

STATE OF LOUISIANA
SUPREME COURT OF LOUISIANA

NO. 93-KA-2159

STATE OF LOUISIANA

VERSUS

JOHN L. BAXLEY

APPEAL FROM THE CRIMINAL DISTRICT COURT FOR
THE PARISH OF ORLEANS, NO. 356-945, SECTION "E",
THE HONORABLE CALVIN JOHNSON, JUDGE, PRESIDING

MOTION FOR LEAVE OF COURT TO ALLOW
THE LOUISIANA CHAPTER OF THE
NATIONAL ASSOCIATION OF SOCIAL WORKERS
TO FILE AMICUS CURIAE BRIEF IN OPPOSITION TO
THE STATE'S APPEAL

NATIONAL ASSOCIATION OF SOCIAL WORKERS
LOUISIANA CHAPTER
LSU School of Social Work
311 Huey Long Field House
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MAY IT PLEASE THE COURT,

The Louisiana Chapter of the National Association of Social Workers requests permission to appear as amicus curiae in support of John Baxley and the finding of the trial court in Baxley's case that the Louisiana Statute prohibiting crime against nature, R.S. 14:89, is unconstitutional under the Louisiana Constitution.

The National Association of Social Workers is a professional membership organization of more than 145,000 social workers with chapters in every state including Louisiana. NASW was created in 1955. Its goals are to promote the quality and effectiveness of social work practice and to engage in social action on behalf of human well-being.

The functions of NASW include: professional development of members through continuing education programs, professional journals and publications, and research and demonstration projects; creation and maintenance of professional values of social work practice through the NASW Code of Ethics; and advancement of sound social policies and programs through professional and technical analysis of legislation and public policy.

Membership in NASW is open to professionals with degrees from graduate or undergraduate programs of social work education.

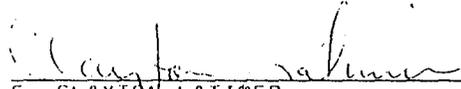
In Louisiana, there are 2,433 members participating in NASW throughout the state in nine regions: New Orleans, Houma/Thibodaux, Florida Parishes, Baton Rouge, Alexandria, Lafayette, Lake Charles, Shreveport and Monroe.

The NASW Code of Ethics provides that "The social worker should not practice, condone, facilitate or collaborate with any form of discrimination on the basis of race, color, sex, sexual orientation, age, religion, national origin, marital status, political belief, mental or physical handicap, or any other preference or personal characteristic, condition or status." NASW views discrimination and prejudice directed against any minority as inimical to the mental health not only of the affected minority, but of the society as a whole. NASW

affirms the right of all persons to define and express their own sexuality.

Because the enforcement of Louisiana Revised Statute 14:89 operates to the detriment of the mental health of many of the citizens of the State of Louisiana, particularly gay men, lesbians, and heterosexual women, and infringes on their natural expression of sexuality, and thereby threatens and inhibits the development and maintenance of healthy self concepts and self esteem, the Louisiana Chapter of the National Association of Social Workers respectfully requests that it be permitted to express its views on the issues presented by the appeal by the State of Louisiana in the John Baxley case, to wit the constitutionality of the Louisiana Statute on "crime against nature".

Respectfully submitted:



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STATE OF LOUISIANA
SUPREME COURT OF LOUISIANA

NO. 93-KA-2159

STATE OF LOUISIANA

VERSUS

JOHN L. BAXLEY

APPEAL FROM THE CRIMINAL DISTRICT COURT FOR
THE PARISH OF ORLEANS, NO. 356-945, SECTION "E",
THE HONORABLE CALVIN JOHNSON, JUDGE, PRESIDING

ORIGINAL BRIEF OF AMICUS CURIAE
LOUISIANA CHAPTER
NATIONAL ASSOCIATION OF SOCIAL WORKERS

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A R G U M E N T

In 1973, the American Psychiatric Association removed homosexuality from the list of mental disorders in its Diagnostic and Statistical Manual of Mental Disorders (DSM), the resource used extensively by mental health practitioners for classification of mental illnesses. In 1977, the National Association of Social Workers, in its Public Social Policy Statement on Gay Issues, affirmed "the right of all persons to define and express their own sexuality" and committed its organization to "combat archaic laws ... and other forms of discrimination which serve to impose something less than equal status upon the homosexually oriented members of the human family." (NASW Public Social Policy Statement on Gay Issues adopted in 1977 attached hereto as Exhibit A and NASW Policy Statement on Lesbian and Gay Issues adopted in 1987 attached hereto as Exhibit B.)

