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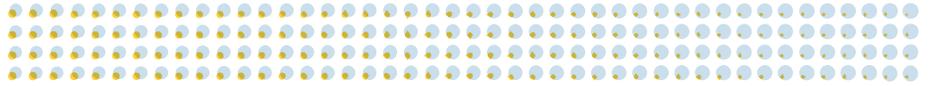
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UGANDA ANTI-HOMOSEXUALITY BILL OF 2023: No Basis in Evidence

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BRIEF / APRIL 2023

On March 21, 2023, the Ugandan Parliament passed legislation that further criminalizes the identities and behavior of lesbian, gay, bisexual, transgender, and intersex (LGBTI) people in Uganda. Among other things, the Anti-Homosexuality bill imposes a life sentence on consensual same-sex conduct among adults, which is already criminalized, and adds the death penalty for so-called “aggravated homosexuality” where same-sex acts involve children or people with disabilities, or where drugs or alcohol may impair judgment. Furthermore, it criminalized activities that promote homosexuality with up to 20 years in prison.

The bill explicitly aims “to protect the traditional family” through a number of measures. This brief describes scientific research that directly responds to the purported arguments in support of the Anti-Homosexuality bill. In bold are excerpts from the bill’s stated “principles” for protecting the “traditional family.” Below each principle is a discussion of relevant research and data.

The Anti-Homosexuality bill aims to protect the traditional family by

“strengthening the nation’s capacity to deal with emerging internal and external threats to the traditional, heterosexual family”

Research from a number of different countries indicates that same-sex relationships have no negative impact on the formation of heterosexual families. Substantial literature has evaluated the effects of changes in legal recognition of same-sex couples on heterosexual marriage in the U.S. A large study from 2021 examining 18 years of data found that same-sex marriage had no meaningful effect on individuals in different-sex households.¹

¹ Christopher S. Carpenter et al., “Effects of Access to Legal Same-Sex Marriage on Marriage and Health,” *Journal of Policy Analysis and Management* 40, no. 2 (2021): 376–411, <https://doi.org/10.1002/pam.22286>.

Another study from 2020, which looked exclusively at data from Massachusetts after the state legalized same-sex marriage in 2004, likewise found no negative effect on marriage rates among heterosexuals.² These studies confirm the findings of previous research on the effects of marriage equality that found no impact on either marriage or divorce rates of heterosexual couples.³ Indeed, an earlier study in Massachusetts found that five years after same-sex couples were permitted to marry in the state, the divorce rate actually dropped from 2.3 divorces per thousand residents in 2007 to 2.0 divorces per thousand residents in 2008, representing the lowest divorce rate in the entire U.S., and the lowest it has been since the 1940s.⁴

Studies from outside the U.S. have produced similar results. A 2015 study of 28 OECD member countries found that legal recognition of same-sex couples had no negative effects on family formation, as measured by rates of marriage, divorce, or extramarital birth.⁵ Earlier data from Denmark, Norway, Sweden, Iceland, and the Netherlands also show that extending relationship recognition to same-sex couples had no obvious impact on the marriage rates or divorce rates of different-sex couples.⁶ In addition, data from Denmark, Norway, and the Netherlands showed that same-sex relationships did not affect the proportion of children born to unmarried heterosexual parents. In these countries, there has been no change to nonmarital birth rate trends as a result of extending relationship recognition to same-sex couples.⁷

“...protecting children and youth who are made vulnerable to sexual abuse through homosexuality and related acts”

More than 30 years of research has found that children raised by lesbian and gay parents are as well-adjusted psychologically, emotionally, and socially as children raised by heterosexual parents. Hundreds of articles about gay or lesbian parents and their children have been published in peer-reviewed journals and books. These studies have found no appreciable difference in the outcomes of children raised by gay or lesbian parents.⁸

A seminal study of 106 families in the U.S. found that the adopted children of gay or lesbian parents were developing in typical ways, just like the adopted children of heterosexual couples.⁹ Similarly, a longitudinal study

² Christopher S. Carpenter, “The Direct Effects of Legal Same-Sex Marriage in the United States: Evidence From Massachusetts,” *Demography* 57, no. 5 (October 2020): 1787–1808, <https://doi.org/10.1007/s13524-020-00908-1>.

