Thank you for the opportunity to testify before you today.

My name is Walter J. Lear, M.D., and I am testifying on behalf of the National Gay Health Coalition. I am a specialist in public health and health services administration. I currently serve as President of the Institute of Social Medicine and Community Health in Philadelphia, a not-for-profit foundation engaged in community services, education, and research regarding public policy in the health field. I have had about twenty years experience in local, state, and federal health agencies. Most recently, I was, for eight years, the Commissioner of Health Services for the Metropolitan Philadelphia Area for the Pennsylvania Departments of Health and Public Welfare. The eight years proceeding that I was the First Deputy Health Commissioner for the City of Philadelphia. Prior to that I have had about fifteen years experience in hospitals and health insurance plans. I have written and lectured extensively on community health services, occupation health, health rights, and health insurance. I am a member of the Boards of various national and local agencies and organizations.

I must say that, in this long career, I have not heard the name of Dr. C. Everett Koop as being personally or professionally associated with a public health or community health program in the City of Philadelphia or in the State of Pennsylvania.

The National Gay Health Coalition is a coalition of 18 caucuses, organizations, or subgroups of virtually all major health professional associations. Examples are the Caucus of Gay Public Health Workers of
We would quickly acknowledge that Dr. Koop's credentials are impressive. He is known the world over for his courage and skill as a pediatric surgeon. He is also renowned as a vocal and articulate spokesperson for the causes which he believes in.

What is of concern to the National Gay Health Coalition, its constituent groups and the approximately ten to thirty percent of this nation's population whose sexual orientation is different from the majority—namely, those citizens who are homosexual or bisexual—is that Dr. Koop appears to have strongly held beliefs about homosexuality which are not supported by established medical thought, practice, or science. This being the case, I am concerned that the misconceptions of the nation's highest health officer could result in less than equitable treatment of government health programs and services for these tax-paying citizens. My concern is for the very health of at least ten percent of this nation's population.

I refer specifically to statement attributed to Dr. Koop. In the February 17, 1981, article in the Philadelphia Enquirer, Dr. Koop is quoted as saying, "The anti-family trends in our society are tremendous." He goes on to specifically cite the "Gay Pride movement" as well as the women's lib movement" as examples of these anti-family trends. This statement not only reflects less than contemporary understanding of the field of social medicine and psychiatry, but that such
a conclusion could well lead him to negative attitudes on service to this segment of the American public.

Homosexuals and bisexuals are not anti-family. Indeed, homosexuals, like heterosexuals, have fathers, mothers, sisters, brothers, children, etc. They share many of the values including respect for the family, of the families which raise them. And surely Dr. Koop would agree that the nuclear family is not so fragile that simply giving a group of citizens the same civil rights and equal justice would undermine it. It is irrational fear of homosexuality, known as homophobia, which was created in part by a now discarded belief that homosexuality was a psycho-pathology, that drives families apart. These outdated ideas have led to government policy which likewise drives families apart.

I am referring specifically to the ban on lesbians and gay men immigrating to this country, and most specifically referring to the case of a Filipino woman, Renaida Rebultan, who was denied entry into this country to join the rest of her family because she is a lesbian. Her brother wrote to Senator Alan Cranston, saying:

"We lover her so much like any other American loves his brothers, sisters, sons and daughters. The Rebultan Family who chose to adopt the great United States--the leader of human rights abroad and the defender of democracy, as their future homeland--are denied the freedom to be with one of the members of their family just because she is a lesbian... Our mother, who is ill, is constantly crying hoping that someday her only daughter will be reunited with her."

This aweful occurrence can only be construed to be anti-family. This event happened because immigration laws which are based on outdated views
have gone unchanged. These views do not appear to be dissimilar to those which Dr. Koop has indicated his support. If appointed Surgeon General, will Dr. Koop follow through on these attitudes and dispatch government psychiatrists to our borders to examine entering aliens for suspected homosexuality and thus continue to separate established family units?

Mr. Chairman, Members of the Subcommittee, I urge you to insure that the rights, health, and welfare of the approximately ten to thirty percent of the population who are gay or bisexual. As tax-paying citizens, they have a right to expect that their personal sexual orientation will not become grounds for discriminatory treatment by government programs, services, or officials.