In more recent years, a more threatening disorder, though not yet recognized in the DSM, is homophobia, the irrational fear and/or hatred of and/or hostility for lesbian and gay people. According to Caitlin Conor Ryan, writing in an NASW publication entitled Lesbian and Gay Issues: A Resource Manual for Social Workers, "Homophobia ... remains in itself a major social disease rampant in our society with serious emotional and physical ramifications for those who succumb to it." In its 1987 Policy Statement, NASW recognized that "Homophobia and its resultant discrimination give rise to 'internalized oppression,' which creates problems regarding self-esteem and self image for lesbians and gay ment...."

While not yet explicitly recognizing homophobia itself as a mental disorder, the Diagnostic and Statistical Manual of Mental Disorders, Third Edition, (DSM-III), published in 1980, does acknowledge the serious negative impact of a homophobic society on the development and preservation of the mental and emotional health of homosexuals in its description of the mental disorder known as "Ego-dystonic Homosexuality".

According to the DSM-III, the features of this disorder are "a desire to acquire or increase heterosexual arousal, so that heterosexual relationships can be initiated or maintained, and a sustained pattern of overt homosexual arousal that the individual explicitly states has been unwanted and a persistent source of distress." (DSM-III, p. 281) The DSM-III, emphasizing further that "homosexuality itself is not considered a mental disorder", points out that "the factors that predispose to Ego-dystonic Homosexuality are those negative societal attitudes toward homosexuality that have been internalized" (p. 282) and explains that the process of overcoming this disorder by self-acceptance "is apparently facilitated by the presence of a supportive homosexual subculture." (P. 281) Excerpted pages 281-282 of the Diagnostic and Statistical Manual of Mental Disorders (Third Edition) are attached hereto as Exhibit C. The most recent revision of the DSM-III, published in 1987, (DSM-III-R) does not indicate that homosexuality, even with ego-dystonic characteristics, is a mental disorder, but makes a brief reference on page 296 that "persistent and marked distress about one's sexual orientation" may contribute to some clinical disturbance when presented in combination with some other problem.

Clearly, this problem is exacerbated by, if not the direct result of, a homophobic society. Furthermore, statutes such as the one before this Court, Louisiana Revised Statute 14:89, create and support the perfect legal and social environment for homophobia, and all of its consequences, to thrive.

The defendant's trial expert in clinical psychology, sex therapy and marital counseling, David Schnarch, Ph.D., made this point in his testimony when he said that the existence of this law had the effect on homosexuals "to lower their self-esteem and give them a feeling that they are somehow second-class citizens." (Tr. p. 16)

This expert additionally described the restrictive impact R.S. 14:89 has on some heterosexual women: "The absence of manual, genital stimulation or oral genital stimulation prior

to intercourse is one of the most common reasons why women both fail to achieve both satisfaction and also have pain, repeated sexual contact without prior preparation and proper arousal can actually create sexual dysfunction in itself. It would also be important to note that there are many, many women who never achieve orgasm during intercourse. There is absolutely nothing wrong with them. They have no disorder. It is just the nature of females, and the only way that many women will be able to reach orgasm will either be with either direct, manual stimulation to the clitoris or oral stimulation to the clitoris, and that is a fairly standard prescription that sex therapists and marital thereapists give to people who are interested in improving their sexual relationships." (Tr. pp. 9-10)

