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Family Action Council

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Box 66714, 38 King Street East Stoney Creek, ON L8G 5E6

Delegate Presentation

Re: Sexual Orientation Strand, Equity Policy

Appendix of Supporting Documentation

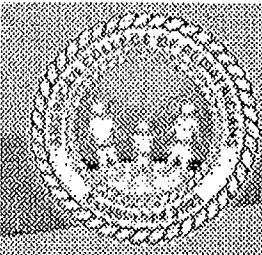
May 12, 2008

**Committee of the Whole
Hamilton-Wentworth District School Board**

Modeled population, HIV prevalence and incidence among MSM by region, 2004



Health region (aggregated)	Proportion MSM	Number MSM	Number HIV	Prevalence HIV	Annual HIV incidence (No.)	Annual HIV incidence (%)
Toronto	5.5%	54,308	10,650	19.6%	610	1.4%
Ottawa	3.4%	10,586	1,500	14.2%	100	1.1%
Rest of Ontario	0.8%	26,621	2,750	10.3%	160	0.67%
Ontario, total	2.0%	91,515	14,900	16.3%	870	1.1%



American College of Pediatricians

Advocating for the Best Interests of Children

Parenting Issues

Homosexual Parenting: Is It Time For Change?

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Are children reared by two individuals of the same gender as well adjusted as children reared in families with a mother and a father? Until recently the unequivocal answer to this question was "no." Policymakers, social scientists, the media, and even physician organizations¹, however, are now asserting that prohibitions on parenting by homosexual couples should be lifted. In making such far-reaching, generation-changing assertions, any responsible advocate would rely upon supporting evidence that is comprehensive and conclusive. Not only is this not the situation, but also there is sound evidence that children exposed to the homosexual lifestyle may be at increased risk for emotional, mental, and even physical harm.

Research data

Heterosexual parenting is the normative model upon which most comprehensive longitudinal research on childrearing has been based. Data on long-term outcomes for children placed in homosexual households are very limited and the available evidence reveals grave concerns. Those current studies that appear to indicate neutral to favorable results from homosexual parenting have critical flaws such as non-longitudinal design, inadequate sample size, biased sample selection, lack of proper controls, and failure to account for confounding variables.^{2,3,4} Childrearing studies have consistently indicated that children are more likely to thrive emotionally, mentally, and physically in a home with two heterosexual parents versus a home with a single parent.^{5,6,7,8,9} Therefore, the burden is on the proponents of homosexual parenting to prove that moving further away from the heterosexual parenting model is appropriate and safe for children.

Risks of Homosexual Lifestyle to Children

Violence among homosexual partners is two to three times more common than among married heterosexual couples.^{10,11,12,13,14} Homosexual partnerships are significantly more prone to dissolution than heterosexual marriages with the average homosexual relationship lasting only two to three years.^{15,16,17} Homosexual men and women are reported to be inordinately promiscuous involving serial sex partners, even within what are loosely-termed "committed relationships."^{18,19,20,21,22} Individuals who practice a homosexual lifestyle are more likely than heterosexuals to experience mental illness,^{23,24,25} substance abuse,²⁶ suicidal tendencies,^{27,28} and shortened life spans.²⁹ Although some would claim that these dysfunctions are a result of societal pressures in America, the same dysfunctions exist at inordinately high levels among homosexuals in cultures where the practice is more widely accepted.³⁰ Children reared in homosexual households are more likely to experience sexual confusion, practice homosexual behavior, and engage in sexual experimentation.^{31,32,33,34,35} Adolescents and young adults who adopt the homosexual lifestyle, like their adult counterparts, are at increased risk of mental health problems, including major depression, anxiety disorder, conduct disorder, substance dependence, and especially suicidal ideation and suicide attempts.³⁶

Conclusion

The research literature on childrearing by homosexual parents is limited. The environment in which children are reared is absolutely critical to their development. Given the current body of research, the American College of Pediatricians believes it is inappropriate, potentially hazardous to children, and dangerously irresponsible to change the age-old prohibition on homosexual parenting, whether by adoption, foster care, or by reproductive manipulation. This position is rooted in the best available science.

January 22, 2004

The American College of Pediatricians is a national medical association of licensed physicians and healthcare professionals who specialize in the care of infants, children, and adolescents. The mission of the College is "to enable all children to reach their optimal, physical and emotional health and well-being." We promote "a society where all children from the moment of their conception are valued unselfishly." The College further notes, "that children are the future of our nation and society. As such, they deserve to be reared in the best possible family environment and supported by physicians committed to ensuring their optimal health and well-being."

