

Please vote **yes on HB2458** to prohibit the practice of so-called “conversion therapy”.

I am a Licensed Professional Counselor in Oregon and earned my PhD in clinical psychology in 2011. I have considerable education, experience, and training in treating adolescents and adults who identify as trans, non binary, gender nonconforming, queer, and related adjectives.

Many of the written testimonials you’ll receive today erroneously assume HB2458 will somehow ban psychotherapy in general for people experiencing gender dysphoria. Ethically-practiced psychotherapy is a wonderful tool for helping children and adolescents explore who they are, learn about identity and expression, and process trauma and mental health symptoms.

So-called “conversion therapy”, however, is not therapy. It is instead inherently coercive, harmful, and unethical. Practicing so-called “conversion therapy” is expressly forbidden as unethical by the professional organizations that guide mental health professionals in Oregon:

- American Association for Marriage and Family Therapy
- American Counseling Association
- American Psychiatric Association
- American Psychological Association
- National Association of Social Workers

Pasted below is a document published by the American Psychological Association explaining how so-called “conversion therapy” is not therapy and why it is unethical (retrieved from <https://www.apadivisions.org/division-44/resources/conversion-fact-sheet.pdf>).

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Facts about “Conversion Therapy”

Conversion therapy” is NOT therapy.

“Conversion therapy” describes any attempt to change a person’s sexual orientation or gender identity or expression, or any component of these. It is sometimes called reparative therapy, reorientation therapy, sexual orientation change efforts, or gender identity change efforts. Proponents have rebranded the practice and adapted their claims about it over time in response to sustained critiques. Same-gender or -sex attraction, gender non-conformity, and identifying as a sexual or gender minority (e.g., being lesbian, gay, bisexual, transgender, queer, another sexual or gender minority; LGBTQ+) are not illnesses and do not need treatment. These practices are not “therapy.”

Many who offer change efforts are not licensed mental health practitioners. This makes it difficult to monitor their practices. Researchers estimate that around 350,000 U.S. adults received “conversion therapy” as adolescents.¹ An estimated 16,000 youth will undergo “conversion therapy” by a mental health professional before they reach age 18 compared with an estimated 57,000 that will undergo it from a religious or spiritual advisor.¹ These change efforts can occur in many settings, including medical facilities and campuses, with spiritual advisors as well as individual or family meetings.

Research finds change efforts do not work and are harmful.

Reviews of research on change efforts can be found at the links on the left. The APA Task Force on Appropriate Therapeutic Responses to Sexual Orientation found “there is insufficient evidence that [sexual orientation change efforts] are efficacious for changing sexual orientation. Furthermore, there is some evidence that such efforts cause harm” (p. 66). Further, experts at the U.S. Substance Abuse and Mental Health Services Administration agree that change efforts are “coercive, can be harmful, and should not be part of behavioral health treatment.”

Reviewing the literature reveals some important points about these change efforts, listed below. Most studies focused on sexual orientation.

- Change efforts were not effective when changing sexual orientation was identified as the goal.^{2, 3, 4, 5, 6, 7}
- Although people going through change efforts may report or appear to show changes in their behavior, there is no scientific evidence that change efforts reduce sexual attraction⁶ or change gender identity. Change efforts may encourage people to hide their sexual orientation or gender identity,⁸ and can lead to other problems such as depression, sexual problems, and low self-esteem.^{4, 7}
- Change efforts are harmful during adolescence, and can increase suicidal thoughts, suicide attempts, and depression in young adulthood.⁹ Involvement of mental health or religious providers in change efforts is related to even more depression and suicidality.^{4, 10}

Mental health associations warn against change efforts.

Every major mental health organization has issued warnings about the risk of dangers associated with change efforts. A consensus statement issued in 2015 by the U.S. Substance Abuse and Mental Health Services Administration maintains that being LGBTQ+ is not a mental disorder, points to lack of evidence that change efforts can alter sexual orientation or gender and considers change efforts inappropriate. Further, the statement warns that change efforts may be harmful. This issue is particularly important for youth, who have fewer legal protections because they are minors.

These change efforts stigmatize LGBTQ+ people and change efforts and stigma can increase minority stress, or stress that comes from invalidation, non-acceptance, and enacted discrimination. Greater minority stress is related to greater risk of depression, substance abuse, and suicide, among other problems, as documented by the Institute of Medicine.¹¹

How can we advocate to end these change efforts?

It is important to challenge stigma and to take active steps toward supporting LGBTQ+ people. Here are some ways that you can help:

- Urge your elected officials to support legislation that will prohibit licensed mental health professionals from using “conversion therapy” or change efforts. Such legislation may be at the federal, state, or local level. As of June 2019, 18 states have acted laws to protect minors from “conversion therapy.”
- Support policies that end discriminatory practices in your community.
- Urge elected officials to pass consumer protection laws that protect the public against these change efforts.
- Advocate for access to accurate information regarding LGBTQ+ individuals, as well as change efforts. This helps challenge harmful attitudes and stigma.
- Reach out to your state, provincial, or territorial psychological association and/or your state equality organization to join ongoing work to promote well-being for people of all sexual orientations and gender identities, including LGBTQ+ people.

References

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