# Position Statements and Reports of Professional Organizations Plus Governmental Laws

#### Regarding

#### **Sexual Orientation Change Efforts**

Prepared by Jack Doren, Psy.D. March 5, 2014

#### A. <u>Position Statements of Professional Organizations</u>

#### 1. American Psychological Association



Resolution on Appropriate Affirmative Responses to Sexual Orientation Distress and Change Efforts (2009):

...THEREFORE BE IT RESOLVED that the APA affirms that same-sex sexual and romantic attractions, feelings, and behaviors are normal and positive variations of human sexuality regardless of sexual orientation identity;

BE IT FURTHER RESOLVED that the APA reaffirms its position that homosexuality per se is not a mental disorder and opposes portrayals of sexual minority youths and adults as mentally ill due to their sexual orientation;

BE IT FURTHER RESOLVED that the APA concludes that there is insufficient evidence to support the use of psychological interventions to change sexual orientation;

BE IT FURTHER RESOLVED that the APA encourages mental health professionals to avoid misrepresenting the efficacy of sexual orientation change efforts by promoting or promising change in sexual orientation when providing assistance to individuals distressed by their own or others' sexual orientation;

BE IT FURTHER RESOLVED that the APA concludes that the benefits reported by participants in sexual orientation change efforts can be gained through approaches that do not attempt to change sexual orientation;...

BE IT FURTHER RESOLVED that the APA advises parents, guardians, young people, and their families to avoid sexual orientation change efforts that portray homosexuality as a mental illness or developmental disorder and to seek psychotherapy, social support, and educational services that provide accurate information on sexual orientation and sexuality, increase family and school support, and reduce rejection of sexual minority youth;

BE IT FURTHER RESOLVED that the APA encourages practitioners to consider the ethical concerns outlined in the 1997 APA Resolution on Appropriate Therapeutic Response to Sexual Orientation (APA, 1998), in particular the follow- ing standards and principles: scientific bases for professional judgments, benefit and harm, justice, and respect for people's rights and dignity;...

From: http://www.apa.org/about/policy/sexual-orientation.pdf (Pg. 31)

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#### 2. American Psychiatric Association



Position Statement on Psychiatric Treatment and Sexual Orientation" (Nov./Dec. 1998):

The potential risks of reparative therapy are great, including depression, anxiety and self-destructive behavior, since therapist alignment with societal prejudices against homosexuality may reinforce self-hatred already experienced by the patient. Many patients who have undergone reparative therapy relate that they were inaccurately told that homosexuals are lonely, unhappy individuals who never achieve acceptance or satisfaction. The possibility that the person might achieve happiness and satisfying interpersonal relationships as a gay man or lesbian is not

presented, nor are alternative approaches to dealing with the effects of societal stigmatization discussed.

...

Therefore, the American Psychiatric Association opposes any psychiatric treatment such as reparative or conversion therapy which is based upon the assumption that homosexuality per se is a mental disorder or based upon the a priori assumption that a patient should change his/her sexual homosexual orientation.

From: <a href="http://www.psychiatry.org/File%20Library/Advocacy%20and%20Newsroom/Position%20Statements/ps2000">http://www.psychiatry.org/File%20Library/Advocacy%20and%20Newsroom/Position%20Statements/ps2000</a> ReparativeTherapy.pdf

#### 3. American Medical Association



Health Care Needs of Gay Men and Lesbians in the United States, 275 J. Am. Med. Ass'n 1354 (1996):

[A]version therapy\* that links homosexual behavior with unpleasant sensations or aversive consequences is not recommended for gay men and lesbians. Gay men and lesbians can become comfortable with their sexual orientation and understand the societal response to it.

From: <a href="http://www.amsa.org/programs/barriers/jama96.pdf">http://www.amsa.org/programs/barriers/jama96.pdf</a>.