ENDNOTES

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- ⁶ Sotirios Sarantakos, "Children in Three Contexts: Family, Education, and Social Development," *Children Australia*, vol. 21 (1996): 23-31.
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- ⁸ Elizabeth Thomson et al., "Family Structure and Child Well-Being: Economic Resources vs. Parental Behaviors," *Social Forces* 73 (1994): 221-42.
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LifeSiteNews.com

Friday May 6, 2005

FDA Bans Gay Sperm Donors

* WASHINGTON, May 6, 2005 (LifeSiteNews.com) – The US Food and Drug Administration has banned sperm donation from sexually active gay donors, citing the HIV prevalence associated with sodomy. *

* "With an anonymous sperm donor, you can't be too careful," said FDA spokesman Eleanor Nicoll, according to a foxnews.com report. "Our concern is for the health of the recipient, not to let more and more people be sperm donors." *

Several clinics said they would continue to welcome gay donors despite the new FDA regulations, arguing that the new directive is "discriminatory." Alameda, California's, Rainbow Flag sperm bank director Leland Trainman, for example, said he would continue to solicit gay donors.

The FDA, in its guidelines, responds to arguments that the agency should simply screen donors for the HIV virus rather than reject donors for engaging in risky sexual practices. "In response to the comments suggesting that FDA should allow establishments to rely on HIV test results alone . . . without screening for risk factors, FDA rejects that approach at this time."

* The FDA explained that, even though there may be more sensitive techniques to test for HIV available in the future, even the best of tests will fail to measure the presence of HIV in early stages of the disease. "Accordingly, FDA believes that, based on the current state of testing and current knowledge about disease transmission, it is necessary to screen for risk factors as well as to test for diseases such as HIV." *

Read the FDA regulations (pdf): <http://www.fda.gov/OHRMS/DOCKETS/98fr/97N-484S-nfr0001.pdf>

Read Fox News coverage: <http://www.foxnews.com/story/0,2933,155637,00.html>

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We are currently involved in a collaborative pandemic influenza planning process with hospitals and organizations including Health Canada and the Public Health Agency of Canada. Through our planning, we expect to address and find solutions for dealing with challenges such as decreased staffing, donor deferrals, and potential decline in blood collections.

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* Why do you not allow gay men the right to donate blood? *

Canadian Blood Services' policy indefinitely defers any man who has sex with another man, even once, since 1977. The policy in question does not apply specifically to gay men. This is one of numerous screening procedures which allow us to identify a variety of behaviours and activities known to increase risk to the safety of the blood supply.

The basic premise for our policy pertaining to men who have had sex with men is that the prevalence and incidence of HIV is much higher in males who have had sex with other males than it is in individuals having exclusively heterosexual sex. ~~Statistics released by the Public Health Agency of Canada in 2005 indicate that men who have sex with men represented 58 per cent of the HIV/AIDS cases in Canada. This number is up from 2002, when they represented 40 per cent; and in 1996, when they represented 30 per cent of new cases of HIV/AIDS in Canada.~~

* While we do test all units of blood and testing is sophisticated, there still exists a brief period after the onset of a viral infection during which early signs of a virus cannot be detected. This period of time is known as the "window period". However, the system is as safe as current testing and technology allows, combined with Canadian Blood Services' stringent screening processes (e.g., donor questionnaire, deferral policies).

We continually review our policies and procedures in the face of changing science and technology and as such we are conducting a risk assessment of this issue. Any change in donor criteria would have to be considered safe from a scientific perspective and be approved by our regulator, Health Canada.

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Q & As

Is Canadian Blood Services a part of the Red Cross?

No. Canadian Blood Services was created as a result of the contaminated blood incident of the 1980s and 1990s. This incident seriously undermined the confidence of Canadians in blood and blood products.

The decision to create a new national blood authority was consistent with the conclusions of Mr. Justice Krevier in his Final Report, Commission of Inquiry on the Blood System in Canada, calling for a single, integrated entity responsible and accountable for the safety and security of Canada's blood supply system.

Canadian Blood Services assumed full responsibility for the Canadian blood system on September 26, 1998.

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Is there a test to detect vCJD?

Many research groups are currently pursuing development of a blood test to detect variant Creutzfeldt Jacob Disease (vCJD); however, there are no tests currently available. While our current vCJD policy will defer many potential healthy donors, we prefer to take a precautionary approach in order to ensure that recipients receive the safest blood and blood products possible.

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Is blood available to absolutely any person living in Canada?

Yes. Canadian Blood Services has the mission of providing a safe, secure, cost-effective, affordable and accessible supply of quality blood, blood products and their alternatives to all Canadians who require them.

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LifeSiteNews.com

Monday January 29, 2007

Canadian Court OK's Ban on Active Homosexuals from Sperm Donation due to AIDS

Says evidence establishes higher prevalence of HIV and hepatitis among homosexuals

By Gudrun Schultz

* TORONT, Ontario, January 29, 2007 (LifeSiteNews.com) - Restricting homosexual men from donating to sperm banks does not violate the Charter of Rights, the Ontario Court of Appeals ruled January 12, in a decision that received no mainstream media coverage at the time. *

* "The medical evidence in the record establishes that there is a higher prevalence of HIV and hepatitis among men in the MSM [men who have sex with men] category," the three-judge panel stated in the decision, saying the ban on homosexual sperm donation by the federal Processing of Semen for Assisted Contraception Regulations was "rational and health based," CanWest News Service reported. Men who have had sex with another man since 1977 are prohibited from donating semen due to the significant risk increase of sexually transmitted disease among men practicing homosexual sex. *

The case was filed on behalf of a lesbian Toronto woman, known as Susan Doe, who wanted to use sperm donated by a homosexual friend, D., to conceive a child. Ms. Doe's lesbian partner, known as J., already has a daughter conceived with sperm donated by the couple's homosexual friend. Ms. Doe was not able to become pregnant after attempting to inseminate herself with D.'s sperm, and wanted to receive help with the procedure from a clinic.

