Submitter: Lacy Cooper, MS, LPC

On Behalf of Committee: House Committee on Behavioral Health and Health Care.

Measure: HB2458

To whom it may concern:

My name is Lacy Cooper. I am a lifelong Oregonian and mental health counselor for over the past 12 years. I do not identify as belonging to the LGBTQ+ community but the bulk of my professional career has been working with trans and queer identified clients, primarily older teens and adults. I have worked with individuals throughout this state, both rurally and in the tri-county area. I have heard time and again the impact of the negative experiences that occur with conversion therapy and not once have I ever heard of any client not being fundamentally harmed by this type of "therapy". Many individuals continue to struggle into adulthood and some even were coerced into it as adults due to a lack of financial independence and/or feeling it was their only option due to a lack of education of their options and best practices. Many times these clients see significant spikes in depression, isolation and experience trauma by the staff and experience (I see other testimonies have listed this data so please reference that for exact numbers) and that even once no longer undergoing this type of therapy these symptoms continue to persist. I have never heard from any client or queer person I have spoken with of a case where conversion therapy led to a decrease in the experience of gender dysphoria. Many tell me stories where the practitioner would shame them, use punishment and reinforce homophobic and transphobic ideas which can lead to self-harm, suicidal ideation and feelings of hopelessness. It also usually destroys the person's expectation of what mental health providers can do for them and so when their mental health concerns increase, they are less likely to seek out treatment. Clearly you can see how that would then increase the likelihood of risk for these individuals.

I have treated hundreds of individuals suffering from gender dysphoria. We work together to help them manage and lower their symptoms, identify triggers and build a team of medical professionals as needed to address the impact of their symptoms. All of this grounded in research and is whole human focused. I have spent thousands of dollars, hundreds of hours and continue to consult with other professionals about for most cases that I treat so that I can be competent in providing this work and the assumption that I don't thoroughly assess the person's complete mental health experience is not correct. As a licensed professional counselor if anyone has a question about the ethicalness of my work they can file a complaint with the state board that licenses me and that board has procedures in place to investigate. The board works to help protect the public and is there so they can make sure that providers are working from an ethical and competent treatment modality that minimizes harm and does not work to increase distress.

Currently I see this playing out in our community as the following way: Licensed counselors are no longer performing conversion therapy due to the data, the stand the ACA has taken and the WPATH listing standards of care to address and treat gender dysphoria. Instead what is now occurring is that we see "life coaches" and "specialists" taking these roles with the public. The public is also not being educated about what the dangers of this type of treatment and the risks they take by having someone who is not appropriately trained perform. This leads to a situation where they cannot give actual informed consent, even as an adult, due to the provider not sharing all treatment options and listing the risks associated with this type of treatment. I have met with many parents who reported they had no

idea conversion therapy has the background/research outcomes that it does because provider never provided this psycho-education to them. It is the legislators role to protect the public and as long as ORS 675.850 is not expanded to ban this practice for adults we will continue to have unlicensed unregulated providers harming Oregonians. There is no board or Association that is monitoring these "providers" and I ask the House of Representatives, as a medical provider and as an Oregonian, to step in and stop this loop hole so that we can work towards having regulation and accountability if providers continue to promote this antiquated and harmful practice. I also hope that this will be a strong stance against conversion therapy which will help promote education to the general public on its harmful impact to our valued community members.

Oregon is currently 48 out of 50 in accessibility for mental health providers, and 50 out of 50 for accessibility to drug and alcohol therapy. Trans and Queer people have the highest level of harassment, oppression and harm and if you believe that most LBGTQ+ individuals have full autonomy by the age of 18 then that would be a very false assumption, especially after the pandemic. Many times, they struggle with housing, have to stay with their family of origin much longer than their peers and for many they feel unempowered to stand up against a treatment "requirement" for housing or to continue to have contact with their family of origin, especially in rural areas. This is why the bill must be approved to increase the ban to all Oregonians, even for adults. We must protect those that need that protection.

Those of us who are competent to treat gender dysphoria are currently working as hard as we can to get folks treated so they can create a fulfilled life and work and be active members of our society but not at the cost of going against clear data and research. Conversion therapies do the opposite of helping people and we need to help protect the general public by passing this ban and sending a strong message that in Oregon we make decisions based on research, humanity and we create protections for those that we know are the most vulnerable.

Thank you for reading and appreciate your public service,

If you have any questions I am always available.

Lacy Cooper