

WSJ(5/11) What To Say When Your Teenager Says She's Gay

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FULL TEXT

(From THE WALL STREET JOURNAL)

By Melinda Beck

What role, if any, should parents and schools play in a child's emerging sexual orientation?

Sparks have been flying around that question this spring.

Early last month, a small group called the American College of Pediatricians (ACP) sent a letter to the nearly 15,000 school superintendents in the U.S., stating that most adolescents who experience same-sex attraction at age 12 no longer do by age 25, and warning that prematurely labeling them could lead some "into harmful homosexual behaviors they otherwise would not pursue." The letter also stated that homosexual attraction and/or gender confusion "can respond well to therapy."

The far larger American Academy of Pediatrics (AAP) posted a statement saying it is in no way affiliated with the ACP and referred schools and parents to its own publications that urge acceptance of gay, lesbian and bisexual youth. (The ACP was founded in 2002 by pediatricians protesting the AAP's support of homosexual parenting.) The National School Boards Association also backed the AAP's position and warned schools not to be confused by the similarly named groups. And several prominent researchers, including geneticist Francis S. Collins, director of the National Institutes of Health, accused the ACP of distorting its research to make its case against homosexuality.

Other incidents this spring: One Mississippi high school canceled its prom rather than allow one senior to bring a same-sex date; another refused to let a girl be photographed for the yearbook wearing a tuxedo rather than the customary formal drape, and a group called PFOX (Parents and Friends of Ex-Gays) distributed fliers advocating sexual-reorientation therapy in some Montgomery County, Md., schools.

Behind all the incidents is the long-running dispute over when and how sexual orientation develops and whether outside influences can affect it.

While the development of same-sex attraction isn't completely understood, most medical and mental-health professionals have long concluded that being gay is not an illness and that people cannot choose their true sexual orientation. It seems to develop slowly in early childhood; studies show that on average, young people, gay and straight, first become aware of sexual attraction about age 10.

Experimentation is fairly common in adolescents — and sexual activity isn't the same as sexual orientation.

According to the AAP, one survey of 13- to 19-year-olds found that 1 in 10 boys and 1 in 17 girls reported having at least one same-sex sexual experience; but most studies estimate that only 2% to 7% of U.S. teens consider themselves lesbian, gay or bisexual.

"By the time children are 11, 12 and 13, they have a very good sense that their sexual orientation may be different from the majority of their friends," says Ellen Perrin, a developmental-behavioral pediatrician at the Floating Hospital for Children at Tufts Medical Center in Boston. "There is no evidence that people could become gay because of external influences," she adds.

The ACP maintains that homosexual attraction is changeable — and dangerous. ACP President Thomas Benton, a Gainesville, Fla., pediatrician, likens homosexuality to drunken driving: "If I was aware that my teenage son was

thinking about getting drunk and operating a car, I'd do everything in my power to prevent him from doing that," he says. Dr. Benton also says that schools "should provide an environment that is safe for all children, but they shouldn't promote an agenda. They shouldn't say, 'Let's have a coming-out party.' "

Dr. Benton declined to say how many members it has; others have estimated about 200. The AAP has 60,000 members.

Dean Byrd, an ACP adviser and president of National Association for Research & Therapy of Homosexuality (NARTH), which advocates reorientation therapy, added in an email: "The adolescent brain itself is under construction and very much influenced by experience and environment. There is tremendous danger in labeling – premature labeling of adolescents, primarily because of this fluidity."

Many researchers who have studied gay and lesbian youth agree that they face a higher risk of mental and physical problems, but they contend that those problems stem mostly from social stigma and feelings of rejection.

Researchers at the Family Acceptance Project at San Francisco State University have conducted interviews with gay and lesbian youths and their families, studying the impact of rejection or acceptance across several ethnic groups.

In a survey of 224 these young adults aged 21 to 25, published in the journal *Pediatrics* last year, those who reported high levels of family rejection during adolescence were more than eight times as likely to have attempted suicide; nearly six times as likely to report high levels of depression; more than three times as likely to use illegal drugs and more than three times as likely to be at high risk for sexually transmitted diseases.

"Families and caregivers have a dramatic and compelling impact on their LGBT children's health, mental health and well-being," says Caitlin Ryan, director of the Family Acceptance Project. She also notes that because gender orientation starts so early, "we tell parents and families that they need to provide a supportive environment for their children before they know who they'll become." If family members make jokes and derogatory comments about people they meet or images on TV, children will internalize those messages and they can have a lasting impact on how they see themselves.

And even in families that don't accept that their children are gay, it's still important to be supportive, Dr. Ryan says. "Teens need to know that they can go to their parents with a problem and their parents won't hate them or hit them and they could talk it through." The group has studied the impact of more than 100 behaviors on LGBT young people. Among those that make them feel most accepted: asking about their interests, welcoming gay friends in the home and finding positive role models.

In some cases, children who grow up believing that homosexuality isn't acceptable may try to deny and ignore their own feelings. "We call it going underground," says Dr. Perrin. "They live that way until they are 30 or 40 and say, 'I just can't do it anymore.' Or maybe some of them their whole life live in a pretend world of not feeling quite right but it's the best compromise they can make to feel accepted."

Groups like NARTH cite research that sexual reorientation therapy can be effective, but more mainstream organizations say it can do lasting damage.

"If kids get the message that who they are is unacceptable, then they will carry that scar for the rest of their lives," says Gary Remafedi, a professor of pediatrics at University of Minnesota.

"Telling parents that this is an illness, that they should force their children to seek some cure that doesn't exist is quackery and it's malpractice."

Dr. Perrin, who works with some young children with atypical gender interests and behaviors, says she advises parents to support their kids' interests, whatever they are, and try to expand them with gender-neutral activities. "I tell them to not forbid boys from playing with Barbie dolls, and don't excessively encourage playing with Barbie dolls," she says. "I say, we have no idea how your child is going to develop in terms of gender identify or sexual orientation, but in either case, your job is accept whatever your child is and support that development."

If adolescents are confused about their sexual identify, should parents try to help, and how?

Margaret J. Blythe, a professor of pediatrics at Indiana University School of Medicine and chairwoman of the AAP's committee on adolescents, says she sees many kids who are uncertain about their sexual orientation who have

never played out any of their sexual attraction. "They're afraid of being rebuffed, or they know it's a huge risk," she says. "I think these teens are saying, 'Just let me figure it out.' They will. It becomes very apparent to them." "I often hear them say, 'I knew my son was gay. I just didn't know how to bring it up,'" says Dr. Blythe. She says she routinely tells adolescent patients that "teens in your age group have questions about whether they are attracted to the same sex, or the opposite sex, and having an attraction doesn't mean you are labeled. Some will automatically say, 'No way. I'm only attracted to girls.' They may come back and talk about it later. You've established a foundation that you're open to talking about it."

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