The 40-year-old woman argued that the ban on homosexual sperm donation violates the equality rights of gays and lesbians, as well as her own right to life, liberty and security of her person by denying her the freedom to decide who will be the father of her child. While men who are donating to their spouse or sexual partner are exempt from the restrictions, donation to a woman who is not in a sexual relationship with the man is prohibited, which Ms. Doe argued was discriminatory against lesbian women.

There is already an exemption in place that permits a homosexual man to donate sperm if their semen undergoes rigorous testing for infection with HIV and other diseases, including a six month quarantine of the semen followed by retesting. Ms. Doe's lawyers argued that the testing requirements were unnecessary since she knew the donor personally, if not sexually.

The homosexual activist organization Equality for Gays and Lesbians Everywhere intervened in the case, and now are considering whether to pursue an appeal to the Supreme Court of Canada.

See related LifeSiteNews coverage:

FDA Bans Gay Sperm Donors

<http://www.lifesite.net/ldn/2005/may/05050604.html>

Gay marriage and Homosexuality: Some Medical Comments

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Sexually active gay men no longer allowed to donate organs

Last Updated: Monday, January 7, 2008 | 10:08 PM ET

CBC News

A number of organ donation groups said Monday that they are unaware of new Health Canada regulations that mean sexually active gay men, injection drug users and other groups considered high risk will no longer be accepted as organ donors.

The new rules, which came into effect in December, are similar to the regulations for determining who can donate blood. Those rules exclude groups that are at high risk of transmitting infectious diseases such as HIV and hepatitis C and B.

Officials at several transplant programs in the country said because they were unaware of the new regulations, they would continue to consider all potential donor organs.

"We have not been informed, first of all, that Health Canada is considering this," said Dr. Gary Levy, who heads Canada's largest organ transplant program at Toronto's University Health Network. "Obviously if Health Canada wishes to discuss that, we would hope they would engage all stakeholders."

Dr. Peter Nickerson, director of Transplant Manitoba, which procures organs in that province, said transplant programs must now by law interview family members of the donor as part of the screening process.

"We'll be asking about things like travel, history of infectious disease, whether they've [donors] been in jail — that puts you at increased risk," Nickerson said. "Have they been an IV drug abuser in the past? Have they had tattoos? There's a whole list of questions we go through."

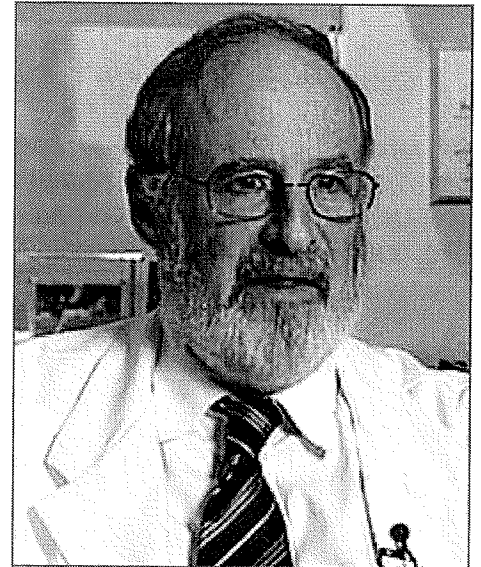
They are also asked about the donor's sexual orientation. The donor will be excluded if the donor is a man who had sex with another man in the previous five years.

Health Canada had contracted the Canadian Standards Association in 2003 to come up with standardized guidelines to ensure the safety of the organ donation system.

Transplant programs have been screening potential donors, but in some cases use organs from people in high-risk groups if they've tested negative for diseases. The new legislation means that practice must stop.

A spokeswoman for Health Canada confirmed the new regulations in an e-mail, but the department didn't make anyone available to explain the changes.

Focus should be on behaviour: gay activist



Dr. Gary Levy, who heads Canada's largest organ transplant program at Toronto's University Health Network, said he was unaware of the new policy on organ donations.
(CBC)

Levy said organ donors shouldn't be held to the same high standards as blood donors because the stakes for the organ recipient are higher.

"Organ donation and the opportunity to save a life at a specific time — we have no substitute therapies," Levy said.

Levy estimates that out of 100 organ donors at his Toronto hospital every year, about seven will be rejected because of the new regulations. About 4,000 Canadians are waiting for an organ transplant.

Some in the gay community complained that the new policy is wrong-headed and that Health Canada should focus on risky sexual behaviours, not sexual orientation.

"I think it's more of an issue of anal sex, anal intercourse, than it is to do with whether someone is gay or straight," said Dean Robinson, a gay activist.