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As a physician I know a lot about science. I don't know much about world religions or politics. But this I do know "IT IS WRONG TO USE THE LIVES OF OUR CHILDREN AS POLITICAL FOOTBALLS."

Kick the football around and you may win the game. Kick the health of our children out the door and we have lost the world.

Montgomery County Public Schools after passing the proposed curriculum will be the proud owner of "POLITICALLY MANDATED RELIGIOUS FAITH" based on the religions of GLSEN, PLAG, GSA(Gay-Straight Alliances), NARAL and TTF.

This Faith will refer questioning youth to Gay-Straight Alliances (FFLHS-Unit 10.1 p9) and will hide the risks of homosexuality from children because "it might reflect negative toward Homosexuality."

MCPS RELIGIOUS FAITH will not allow the "vaccine" of the Surgeon General's warning that "anal intercourse is too dangerous to practice." This RELIGIOUS FAITH will not allow the information that that 7% of boys having sex with men are HIV positive to be in the curriculum.

MCPS RELIGIOUS FAITH will exclude ex-gays, ex-transgenders, concerned physicians, FDA Statements, CDC and NIH information.

MCPS RELIGIOUS FAITH will tell the student that "While cross-dressers change their clothes, transsexuals ..change their body by ... hormone therapy or sexual reassignment surgery to match how they feel." This is without a whisper of the dangers of such therapy or that because transgenderism is a mental disorder psychiatric medical assistance is needed.

Parents entrust their children to Montgomery County Public Schools confident that their sons and daughters will be taught health. The Constitution has guaranteed both parents and the students freedom of speech and religious freedom. Judge Alexander Williams Jr. tells us this means viewpoint neutrality not a declaration of a school mandated religious faith.

We must remember this is a health class not a political agenda. Don't kick the children around like a religious political football.

Sincerely,



Ruth M. Jacobs, M.D.

- MCPS presents the new school sanctioned “religion” of the Moral Rightness of Homosexuality
- Not only does the curriculum avoid giving any negative information about homosexuality, it tells the students that coming out can give a new sense of joy and that transgenders change their body to match their feelings.
- The curriculum implies that any concerns the students may have about homosexuality are merely prejudices and can be removed by learning more information.
- The students are told that any “negative attitude” is homophobia. They are told expression of homophobia can include murder and that true tolerance means to accept.
- The lessons are scripted. Freedom of speech and of viewpoints is ignored. Students with questions are referred to the student arm of the gay advocacy group GLSEN. There is a “deafening silence” about ex-gays, ex transgenders and about the positive benefits of heterosexuality including the family and marriage. To read the lessons one would believe that homosexuality and the other lifestyles such as Bisexuality and Transgenderism are all unchangeable and wonderful.
- The risks as expressed by the American Academy of Pediatrics Clinical Report are not allowed to be discussed. “Nonheterosexual youth are.... more likely than heterosexual youth to start using tobacco, alcohol and illegal drugs at an earlier age (and) ...to have more partners... 7% of .. 15 to 22-year-old males who have sex with males were HIV seropositive. (American Academy of Pediatrics Clinical Report , Frankowski, MD, MPH; and the Committee on Adolescence Sexual orientation and Adolescents p1829)
- The Condom Use Demonstration Lesson NORMALIZES ANAL INTERCOURSE WITHOUT REVEALING THE RISKS OF GREATLY INCREASED HIV TRANSMISSION AND DECREASED CONDOM EFFICACY WHEN COMPARED TO VAGINAL INTERCOURSE .
- THE LESSON EXCLUDES
 1. the Surgeon Generals warning that anal intercourse is “simply to dangerous to practice”
 2. The condom package warning that “ANY USE OF CONDOMS FOR OTHER THAN VAGINAL INTERCOURSE CAN INCREASE THE POTENTIAL DAMAGE TO THE CONDOM

Further Concerns

1. Counsel offered by Dean Byrd Clinical Psychologist is ignored when he states “There are two great dangers posed by these two health lesson plans. First and perhaps foremost is that the lessons encourage self-labeling. Research is very conclusive in this area: the risk of suicide decreases by 20% for each year that a young person delays homosexual or bisexual self-labeling (Remafidi et al, 1991). It’s prudent to encourage adolescents to avoid self-labeling and to postpone decisions about sexual identity during adolescence. The second major danger is the stark omission of health risks associated with homosexual practices, particularly during adolescence (*American Journal of Public Health*, June, 2003).”

