

OP-ED

continued from page four

church youth groups, and the Boy Scouts (one could argue that these are cults by the word's definition), they find themselves drawn toward other cults, most often those existing on the fringes and margins. Lacking these, they may create their own, complete with their own systems and codes of behavior. Not all of them are entirely harmless, however, as we can clearly see in the case of the Trenchcoat Mafia.

Organizations like Outright Vermont around the state have worked hard to provide young people with safer alternatives, despite protests of the religious right and conservative school administrators. They recognize that coming out in a school environment is an incredibly challenging thing to do, and that it leaves kids vulnerable to risky behavior such as substance abuse, crime, date rape, unwanted pregnancy, and unsafe sexual practices. These groups understand that queer youth are often struggling with their own internalized homophobia, trying to overcome those demons at the same time as they are trying to come to terms with their homosexual, bisexual, or transgendered identities.

As a community, GLBT people need to remember our own

confusion and vulnerability early in our coming out processes. We need to recognize that we often made decisions that might have actually reinforced and amplified homophobia's effects on us. As adults, some of us continue to do just that without fully understanding the motivations behind our actions. Too often, we're content to blame our behavior (and the reactions it provokes) on the homophobic society at large, and we let our own actions and behavior pass without reflection.

Most of our actions and behaviors can withstand that kind of criticism, as we have seen again and again in debates with the religious right. Without such self-analysis, however, our constantly evolving community risks becoming just another trend or fad, something more like a cult and less like a culture. We risk making mistakes that could have been avoided, and miss opportunities for self-evaluation when they present themselves.

The tragedy at Columbine High School is one such opportunity. We need to be very present in the ongoing discussions of that event, even though some of the details may make us uncomfortable. We need to process our grief, register our outrage, and work toward solutions that make

schools safer for all individuals, no matter how they choose to define or differentiate themselves.

This may very well mean working with groups who have not traditionally been our allies on such matters. It may also mean working with groups, perhaps even our own, who have in some way contributed toward the creation of an environment in which kids like Klebold and Harris could lose their respect for the inherent worth and dignity of all life. We need to resist the urge to assign total responsibility elsewhere, because in doing so we risk taking a quick trip down the road toward apathy.

One of the main messages that came from Columbine High School is that we must not assume that these problems don't exist within our own schools or within our own communities. We're well aware that they do. With that in mind, let's resist the urge to judge one group or another based on what has just happened in Littleton. Instead, let us consider how both we and they might be judged by our responses and subsequent actions toward preventing such tragedies in the future. ▼

Letters continued

wife who was infected by an extra-marital relationship. (Morbidity and Mortality Weekly Report 1996; 45: 181-185). In light of the effective screening procedures already in place and because there is no scientific or medical basis for excluding gay donors, such a ban would be a discrimination.

Secondly, it would force directed donors, men who wish to father children with a woman they already know, to freeze their sperm, quarantine it for 6 months and be retested for HIV before their sperm is used for insemination. Given the fact that only 1 out of 6 men (16%) have sperm that survives the freezing process well enough to meet the World Health Organization's minimum standard of fertility, this second rule will effectively prevent 84% of gay men from the possibility of having children. The only way that some of these 84% who have minimal survival after freezing may use their sperm is by expensive and invasive high tech fertility methods. The price for these methods range up to \$12,000 per attempt with very low success rates. Health insurance rarely covers this and most will not have the money for such expensive and otherwise unnecessary procedures.

The FDA denies they are discriminating on the basis of sexual orientation. They do acknowledge that they exclude "men who have had sex with other men in the last five years" (MSM). "Now, that does not discriminate against gay men per se, but I can see how someone might interpret it that way," is a standard response.

On May 7, 1996 Tom Spira, MD, Assistant Chief for Medical Science for the CDC, said, "I would not, categorically, want to exclude them (gay men) since we have appropriate testing. If you do so, I believe, you gain a false sense of security." Charles Schable, Chief of the AIDS diagnostic Laboratory at the CDC, said, "If one is freezing the sperm and retesting the donor after six months the only reason to apply that criterion (MSM) to semen donors is homophobia." Both men stressed that they were speaking for themselves and not the CDC as the CDC has a policy advising against gay donors (MSM). Letters from the CDC admit they have no scientific evi-

dence to support their policy but are simply following the "advice of a consultant panel."

The FDA does not have to come up with new sperm banking regulations at all. A California Health Department Subcommittee has completed work on proposed regulations, not yet enacted, which follows scientific evidence, protects public health and does not discriminate. California has already enacted a Health and Safety code (Division 2 - Chapter 4.2 Section 1644.5), which specifically allows the use of fresh or frozen sperm for directed donation as long as the donor has been appropriately screened and insures both our health and our rights. Dr. Solomon ignored the "California Plan" in devising the FDA's regulations.

The FDA's regulations would override California laws and would be a program of mass sterilization by regulation. They will deprive lesbians of the choice of having children with gay men. Banning gay men from being donors perpetuates the myth that AIDS is a gay disease. To protest these proposed regulations and to support the "California Plan" please write to the Department of Health and Human Services which oversees both the FDA and the CDC.

Secretary Donna Shalala
US Dept. of Health and
Human Services
200 Independence Avenue,
SW
Washington, DC 20201
877-696-6775 (toll free)
hhsmail@os.dhhs.gov
Please send us a copy of your
letters at: leland@gaysperm
bank.com
Sincerely,
Rober Kim, Staff Attorney
American Civil Liberties
Union of Northern California
Jennifer Pittman, Policy &
Program Associate
Gay and Lesbian Medical
Association
Leland Traiman, Executive
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CORRECTIONS & CLARIFICATIONS

In the May story "Vermont's RBA," we mentioned that among possible future programs the RBA is considering is a queer youth apprenticeship program in partnership with Outright Vermont. We'd like to re-emphasize that no such partnership or program yet exists.

In "Diverse Responses to Diversity Report," also in the May issue, we were mistaken about Russell Plato's role on Middlebury College's HRC. Plato did sit on the committee, but resigned from it and specifically asked to not be credited on the final report.