³ Marcus Dillender, “The Death of Marriage? The Effects of New Forms of Legal Recognition on Marriage Rates in the United States,” *Demography* 51, no. 2 (April 2014): 563–85, <https://doi.org/10.1007/s13524-013-0277-2>; Alexis Dinno and Chelsea Whitney, “Same Sex Marriage and the Perceived Assault on Opposite Sex Marriage,” *PLoS One* 8, no. 6 (2013): e65730, <https://doi.org/10.1371/journal.pone.0065730>; Holning Lau, “Do Marriage Amendments Really Protect Marriage? An Analysis of Data from 2000 to 2009,” September 2011. <http://www.law.unc.edu/documents/faculty/marriageamendment/lauamendmentsprotectmarriage.pdf>.

⁴ Bruce Wilson, “Divorce Rate in Gay Marriage-MA Drops to Pre-WWII Level,” September 2009. http://www.huffingtonpost.com/bruce-wilson/divorce-rate-in-gay-marri_b_267259.html.

⁵ Mircea Trandafir, “Legal Recognition of Same-Sex Couples and Family Formation,” *Demography* 52, no. 1 (January 9, 2015): 113–51, <https://doi.org/10.1007/s13524-014-0361-2>.

⁶ M. V. Lee Badgett, *When Gay People Get Married: What Happens When Societies Legalize Same-Sex Marriage* (New York University Press, 2020), <https://doi.org/10.18574/nyu/9780814791141.001.0001>.

⁷ Ibid.

⁸ Charlotte J. Patterson, “Parental Sexual Orientation, Parental Gender Identity, and the Development of Children,” in *Advances in Child Development and Behavior*, vol. 63 (Elsevier, 2022), 71–102, <https://doi.org/10.1016/bs.acdb.2022.03.002>.

⁹ Rachel H. Farr, Stephen L. Forssell, and Charlotte J. Patterson, “Parenting and Child Development in Adoptive Families: Does Parental Sexual Orientation Matter?,” *Applied Developmental Science* 14, no. 3 (July 16, 2010): 164–78, <https://doi.org/10.1080/10888691.2010.500958>.

of lesbian mothers and their children found that the children were psychologically well-adjusted. According to their mothers' reports, the adolescent children rated significantly higher in measures of social competence and school/academic competence than adolescents raised by heterosexual parents.¹⁰ The children raised by lesbian mothers also rated lower in social problems, rule-breaking, and problem behavior than the adolescents raised by heterosexual parents.¹¹ This same longitudinal study additionally found that the adolescent children did not show differences in quality of life when compared to adolescents raised by heterosexual parents.¹² Further, no child raised by lesbian mothers had been physically or sexually abused by a caregiver.¹³

Many professional organizations agree that lesbian and gay people parent as well as heterosexual people. For example, the American Academy of Pediatrics has adopted a policy statement asserting that “[s]cientific evidence affirms that children have similar developmental and emotional needs and receive similar parenting whether they are raised by parents of the same or different genders.”¹⁴ Likewise, the American Sociological Association has stated that “[t]he clear and consistent social science consensus is that children raised by same-sex parents fare just as well as children raised by different-sex parents.”¹⁵

Beyond personal development, research shows that children and youth are not made vulnerable to sexual abuse by the existence of homosexuality. Research suggests that most pedophiles who prey upon young people identify as heterosexual, and their victims are more likely to be female. A 1978 study found that female children were victims of sexual assault almost twice as often as male children. More than three-quarters (78%) of offenders in this study were exclusively heterosexual in their identification and partnerships. None of the offenders in this study identified solely as homosexual.¹⁶ Several studies, including one conducted in 1994, found that the majority of children who had been sexually abused were abused by a man or woman who was, or had been, in a heterosexual relationship with a relative. This study found that a child's risk of being molested by his or her relative's heterosexual partner is over 100 times greater than by someone who may be identified as gay, lesbian, or bisexual.¹⁷ More recent analyses find that there is no evidence to suggest that individuals with same-sex attraction are more likely to abuse children than heterosexual persons.¹⁸

¹⁰ Nanette Gartrell and Henny Bos, “US National Longitudinal Lesbian Family Study: Psychological Adjustment of 17-Year-Old Adolescents,” *Pediatrics* 126, no. 1 (July 1, 2010): 28–36, <https://doi.org/10.1542/peds.2009-3153>.

¹¹ *Ibid.*

¹² Loes van Gelderen et al., “Quality of Life of Adolescents Raised From Birth by Lesbian Mothers: The US National Longitudinal Family Study,” *Journal of Developmental & Behavioral Pediatrics* 33, no. 1 (January 2012): 17–23, <https://doi.org/10.1097/DBP.0b013e31823b62af>.

¹³ Nanette K. Gartrell, Henny M. W. Bos, and Naomi G. Goldberg, “New Trends in Same-Sex Sexual Contact for American Adolescents?,” *Archives of Sexual Behavior* 41, no. 1 (February 2012): 5–7, <https://doi.org/10.1007/s10508-011-9883-5>.