2. The fact that major reputable medical facilities such as Johns Hopkins University Hospital and the Cleveland Clinic no longer perform reassignment surgery because they consider it unsuccessful is excluded. The risks of steroids and of surgery to transgenders is excluded.
3. While the curriculum describes and condones the surgical alteration of individuals wishing to change their sexual appearance, the curriculum fails to mention that individuals may change their sexual feelings (and have), when they so desire, for example, from homosexual to heterosexual.
4. In the lesson the students are given 2003 non peer reviewed GLSEN statistics that 92% of GLPT students regularly hear anti gay comments, and that 84% are verbally harassed because of their sexual orientation. The 2005 GLSEN Survey **REFUTES** the 2003 numbers. “79% reported that they had NOT been called names, teased, bullied, or hurt at school in the past year because of their sexual orientation,
5. Over 270 physicians serving Montgomery County have petitioned that the following statements **be included in the lesson:**

“Are condoms strong enough for anal intercourse?”

The Surgeon General has said, "Condoms provide some protection, but anal intercourse is simply too dangerous to practice."

Condoms may be more likely to break during anal intercourse than during other types of sex because of the greater amount of friction and other stresses involved.

Even if the condom doesn't break, anal intercourse is very risky because it can cause tissue in the rectum to tear and bleed. These tears allow disease germs to pass more easily from one partner to the other.”

Condoms and Sexually Transmitted Diseases ...especially AIDS

<http://www.fda.gov/oashi/aids/condom.html>. 2005 revision-----

“HIV/AIDS can be sexually transmitted by anal, penile-vaginal, and oral intercourse. The highest rate of transmission is through anal exposure.” 2000 NIH Consensus Conference, Workshop Summary, We are additionally concerned that changes or lack of change in both the dvd/video and the Condom Use Demonstration lesson consistently tries to make condoms look better than they are by:

- 1) Deleting the effectiveness figure for HIV prevention with condom use during vaginal sex which was previously listed as 85% in the lesson and derived from the NIH consensus conference.
- 2) Presenting perfect use pregnancy prevention figures in the video (97% per year) without presenting typical use pregnancy prevention figures (88% per year) in the video.
- 3) Not warning that the amount of protection using condoms for discharge diseases (gonorrhea/chlamydia) and for genital ulcer disease (herpes/syphilis) is unknown¹.
- 4) Promoting condom use as responsible while refusing to label ABSTINENCE as “Most Responsible” despite unanimous recommendation by the committee to do so.

¹. See Minority Report (Epidemiologic studies: “More research is needed to assess the degree of protection latex condom provide for discharge diseases, other than HIV.” -- “More research is needed to assess the degree of protection latex condoms provide for genital ulcer disease. CDC)

In considering our objections to the curriculum and CAC recommendations, we reiterate Judge Alexander Williams, Jr.’s holding with regard to viewpoint neutrality in *CRC & PFOX vs. MCPS*, Case 8:05-cv-01194-AW (05/05/2005):

“Viewpoint discrimination consists of state action in which ‘there is no ban on a general subject matter, but only on one or more prohibited perspectives.’”

“In this case, Defendants open up the classroom to the subject of homosexuality, and specifically, the moral rightness of the homosexual lifestyle. However, the Revised Curriculum presents only one view on the subject — that homosexuality is a natural and morally correct lifestyle — to the exclusion of other perspectives”

“The wisdom of approving a curriculum which prohibits students from discussing one viewpoint of a controversial subject goes to the very essence of that First Amendment faith. The merit of Plaintiffs’ viewpoint — be it right, wrong, discriminatory, or just — is of no consequence. Rather, the Court is concerned with ensuring that Plaintiffs’ free speech rights are not restricted merely because they voice an unpopular viewpoint. No matter the importance of an idea to its believers, or how objectionable it may be to its detractors, the diversity of our democratic fabric is sewn together by the belief that the path to freedom lies in the opportunity for rival positions to be equally heard and discussed.”