal for Alcoholics Anonymous or for therapists who counsel those with sexual attractions toward children is not complete eradication of unwanted impulses but effective management of the impulses in question. And sometimes in the process of achieving the latter goal the former, or something like it, is achieved by the grace of God. But we don't put a gun to God's head, or ours, and insist that he get rid of the sinful impulses in question or else. Not a single New Testament moral imperative is predicated on the assumption that believers first lose all innate desires to violate the imperative in question. St. Paul understood the secret of being content in all circumstances. He recognized, as in the “thorn in the flesh” episode, that sometimes God's answer to prayer requests to deliver us from difficult physical conditions is often a “No.” “My grace is sufficient for you, my power is perfected in weakness” (2 Cor 12:9). I'm no masochist but I am continuing to learn in life that sometimes, and perhaps usually, the greatest opportunity for God to form Christ in me comes in circumstances when my intense desires go unmet. Change is a multifaceted phenomenon in the Christian life. Being governed by the Spirit of Christ rarely involves the complete eradication of sinful impulses. It always entails their crucifixion, putting to death impulses whose recompense is spiritual death.

Peterson and Hedlund ignore the point that I make about change and homosexual orientation when I discuss the issue in *The Bible and Homosexual Practice*: “The best hope for change in the sexual orientation of homosexuals [here meant in terms of primary eradication of impulses, not the possibility of living in the Spirit] comes not in attempts to treat homosexuals after years and years of homosexual behavior but rather in limiting the options that young people have in terms of sexual experimentation” (p. 429). As I note in my book, **there are many lines of evidence that suggest that macro- and microcultural factors have a significant impact on the incidence of homosexuality.** For example:

- Significant **cross-cultural differences** in the incidence and forms of homosexuality have existed over the millennia and even within our own time between the “first world” and “third world” (cf. David Greenberg, *The Construction of Homosexuality* [University of Chicago, 1988]).
- Researchers for the 1992 National Health and Social Life Survey (NHSLs), mostly from the University of Chicago, found large differences in the incidence of homosexual self-identification in the United States correlating with **geographical (rural, suburban, urban) and educational variables**. They concluded: “An environment that provides increased opportunities for and fewer negative sanctions against same-gender sexuality may both allow and even elicit expression of same-gender interest and sexual behavior.” Their study also confirmed that there are significant differences in the way that men and women respond to cultural stimuli. See my book, pp. 416-18.
- Studies have indicated that **the sexual identities of adolescents** are less stable than those of adults (which is also common sense). See, for example, G. Remafedi, et al.,

“Demography of sexual orientation in adolescents,” *Pediatrics* 89:4 (Apr. 1992): 714-21. Here’s is the authors’ abstract:

This study was undertaken to explore patterns of sexual orientation in a representative sample of Minnesota junior and senior high school students. The sample included 34,706 students (grades 7 through 12) from diverse ethnic, geographic, and socioeconomic strata. . . . Overall, 10.7% of students were “unsure” of their sexual orientation; 88.2% described themselves as predominantly heterosexual; and 1.1% described themselves as bisexual or predominantly homosexual. . . . Gender differences were minor; but responses to individual sexual orientation items varied with age, religiosity, ethnicity, and socioeconomic status. Uncertainty about sexual orientation diminished in successively older age groups, with corresponding increases in heterosexual and homosexual affiliation. The findings suggest an unfolding of sexual identity during adolescence, *influenced by sexual experience and demographic factors*. (emphasis added)

If adolescents experiment in homosexual behavior, those whose sexual identity is still somewhat in flux will probably experience a higher incidence of homosexual proclivity than if they had never participated in such behavior. We also know now that the brain rewires in accordance with experiences in life; in short, nurture can become nature (cf. my book, pp. 398-99).

- We also know that those who self-identify as homosexuals are several times more likely to have experienced **sex at an early age**, nearly always with an older male. I discuss this issue at the end of my detailed assessment of the pedophilia issue below. Suffice it to say here that a causal connection between early childhood sex with a man and later homosexual development is a likely explanation for this phenomenon.
- The work of Bell and Weinberg indicates that even most exclusive homosexuals (category 6) have experienced, at one time or another in life, some degree of heterosexual arousal. This speaks to a **degree of elasticity in sexual desire**, which could be elevated or decreased in one direction or the other depending on macro- and microcultural influences. See my book, 418-20.
- Research has indicated a strong correlation between early manifestations of **gender nonconformity** and the development of homosexual attraction. Yet even gender nonconformity does not lead in a straight line to homosexual development. There may be a connection between gender nonconformity at an early stage of life and congenital influences. But the link between congenital influences and homosexual development is at least one step further removed. Different family, peer, and societal influences, along with incremental choices and responses to life’s unique experiences, best explain why early gender nonconformity leads to homosexual development for many but not for all. See my book, 408-12.
- The two best **identical twin studies** to date suggest at most only a secondary correlation between genes and homosexuality. Peterson and Hedlund show awareness only of identical twin research that shows a 50% concordance rate in identical twins when at least one twin self-identifies as non-homosexual. This is just one more piece of evidence that Peterson and Hedlund don’t have a good grasp of the research. The studies producing a 50% concordance were riddled with sample bias, as even the author of a couple of them later admitted: J. Michael Bailey. In those studies participants were found by advertising in gay publications; these participants self-selected to achieve a desired result for the study. In *The Bible and Homosexual Practice*, which Peterson and Hedlund should have read, I cite Bailey’s most recent identical twin study, one that made use of the Australian