¹⁴ Committee on Psychological Aspects of Child and Family Health et al., “Promoting the Well-Being of Children Whose Parents Are Gay or Lesbian,” *Pediatrics* 131, no. 4 (April 1, 2013): 827–30, <https://doi.org/10.1542/peds.2013-0376>.

¹⁵ American Sociological Association. (2015). Brief of Amicus Curiae American Sociological Association in *Obergefell v. Hodges*, Supreme Court of the United States. Available: https://www.asanet.org/sites/default/files/savvy/documents/ASA/pdfs/ASA_March_2015_Supreme_Court_Marriage_Equality_Amicus_Brief.pdf.

¹⁶ Groth, A. Nicholas and H. Jean Birnbaum. (1978). “Adult sexual orientation and attraction to underage persons.” *Archives of Sexual Behavior*. 7(3):175-181.

¹⁷ Carole Jenny, Thomas A. Roesler, and Kimberly L. Poyer, “Are Children at Risk for Sexual Abuse by Homosexuals?,” *Pediatrics* 94, no. 1 (July 1, 1994): 41–44, <https://doi.org/10.1542/peds.94.1.41..>

¹⁸ J. Barth et al., “The Current Prevalence of Child Sexual Abuse Worldwide: A Systematic Review and Meta-Analysis,” *International Journal of Public Health* 58, no. 3 (June 2013): 469–83, <https://doi.org/10.1007/s00038-012-0426-1>.

“This legislation further recognizes the fact that same sex attraction is not an innate and immutable characteristic.”

There is little consensus on the exact reasons why an individual has a heterosexual or homosexual orientation, whether genetic, hormonal, developmental, social, or cultural. However, despite a lack of consensus on what causes different sexual orientations, current scientific and professional consensus reflects the understanding that sexual orientation is “felt as something both innate (i.e., inherent and inborn) and immutable (i.e., irreversible and unchangeable) for most people.”¹⁹ Research shows that the core feelings that form the basis of adult sexual orientation begin in early childhood,²⁰ and most adults, homosexual and heterosexual, report feeling little choice in their sexual orientation.²¹

Moreover, studies over the past two decades provide strong evidence for the likelihood that some aspect of both male and female homosexuality is heritable. For example, studies of twins have found moderate to large heritabilities for sexual orientation in both men and women.²² And a 2019 study that analyzed genetic samples from nearly 478,000 individuals in the United States and the United Kingdom found that same-sex sexual behavior is influenced by a multitude of genetic factors.²³

In 1973, the American Psychiatric Association removed homosexuality from its list of mental disorders, the Diagnostic and Statistical Manual of Mental Disorders.²⁴ All major mainstream mental health organizations in the United States now recognize homosexuality as an identity and not a disorder. Similarly, in 1990 the World Health Organization declassified homosexuality as a disorder in the International Statistical Classification of Diseases and Related Health Problems (ICD), which serves as a global standard for determining health services and

¹⁹ Academy of Science of South Africa, “Diversity in Human Sexuality: Implications for Policy in Africa” (Pretoria, South Africa: Academy of Science of South Africa (ASSAF), May 2015), <https://www.agora-parl.org/sites/default/files/agora-documents/diversity-in-human-sexuality1.pdf>.

²⁰ Commonwealth v. Gill. Brief Amici Curiae American Psychological Association et al. (2011). <http://www.apa.org/about/offices/ogc/amicus/gill.pdf> (citing Savin-Williams, R.C. (1998). “...And Then I Became Gay: Young Men’s Stories.” New York: Routledge; Bell, Alan P., Martin S. Weinberg, and Sue Kiefer Hammersmith. (1981). “Sexual Preference: Its Development in Men and Women.” Minnetonka, MN: Olympic Marketing Corp.; Savin-Williams, R.C. and Lisa M. Diamond. (2000). “Sexual Identity Trajectories Among Sexual-Minority Youths: Gender Comparisons.” *Archives of Sexual Behavior*. 29:607-627).

²¹ Commonwealth v. Gill. (2011). Brief Amici Curiae American Psychological Association et al. <http://www.apa.org/about/offices/ogc/amicus/gill.pdf> (citing Herek, Gregory, et al. (2010). “Demographic, Psychological, and Social Characteristics of Self-Identified Lesbian, Gay, and Bisexual Adults in a U.S. Probability Sample.” *Sexuality Research & Social Policy*. 7:176-200; Herek, Gregory et al. (2009) “Internalized Stigma Among Sexual Minority Adults: Insights from a Social Psychological Perspective.” *Counseling Psychology*. 56:32-43; Savin-Williams, R.C. (1990). *Gay and Lesbian Youth: Expressions of Identity*. New York: Hemisphere Publishing/Taylor & Francis).