Perhaps the most dramatic health consequence of a homophobic society is the perpetration of violence against lesbian and gay people. In her article entitled "Stresses on Lesbian and Gay Adolescents in Schools", published in Social Work In Education, Spring 1987, Joyce Hunter, M.S.W. said: "Disapproval of homosexuality has so permeated society that violence against lesbian and gay people has become a norm. Violence against minorities is endemic in our society, and in recent years the violence toward lesbians and gays has increased dramatically, in part due to the greater visibility lesbians and gays have achieved." (p. 183) Hunter cites a study by the National Gay Task Force conducted in 1984 where one-fifth of the females and nearly half of the males, of 2,074 respondents, "say they were harassed, threatened with violence, or physically assaulted in high school or junior high because they were perceived to be lesbian or gay." (p. 184)

The local statistics are more startling. As reported in Exposing Hatred: A Report on the Victimization of Lesbian and Gay People in New Orleans, Louisiana, cited by defendant's expert witness, Richard Magill, and entered into evidence at the trial (Tr. p. 126), 20.8% of the respondents to the study conducted by the Mayor's Advisory Committee on Lesbian and Gay Issues reported that they had been the victim of at least one incident

of physical violence, while 26% reported that they had been the victim of threats of violence and 63.8% reported that they had been the victim of verbal harassment (Exposing Hatred, p. 2). Where the private and intimate act of sexual expression between consenting adult homosexuals is defined as a felony in the law, as it is in Louisiana Revised Statute 14:89, there is an implicit social approval for acts of violence against those individuals perceived to be unindicted felons. In this regard, the continued existence and enforcement of such a statute significantly contribute to the threat of violence and actual violence against gay and lesbian people. One of the recommendations adopted by the Mayor's Advisory Committee on Lesbian and Gay Issues as a result of the findings of the report on violence against gay and lesbian people was "That the Mayor include in his legislative package the repeal of R.S. 14:89, crime against nature statute, and that all sexual acts, in private, between consenting adults be decriminalized." (Exposing Hatred, p. 63)

A homophobic society presents a special threat to the health of gay and lesbian adolescents exemplified by their dramatically disproportionate rate of teen suicide. According to Sue Kaplan and Sue Saperstein, writing in the NASW publication Lesbian and Gay Issues: A Resource Manual for Social Workers, "It is extremely difficult for gay/lesbian adolescents to gain acceptance or support from family or peers for their feelings and emerging identities.... Operating with no support systems, lesbian or gay adolescents usually are isolated, whether they disclose same-sex feelings or keep them hidden. This isolation contributes to internalized homophobia that may manifest itself as repressed feelings, withdrawal, depression, and overcompensation. These emotions and actions often result in drug or alcohol abuse, poor school performance, running away, and other acting-out behavior. Oppression by those closest to the adolescent also may precipitate any of the foregoing problems for the young person and sometimes even culminates in suicidal attempts or death." (p. 17-18)

According to the four-volume Report of the Secretary's Task Force on Youth Suicide, issued by the U.S. Department of Health and Human Services in January, 1989, "gay youth are 2 to 3 times more likely to attempt suicide than other young people." According to Paul Gibson, L.C.S.W., in his article entitled "Gay and Lesbian Youth Suicide" which was included in the Report, "The root of the problem of gay youth suicide is a society that discriminates against and stigmatizes homosexuals while failing to recognize that a substantial number of its youth has a gay or lesbian orientation." (p. 3-110) Mr. Gibson's recommendation that "Laws prohibiting homosexual relationships between consenting adults should be repealed ..." (p. 3-133) was not accepted in the official recommendations of the Report; however, Recommendation 6d-2 of the Report did include the suggestion to "end discrimination against youths on the basis of such characteristics as disability, sexual orientation, and financial status." Clearly, a law such as R.S. 14:89 which creates a climate of shame and hostility for children growing up with a homosexual orientation sets the stage for mental and emotional problems in adolescence or young adulthood.

