

Submitter: Gabby Hancher

On Behalf Of:

Committee: House Committee On Behavioral Health and Health Care

Measure: HB2458

I am a counseling student who works under the ACA code of ethics. It pains me deeply that this conversation is still being had, as it treats LGBTQ+ people as though we are a disease or problem. We are neither. We are just people. The research shows that suicide and self-harm are incredibly high in our communities, and not because we hate ourselves intrinsically, but because we are taught to hate ourselves through practices like conversion therapy and other oppressive behaviors. We are bullied and shamed and made to believe we are less than. In fact, a recent peer-review of Sexual Orientation Change Efforts (SOCE or "conversion therapy") literature says, "...countless studies, including a thorough review conducted by the American Psychological Association (APA), have concluded that the practice of SOCE is ineffective and often harmful..." (Przeworski et al., 2020). It goes on to say, "Participation in SOCE is associated with numerous negative effects, including depression, suicidality, decreased self-esteem, and self-hatred as well as negative views of homosexuality, internalized homonegativity, sexual dysfunction, impaired familial and romantic relationships, and decreased overall sexual attraction" (Przeworski et al., 2020). So then why are we still doing it? At best, conversion therapy is ineffective at what it sets out to do and is driven by ignorance and at worst is done with malicious intent to cause deep harm to others.

It is the right choice for Oregon to ban conversion therapy. The LGBTQ+ community of Oregon deserves to live fully, safely, and without fear that their healthcare practitioners are being misguided by hateful, ineffective, and scientifically inaccurate practices. Thank you.

Przeworski, A., Peterson, E., & Piedra, A. (2020). A systematic review of the efficacy, harmful effects, and ethical issues related to sexual orientation change efforts. *Clinical Psychology: Science and Practice*. <https://doi.org/10.1111/cpsp.12377>