Twin Register (p. 404; Bailey et al., “Genetic and environmental influences on sexual orientation and its correlates in an Australian twin sample,” *Journal of Personality and Social Psychology* 78 [2000]: 524-36). This study found that nearly nine out of ten times when an identical twin self-identified as non-heterosexual the co-twin self-identified as heterosexual. Bailey noted that this study “did not provide statistically significant support for the importance of genetic factors for that trait” and that “concordances from prior studies were inflated due to concordance dependent ascertainment bias.” Strange that Peterson and Hedlund don’t mention it. Then, too, Peterson and Hedlund seem to be unaware of the twin study by P. A. Bearman of Columbia University and H. Brückner of Yale University (“Opposite-Sex Twins and Adolescent Same-Sex Attraction,” *American Journal of Sociology* 107 [2002]: 1179-1205). The study found no significant difference in concordance rates for non-heterosexuality among identical twin pairs (6.7%) and fraternal twin pairs (7.2%), even though the latter are no more genetically ‘identical’ than non-twin siblings. Moreover, they found that opposite-sex twins were twice as likely to report same-sex attraction as same-sex twins; and that males without older brothers among opposite-sex twins were twice as likely to report same-sex attraction (18.7%) than their male counterparts with older brothers (8.8%). Bearman and Brückner concluded that “less gendered socialization in early childhood and preadolescence shapes subsequent same-sex romantic preferences.” Temperamental traits that are only indirectly related to homosexuality interact with environmental factors and incremental choices to raise or lower risk for homosexual development. There is no congenital determinism.

A standard textbook on psychiatry makes the following observation (cited in my book on p. 402): “Genetic factors play some role in the production of homosexual behavior, but . . . **sexual behavior is molded by many influences, including ‘acquired tastes’ (or learning) closely related to the culture in which the individual develops.** . . . It is possible . . . to picture a future in which homosexual behavior will be so much in the cultural experience of every individual that the genetic contribution will become undetectable” (Paul R. McHugh and Phillip R. Slavney, *The Perspectives of Psychiatry* [2d ed.; Johns Hopkins, 1998], 184-85; both authors are professors at the John Hopkins University School of Medicine). The convergence of multiple pieces of evidence puts the lie to Peterson and Hedlund’s rigid essentialist assumption that no amount of cultural incentives and no amount of individual experimentation that goes along with such incentives could ever affect the incidence of homosexuality in the population.

What the above suggests is that providing the kind of cultural incentives for homosexual practice that Peterson and Hedlund want to implement will probably increase not only the incidence of homosexual identification and behavior in the population but homosexuality itself. And with such an increase will come an increase in the negative side-effects typically associated with homosexual practice for health and relational problems. Now why would we want to encourage that?

## **VII. On Peterson and Hedlund’s Misrepresentation of the Scientific Data and My Use of It**

I offer here a shorter presentation of what will be thoroughly documented in Part 2 of my essay.

**A. *Homosexuality and psychopathology.*** Contrary to what Peterson and Hedlund charge, I do not claim that the authors of the studies that I cite in on pp. 476-78 concluded that mental health problems were inherent in a homosexual orientation. I do not believe that myself. Apart from sadomasochism, there are no sexual attractions that always produce measurable harm to all participants in all circumstances. I was correct in asserting, again contrary to Peterson and Hedlund, that the researchers for one of the studies and J. Michael Bailey who commented on both studies did not think that the link to psychopathology could be dropped solely, and perhaps even primarily, on the doorstep of societal homophobia. Nor did I cite only one theory of possible causes, as they allege. What I do show from these and a newer Dutch study is that the disproportionately high incidence of mental health problems experienced by homosexual persons do not appear to lessen significantly even as toleration and acceptance of homosexual practice grows. That certainly suggests that something related to homosexuality itself, not just societal opposition to it, contributes significantly to mental health problems. If this is true, then Peterson and Hedlund's proposal that societal acceptance and promotion of committed homosexual unions will essentially do away with the comparatively high incidences of depression, anxiety disorders, and substance abuse is an instance of wishful thinking.