In addition to NASW's commitment to furthering the cause of social justice by promoting and defending the rights of persons suffering injustices and oppression because of their homosexual orientation, NASW also supports the right of all human beings to self-determination. Section II of the NASW Code of Ethics in connection with The Social Worker's Ethical Responsibilities to Clients, relative to Rights and Perogatives of Clients, states: "The social worker should make every effort to foster maximum self-determination on the part of clients." As this relates to lesbian and gay people, "NASW affirms that lesbian and gay individuals are entitled to the rights of self-determination, self-definition, and self-expression, as long as the rights of others are not infringed." (NASW Policy Statement on Lesbian and Gay Issues, 1987) The statute before this Court obviously impedes the free private sexual expression

of all consenting adults, but most particularly it restricts lesbians, gay men and heterosexual women in the achievement of their individual sexual potential.

In all of these respects, where Louisiana Revised Statute 14:89 condones the perpetuation of a homophobic society, threatens the health and safety of gay and lesbian adults and adolescents, infringes upon the development of strong and healthy self concepts, and restricts the exercise of self-determination, the Louisiana Chapter of the National Association of Social Workers urges this Honorable Court to affirm the finding of the Orleans Parish Criminal District Court and declare this statute unconstitutional.

RESPECTFULLY SUBMITTED:


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I certify that a copy of the foregoing pleading has been served upon the Office of the District Attorney for the Parish of Orleans, the Office of the Attorney General for the State of Louisiana, and the attorney for the appellee/defendant by depositing same in the U.S. Mail, postage prepaid, or delivering by hand on the 6th day of January, 1994.


F. CLAYTON LATIMER

Appendix B

**NASW Public
Social Policy
Statement on
Gay Issues**

The National Association of Social Workers realizes that homosexuality has existed under varying circumstances, throughout recorded history and in most cultures. A substantial number of women and men in American society are identified with a lifestyle that includes homosexual behavior. Homosexuality may properly be considered a preference, orientation, or propensity for certain kinds of lifestyles. Millions of men and women, whose sexual orientation includes homosexuality, are subject to severe social, psychological, economic, and legal discrimination because of their sexual orientation.

NASW views discrimination and prejudice directed against any minority as inimical to the mental health not only of the affected minority, but of the society as a whole. The Association deplors and will work to combat archaic laws, discriminatory employment practices, and other forms of discrimination which serve to impose something less than equal status upon the homosexually-oriented members of the human family. It is the objective of the social work profession not only to bring health and welfare services closer to people, but also to help alter the unequal policies and practices of health and welfare institutions.

NASW affirms the right of all persons to define and express their own sexuality. In choosing their own lifestyle, all persons are to be encouraged to develop their individual potential to the fullest extent possible as long as they do not impinge upon the rights of others.

Adopted by the NASW Delegate Assembly, Portland, Oreg., 1977.

BACKGROUND

The oppression of gay men and lesbians has taken form in religion, culture, law, and social annotation. American society, strongly influenced by interpretations of Judeo-Christian moral codes, traditionally has condemned homosexuality. This theological interpretation has led to the exclusion of lesbians and gay men from participation in religious services. Other results include legal and institutional discrimination, as well as violence against lesbians and gay men.

Recently, religious groups have begun to reexamine their historical positions of discrimination and disapproval. Although many religious denominations have issued working documents calling for a reexamination of theological concepts in reference to human sexuality and lesbians and gay men have organized within their respective churches and synagogues to foster positive change, to date, most lesbians and gay men still are denied positive affirmation and unqualified acceptance within their religious institutions. Moral codes also have shaped the legal system, which criminalized many acts of sexual expression. In most states, sodomy laws make sexual expression a crime for gay men. Legal rights are denied lesbians and gay men in other ways as well:

- Same-sex couples do not have the right to marry.
- Lesbians and gay men have been denied custody of their children, as well as the right to provide foster and adoptive care.
- Their partners do not have the same rights of inheritance and decision making as do biological next of kin.
- Employment rights, housing, access to resources and services, and the rights to immigration and naturalization routinely are denied to lesbians and gay men.
- Lesbians and gay men are excluded from military service or are dishonorably dismissed if their sexual orientation is known.