²² As discussed in <https://www.agora-parl.org/sites/default/files/agora-documents/diversity-in-human-sexuality1.pdf>. See Dawood, K., Bailey, J. M. and Martin, N. G., 2009: Genetic and environmental influences on sexual orientation. In Y.-K. Kim (Ed.), *Handbook of Behavior Genetics*, 269–279. Springer New York. doi:10.1007/978-0-387-76727-7;. *Current Directions in Psychological Science*, 18(4), 217–220.

²³ Andrea Ganna et al., “Large-Scale GWAS Reveals Insights into the Genetic Architecture of Same-Sex Sexual Behavior,” *Science* 365, no. 6456 (August 30, 2019): eaat7693, <https://doi.org/10.1126/science.aat7693>.

²⁴ Commonwealth v. Gill. Brief Amici Curiae American Psychological Association et al. (2011). <http://www.apa.org/about/offices/ogc/amicus/gill.pdf> (citing American Psychiatric Association. (1974) “Position Statement: Homosexuality and Civil Rights.” *American Journal of Psychiatry*. 131: 497; American Psychological Association. (1975). “Minutes of the Annual Meeting of the Council of Representatives.” *American Psychologist*. 30:620-651).

coverage by health insurance.²⁵ Since then, national mental health organizations around the world have adopted policies affirming that homosexuality is not a mental disorder but rather a naturally occurring variation in human sexuality.²⁶

Following this understanding, leading national mental health organizations have expressed concern about therapies or other practices that claim to be able to “change” one’s sexual orientation. Notably, there is no evidence to show that these therapies are safe or effective.²⁷ In August 2009, the American Psychological Association (APA) Task Force on Appropriate Therapeutic Responses to Sexual Orientation conducted a systematic review of research on sexual orientation change efforts. Based on the Task Force findings, the APA concluded that these treatments are unsuccessful and can even be harmful.²⁸ It adopted a policy stating that mental health professionals should not tell clients that they can change their sexual orientation through so-called “reparative therapies.” Furthermore, in 2013 the APA issued a position statement reiterating that “no credible evidence exists that any mental health intervention can reliably and safely change sexual orientation, nor, from a mental health perspective, does sexual orientation need to be changed.”²⁹ In 2016, the World Psychiatric Association echoed this in a position statement indicating that “[t]here is no sound scientific evidence that innate sexual orientation can be changed.”³⁰

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²⁵ Susan D Cochran et al., “Proposed Declassification of Disease Categories Related to Sexual Orientation in the *International Statistical Classification of Diseases and Related Health Problems* (ICD-11),” *Bulletin of the World Health Organization* 92, no. 9 (September 1, 2014): 672–79, <https://doi.org/10.2471/BLT.14.135541>.

²⁶ See e.g., https://hkps-dcp.org.hk/images/downloads/position_paper/Position_Paper_on_LGB_20120805.pdf; [https://pages.upd.edu.ph/sites/default/files/ejmanalastas/files/pap_2011_lgbt_nondiscrimination_statement.pdf](https://pages.upd.edu/ph/sites/default/files/ejmanalastas/files/pap_2011_lgbt_nondiscrimination_statement.pdf); <https://www.hrw.org/news/2022/08/18/vietnam-adopts-global-lgbt-health-standard>

²⁷ Commonwealth v. Gill. (2011). Brief Amici Curiae American Psychological Association et al. <http://www.apa.org/about/offices/ogc/amicus/gill.pdf>.

²⁸ American Psychological Association. “Report of the American Psychological Association Task Force: Appropriate therapeutic responses to sexual orientation.” August 2009, <http://www.apa.org/pi/lgbcp/publications/therapeutic-response.pdf>.

²⁹ David Scasta and Philip Bialer, “Position Statement on Issues Related to Homosexuality,” APA Official Actions (American Psychiatric Association, 2013), <https://www.psychiatry.org/file%20library/about-apa/organization-documents-policies/policies/position-2013-homosexuality.pdf>.

³⁰ Dinesh Bhugra et al., “WPA Position Statement on Gender Identity and Same-Sex Orientation, Attraction and Behaviours,” *World Psychiatry* 15, no. 3 (October 2016): 299–300, <https://doi.org/10.1002/wps.20340>.