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Cover: A computer simulation shows two spiral galaxies on the verge of merging. Recent studies have won new adherents to the notion that collisions and mergers play a large part in forming most, if not all, galaxies in the universe. (Image: Courtesy Joshua Barnes)



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## Letters

### Life style vs. orientation

I was glad to see that "Predisposition and Prejudice" provided a forum for scientific disagreement (Letters, SN: 3/4/89, p.131). But I must correct the erroneous conclusion of at least one of the readers that those "sufficiently discriminating to keep away from high-risk situations" will end up paying for the "high-risk life style of homosexuals."

Unfortunately, this is a conclusion many well-meaning people are coming to in our struggle against AIDS. A little information, however, will change any open mind.

First, there is no such thing as a "homosexual life style," any more than there is a "heterosexual life style." Life styles vary, obviously, within each group. Homosexuality is an *orientation*, not a style of living. A glance at any newspaper will quickly dispel the myth that gay people have a corner on promiscuity. As a matter of fact, statistics on other sexually transmitted diseases show that gays have dramatically curtailed risky behavior.

Economically, apart from the obvious motive of prejudice, there is no good reason to wish insurance companies would automatically exclude anyone presumptuously considered at "high risk." But even for those whose prejudices are strong, it is a misguided wish. Our taxes (collected from people of all orientations) will pay the expenses of people with AIDS who are refused coverage. Beds in public hospitals are already overcrowded with such indigent cases.

The valuable message of "Predisposition and Prejudice" is that discriminatory health care coverage doesn't solve anything. It only causes unnecessary hardship and pain.

*Philip Bockman  
Media Committee*

*Gay & Lesbian Alliance Against Defamation  
New York, N.Y.*

### DSM: 'Professional turf war'

In "The Diagnostic Dilemma" (SN: 2/25/89, p.120) you neglected the underlying energy for DSM revisions. Everyone has noticed the

media advertising blitz from new free-standing mental health clinics. Much of the revising widens the doorways of eligibility for third-party reimbursement to let more people into treatment. More subtle and political are the efforts to shift diagnostic criteria toward a reductionistic medical model so that psychiatry and the medical profession can control more of this expanding marketplace. The revisions are effectively excluding or limiting psychologists, counselors, psychiatric social workers and psychiatric nurse practitioners from independent practice by requiring medical diagnosis and referral. This nature vs. nurture dispute does not exist only at the ethereal level; there are very tangible consequences for the philosophical redefining of mental illnesses. It's a professional turf war.

*Kenneth S. Hines  
St. Joseph, Mo.*

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