In addition, violence against lesbians and gay men has been documented by public authorities and advocacy

groups. Antigay violence and discrimination against lesbians and gay men have increased significantly as a result of the acquired immune deficiency syndrome (AIDS) epidemic.

The Kinsey studies (Kinsey, Pomeroy, & Martin, 1948) documented clearly the broad variation of human sexual behavior and the prevalence of homosexuality in the American population. They estimated that lesbians and gay men constitute approximately 10 percent of the U.S. population. At least 20 million lesbians and gay men endure the lack of access to social, physical, and emotional resources; discrimination; and stigmatization as criminal, deviant, and pathological.

STATEMENT OF ISSUES

As helping professionals, social workers are guided by the *Code of Ethics*, which was adopted by the Delegate Assembly of the National Association of Social Workers (NASW, 1980). Relative to the social worker's ethical responsibility to clients, the *Code of Ethics* states:

The social worker should not practice, condone, facilitate or collaborate with any form of discrimination on the basis of race, color, sex, sexual orientation, age, religion, national origin, marital status, political belief, mental or physical handicap, or any other preference or personal characteristic, condition or status.

Relative to the social worker's ethical responsibility to society, the *Code of Ethics* further states:

The social worker should act to prevent and eliminate discrimination against any person or group on the basis of race, color, sex, sexual orientation, age, religion, national origin, marital status, political belief, mental or physical handicap, or any preference or personal characteristic, condition or status.

The social worker should act to ensure that all persons have access to the resources, services and opportunities which they require.

The social worker should act to expand choice and opportunity for all persons, with special regard for disadvantaged or oppressed groups and persons.

Because the social work profession has a responsibility for serving disadvantaged or oppressed groups and persons, social workers must ascertain the needs and promote the well-being of lesbians and gay men. A percentage of social workers and their clients are members of this minority group.

Despite the values and ethics prescribed by the social work profession, individual social workers are not immune to cultural attitudes and values that are antithetical to those of the social work profession. Homophobia, the irrational fear and hatred of those who are sexually oriented toward persons of the same sex, has given and continues to give rise to a host of discriminatory practices, both institutionally and individually in American society. Lesbian and gay individuals, therefore, frequently experience the same kind of supremacist prejudice that figures in racism, sexism, ageism, classism, and anti-Semitism. Prejudice toward and discomfort with lesbians and gay men or their behavior render social work practice with such clients ineffective and frequently damaging. Social workers must examine their attitudes and feelings to ensure that they are not having a negative impact on their clients.

Lesbians and gay male social workers are employed in all areas of social work practice. Many still experience prejudice and discrimination in their professional lives or would if they openly acknowledged their sexual orientation. The necessity for lesbians and gay men to remain totally or even partially "closeted" in their professional lives is irrational and potentially damaging to the development of their highest potential. Consequently, social workers must create an atmosphere that is open to and accepting of their lesbian and gay male colleagues.

At various times, mental health professionals, including social workers, have described such sexual behaviors as masturbation, sexual relations between single persons, pregnancy in unmarried women, and birth control as pathological. Yet it behooves professionals who hold such ideas to modify their approaches as new information and views of behavior become prevalent. Toward this end, both the American Psychiatric Association and the American Psychological Association progressively

have reexamined homosexuality in the past two decades. They no longer define it as a mental disorder. The social work profession has done the same and continues that process through the updating of this policy statement.

POLICY STATEMENT

The National Association of Social Workers (NASW) recognizes that homosexuality has existed throughout history (as has heterosexuality) and that same-sex sexual orientation should be afforded the same respect as that of opposite-sex sexual orientation. NASW asserts that discrimination and prejudice directed against any minority group is damaging to the mental health not only of the affected minority but of the society as a whole. NASW is committed to work toward the building of a society in which all people will be accepted as equals without regard to their sexual orientation. NASW affirms that lesbian and gay individuals are entitled to the rights of self-determination, self-definition, and self-expression, as long as the rights of others are not infringed.