**B. *The dearth of lifelong, monogamous homosexual relationships.*** Peterson and Hedlund make an extraordinarily unsuccessful attempt to dismiss the studies that I cite to indicate the significantly higher numbers of sex partners that male homosexuals have, on average, during the course of their life. I show why the attempt is unsuccessful, looking briefly at each study. I further show that those studies that also deal with lesbian relationships consistently demonstrate significantly fewer partners for female homosexuals. This suggests that male homosexual promiscuity cannot be primarily attributable to societal "heterosexism" or "homophobia." I also show how even many researchers supportive of homosexual practice acknowledge sexual stimulation patterns as a key male-female difference; moreover, that Peterson and Hedlund completely ignore arguments for this in my book. I also demonstrate that many respectable male homosexual activists have long been making the point that the heterosexual principle of monogamy is too stifling. I explain how a monogamy principle is logically threatened by a refusal to predicate the 'twoness' of sexual unions on the 'twoness' or binary character of sexual differentiation. I also discuss special problems faced by lesbian relationships that do not hit male homosexual relationships quite so hard, problems that are more likely to be due to the absence of the balancing effect offered by a male partner than to common societal "homophobia."

**C. *The problem of pedophilia.*** While I note here that I do not regard pedophilia as the most important problem in endorsing homosexual practice, nor believe that most homosexual persons engage in it or approve of it, I do show how cultural endorsement of homosexual practice weakens the cultural barrier against adult-adolescent and even adult-prepubescent sex. I first establish that a significant body of literature coming from homosexual and bisexual activists entertains the morality or at least permissibility of adult-child sexual contact. I then show that Peterson and Hedlund's rigid distinction between pedophilia as an inherent "pathological mental disorder" and homosexuality as a

non-pathological condition is not justified by the research that we currently have, as a number of researchers supportive of the normalization of homosexual practice now acknowledge. Neither pedophilia nor homosexuality causes intrinsic measurable harm but both are associated with increased risk of such harm. Arguments once used to justify removal of homosexuality from the *Diagnostic Manual of Mental Disorders* are now being reused by reputable researchers in reputable scientific journals to advocate a similar reconsideration of pedophilia as a mental illness. I also show how the attempt by Peterson and Hedlund and others to make an absolute distinction between “homosexuals” and “homosexual pedophiles” is not warranted by research to date. While there are differences between the two that help to explain why most homosexual persons are not homosexual pedophiles, there are also significant continuities between the two that help to explain why the *proportion* of persons with a homosexual development who become pedophiles is far higher than the *proportion* of persons with a heterosexual development who become pedophiles. In this connection Peterson and Hedlund seem a bit confused about the difference between “total numbers” and matters of proportionality. I show why the Jenny et al. study that they implicitly allude to is no evidence to the contrary. I also explain why my statement that sexual abuse is likely to be at least *a* causative factor in *some* homosexual development is, contrary to Peterson and Hedlund, justified by scientific research. Finally, I demonstrate why Peterson and Hedlund’s counterargument regarding the near universal heterosexual behavior of men of the Etoro tribe (who as children engage in transgenerational homosexuality) does not establish the point the Peterson and Hedlund want to make.

***D. The problem of sexually transmitted disease.*** Contrary to what Peterson and Hedlund falsely claim, I do not say that disproportionately high numbers of sex partners (particularly on the part of male homosexuals) and the disproportionately high frequency of relationship breakups (especially among female homosexuals) have nothing to do with the transmission of sexually transmitted disease. Rather, I connect the two. The point that Peterson and Hedlund miss (aside from the anal intercourse issue, below), even though I enunciate it quite clearly on multiple occasions in my book, is that these disproportionately high rates of partners and short-term sexual relationships are themselves due to the inherent added difficulties of pairing two people of the same sex. For various biological reasons men simply find monogamous behavior to be more difficult than do women on average. It doesn’t mean that they can’t be monogamous. It is just more difficult. When you put two men together in a sexual union it doubles the difficulty. Thus a male homosexual union is not generally a recipe for lifelong monogamy. I also show how Peterson and Hedlund’s attempt to discount receptive anal intercourse by male homosexuals as a significant factor in developing rectal cancer is a misreading of scientific studies on the matter. Women have a higher needs index in terms of what they expect to get out of a relationship to meet basic yearnings for personal esteem. Put two women together in a sexual union and the strain on the relationship increases markedly, which in turn leads to more relational breakups and more mental health issues.