

Historically, Conversion Therapy was defined as changing one's sexual orientation, primarily from homosexual to heterosexual. In some cases, it was forced upon children or adults by families or therapeutic providers. Today, 'Conversion Therapy' (as used in this Bill) is best defined as a prohibition against ANY understanding or investigation as to WHY a person may feel that they are transgender. This would include exploring any comorbid behavioral health conditions such as depression or trauma, and understanding any social pressure or contagion that might be encouraging such a transition. The lack of legal therapeutic exploration will result in gender transition, including social, hormonal and surgical on people that have underlying behavioral health conditions. Not only will the transition NOT help these underlying conditions, it will exacerbate any behavioral health issues. This is medical malpractice.

The role of mental health professionals is to facilitate identity exploration while also helping clients confront important psychological issues that may be contributing to their distress, including their concerns about gender. Instead, by using a one-size-fits all approach (in this Bill, this is the definition of what is NOT 'Conversion Therapy'), many therapists misunderstand identity "affirmation" and inadvertently push agendas onto their gender-questioning clients. Counselors are to respect client autonomy and NOT impose our own beliefs, values, opinions, ideology, religion, or goals on clients. Conflating exploration of gender identity with "conversion therapy" betrays a misunderstanding of the basic principles of psychotherapy. The verbiage from this paragraph has been borrowed from the Gender Exploratory Therapy Association (<https://genderexploratory.com/>).