To this end, NASW shall support legislation, regulation, policies, judicial review, political action, demonstrations, and other appropriate means that will establish and protect the equal rights of all persons without regard to their sexual orientation. Such activities include, but by no means are limited to working for the adoption of policies and legislation to end all forms of discrimination against lesbians and gay men at the federal, state, and local levels in all institutions, including churches and synagogues, and in both the public and private sectors. NASW will support the repeal of all laws against any form of consensual adult sexual activity as well. NASW will work toward the elimination of prejudice, both inside and outside the profession.

Homophobia and its resultant discrimination give rise to "internalized oppression," which creates problems regarding self-esteem and self-image for lesbians and gay men. Social workers need to be aware of internalized oppression when working with lesbians and gay men.

NASW should develop and sponsor educational programs that are designed to train social workers in the area of human sexuality, including homosexuality and the needs of the lesbian and gay communities. In cooperation with the Council on Social Work Education (CSWE), NASW should encourage instructors of social work education programs to include lesbian and gay issues in their curricula and educational institutions to

develop nondiscrimination policies regarding lesbian and gay male students and staff. In conjunction with CSWE and other institutions, NASW should undertake research into all areas related to homosexuality and practice and policy development.

REFERENCES

- Kinsey, A. P., Pomeroy, W. B., & Martin, C. P. (1948). *Sexual behavior in the human male*. Philadelphia: W. B. Saunders Co.
- National Association of Social Workers. (1980). *Code of ethics*. Silver Spring, MD: Author.

Policy statement approved by the NASW Delegate Assembly, November 1987. This statement supersedes the policy statement on gay issues approved by the Delegate Assembly in 1977.

For further information, contact the National Association of Social Workers, 7981 Eastern Avenue, Silver Spring, MD 20910. Telephone: 301-565-0333 or 800-638-8799.

302.70 Atypical Psychosexual Dysfunction

This category is for Psychosexual Dysfunctions that cannot be classified as a specific Psychosexual Dysfunction. An example would be no erotic sensations or even complete anesthesia despite normal physiological components of sexual excitement and orgasm. Another example would be a female analogue of Premature Ejaculation.

OTHER PSYCHOSEXUAL DISORDERS

302.00 Ego-dystonic Homosexuality

The essential features are a desire to acquire or increase heterosexual arousal, so that heterosexual relationships can be initiated or maintained, and a sustained pattern of overt homosexual arousal that the individual explicitly states has been unwanted and a persistent source of distress.

This category is reserved for those homosexuals for whom changing sexual orientations is a persistent concern, and should be avoided in cases where the desire to change sexual orientations may be a brief, temporary manifestation of an individual's difficulty in adjusting to a new awareness of his or her homosexual impulses.

Individuals with this disorder may have either no or very weak heterosexual arousal. Typically there is a history of unsuccessful attempts at initiating or sustaining heterosexual relationships. In some cases no attempt has been made to initiate a heterosexual relationship because of the expectation of lack of sexual responsiveness. In other cases the individual has been able to have short-lived heterosexual relationships, but complains that the heterosexual impulses are too weak to sustain such relationships. When the disorder is present in an adult, usually there is a strong desire to be able to have children and family life.

Generally individuals with this disorder have had homosexual relationships, but often the physical satisfaction is accompanied by emotional upset because of strong negative feelings regarding homosexuality. In some cases the negative feelings are so strong that the homosexual arousal has been confined to fantasy.

Associated features. Loneliness is particularly common. In addition, guilt, shame, anxiety, and depression may be present.

Age at onset. The most common age at onset is during early adolescence when the individual becomes aware that he or she is homosexually aroused and has already internalized negative feelings about homosexuality.

Course. There is some evidence that in time many individuals with this disorder give up the yearning to become heterosexual and accept themselves as homosexuals. This process is apparently facilitated by the presence of a supportive homosexual subculture. It is not known how often the disorder, without treatment, is self-limited. However, there is a general consensus that spontaneous development of a satisfactory heterosexual adjustment in individuals who previously had a sustained pattern of exclusively homosexual arousal is rare.

The extent to which therapy is able to decrease homosexual arousal, increase heterosexual arousal, or help homosexuals become satisfied with their sexuality is disputed.

Impairment. There is generally no or only mild impairment in social functioning.

Complications. Dysthymic Disorder can be a complication.

Predisposing factors. Since homosexuality itself is not considered a mental disorder, the factors that predispose to homosexuality are not included in this section. The factors that predispose to Ego-dystonic Homosexuality are those negative societal attitudes toward homosexuality that have been internalized. In addition, features associated with heterosexuality, such as having children and socially sanctioned family life, may be viewed as desirable and incompatible with a homosexual arousal pattern.

Prevalence, sex ratio, and familial pattern. No information.

Differential diagnosis. Homosexuality that is ego-syntonic is not classified as a mental disorder. In addition, the attitude that "I guess life would be easier if I were heterosexual" does not warrant this diagnosis. This category is reserved for homosexuals for whom changing sexual orientations is a persistent concern. Similarly, distress resulting simply from a conflict between a homosexual and society should not be classified here.

Individuals with Inhibited Sexual Desire may sometimes attribute the lack of sexual arousal to "latent homosexuality." However, Ego-dystonic Homosexuality should be diagnosed only when homosexual arousal is overt, although it may be limited to fantasy.

Homosexuals who develop a Major Depression may then express self-hatred because of their sexual orientation. The diagnosis of Ego-dystonic Homosexuality should not be made if the ego-dystonic quality is judged to be only a transient symptom of a Depressive Disorder.

Diagnostic criteria for Ego-dystonic Homosexuality.

A. The individual complains that heterosexual arousal is persistently absent or weak and significantly interferes with initiating or maintaining wanted heterosexual relationships.

B. There is a sustained pattern of homosexual arousal that the individual explicitly states has been unwanted and a persistent source of distress.

302.89 Psychosexual Disorder Not Elsewhere Classified

This is a residual category for disorders whose chief manifestations are psychological disturbances related to sexuality not covered by any of the other



Advocate staff photo by John H. Williams

Attorney John Rawls asks the state Supreme Court to strike down Louisiana's sodomy law.

Gay attorney attacks sodomy law at SU

By **SCOTT DYER**
Capitol news bureau

A self-proclaimed gay attorney told the Louisiana Supreme Court that the state's Crimes Against Nature law discriminates against homosexuals and should be overturned.

In a case argued in Baton Rouge as part of the dedication of the new Southern University Law Center, attorney John Rawls said the "real purpose of the sodomy

law is to brand us gays and lesbians as inferior beings."

Rawls' client, John Baxley, was arrested in the New Orleans French Quarter for offering an undercover policeman \$20 for oral sex.

Rawls argued that Baxley's case is a civil rights case for the more than 100,000 gays and lesbians who live in Louisiana.

Rawls said it was appropriate for the case to be argued on the mostly black Southern University

campus, where an oppressed minority group overcame inequities with patience and perseverance.

Louisiana's Crimes Against Nature law makes it illegal for anyone to have oral or anal sex with someone of the same sex, the opposite sex or even a spouse, Rawls said.

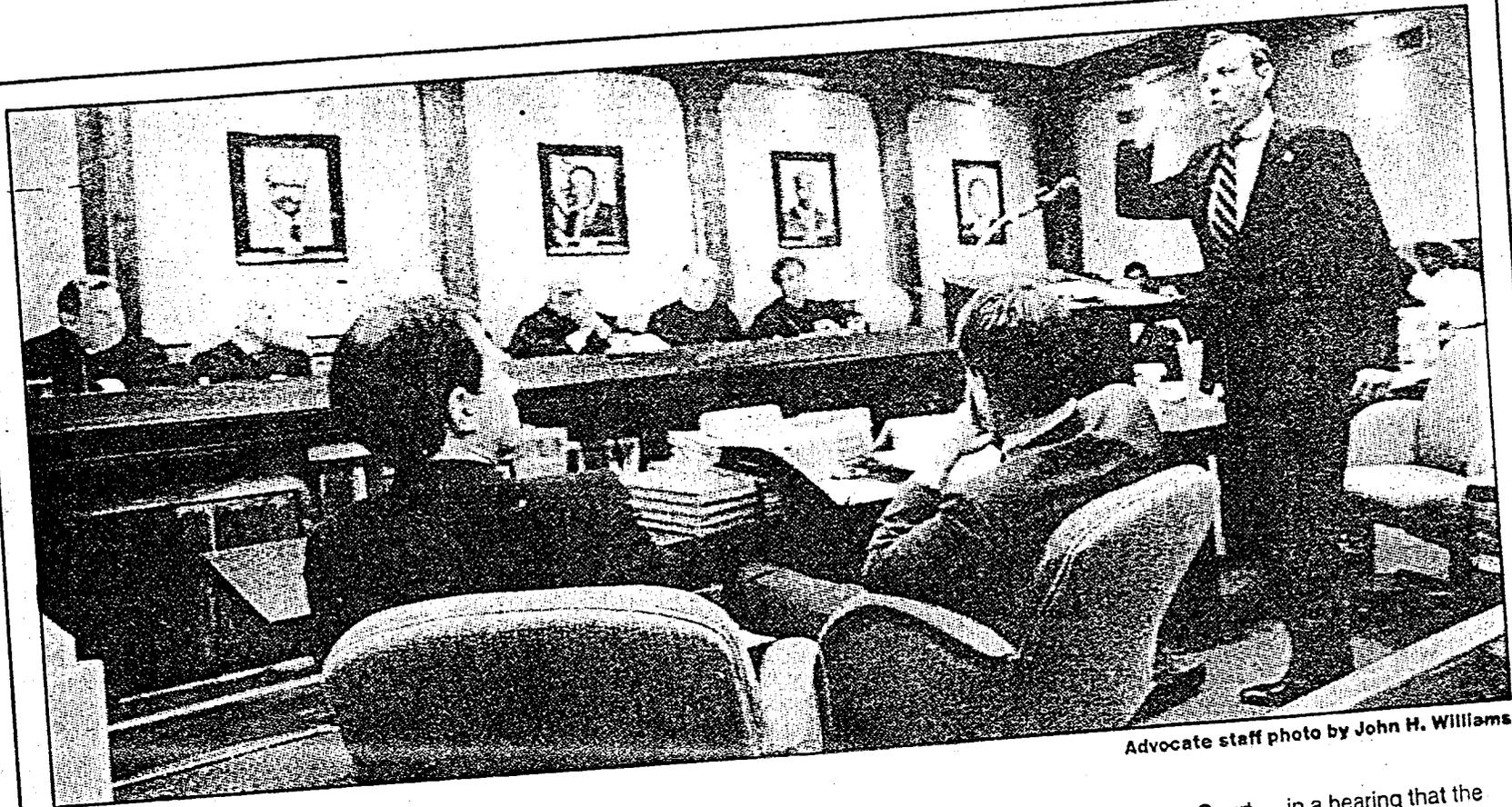
Rawls warned that, to enforce the law, state law enforcement officials would have to violate the privacy of every bedroom in the

state.

Mark Pethke, an attorney for the Orleans Parish District Attorney, pointed out that Baxley's case did not occur in a bedroom, but on a public street corner.

However, Chief Justice Pascal Calogero pointed out that Baxley wasn't attempting to have sex on a public street corner.

The Supreme Court did not render a decision in the case Friday, but took it under advisement.



Advocate staff photo by John H. Williams

High court in BR

The Southern University Law Center's new moot courtroom became a real courtroom Friday as the state Supreme Court — in a hearing that the justices allowed to be photographed — heard arguments on a sodomy case. The high court usually meets in New Orleans. Story, Page 2B.

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