<sup>\*</sup> a behavioral or medical intervention which pairs unwanted behavior, in this case, homosexual behavior, with unpleasant sensations or aversive consequences [definition

## 4. American Counseling Association



Ethical Issues Related to Conversion or Reparative Therapy (Jan. 16, 2013):

The belief that same-sex attraction and behavior is abnormal and in need of treatment is in opposition to the position taken by national mental health organizations, including ACA. The ACA Governing Council passed a resolution in 1998 with respect to sexual orientation and mental health. This resolution specifically notes that ACA opposes portrayals of lesbian, gay and bisexual individuals as mentally ill due to their sexual orientation. . . . In 1999, the Governing Council adopted a statement 'opposing the promotion of reparative therapy as a cure for individuals who are homosexual.' . . .

[T]he ACA Ethics Committee strongly suggests that ethical professional counselors do not refer clients to someone who engages in conversion therapy or, if they do so, to proceed cautiously only when they are certain that the referral counselor fully informs clients of the unproven nature of the treatment and the potential risks and takes steps to minimize harm to clients. . . . This information also must be included in written informed consent material by those counselors who offer conversion therapy despite ACA's position and the Ethics Committee's statement in opposition to the treatment. To do otherwise violates the spirit and specifics of the ACA Code of Ethics.

From: <a href="http://www.counseling.org/news/updates/2013/01/16/ethical-issues-related-to-conversion-or-reparative-therapy">http://www.counseling.org/news/updates/2013/01/16/ethical-issues-related-to-conversion-or-reparative-therapy</a>.

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#### 5. National Association of Social Workers

a) "Reparative" or "Conversion" Therapies for Lesbians and Gay Men - Position Statement" (Jan. 2000):



[L]esbians and gay men often are pressured to seek reparative or conversion therapies, which cannot and will not change sexual orientation. Aligned with the American Psychological Association's (1997) position, NCLGB [NASW's National Committee on Lesbian, Gay, and

Bisexual Issues] believes that such treatment potentially can lead to severe emotional damage. Specifically, transformational ministries are fueled by stigmatization of lesbians and gay men, which in turn produces the social climate that pressures some people to seek change in sexual orientation (Haldeman, 1994). No data demonstrate that reparative or conversion therapies are effective, and in fact they may be harmful (Davison, 1991; Haldeman, 1994).

...

The literature indicates that "interventative therapies" that attempt to alter sexual orientation of lesbians and gay men have succeeded only in reducing sexual behavior and self-esteem rather than shaping attractions of opposite gender (Haldman, 1994).

...

NASW discourages social workers from providing treatments designed to change sexual orientation or from referring clients to practitioners or programs that claim to do so (NASW, 1992).

From: http://www.naswdc.org/diversity/lgb/reparative.asp.

b) Policy Statement: Lesbian, Gay, and Bisexual Issues (2005):

NASW reaffirms its stance against reparative therapies and treatments designed to change sexual orientation or to refer practitioners or programs that claim to do so. (NASW, 2000)

From: <a href="http://www.socialworkers.org/da/da2005/policies0505/documents/lgbissues.pdf">http://www.socialworkers.org/da/da2005/policies0505/documents/lgbissues.pdf</a>

6. American Psychoanalytic Association



Policy Statement: Attempts to Change Sexual Orientation, Gender Identity, or Gender Expression

The American Psychoanalytic Association affirms the right of all people to their sexual orientation, gender identity and gender expression without interference or coercive interventions attempting to change sexual orientation, gender identity or gender expression.

As with any societal prejudice, bias against individuals based on actual or perceived sexual orientation, gender identity or gender expression negatively affects mental health, contributing to an enduring sense of stigma and pervasive self-criticism through the internalization of such prejudice.

Psychoanalytic technique does not encompass purposeful attempts to "convert," "repair," change or shift an individual's sexual orientation, gender identity or gender expression. Such directed efforts are against fundamental principles of psychoanalytic treatment and often result in substantial psychological pain by reinforcing damaging internalized attitudes.

Adopted June 2012; this position statement replaces APsaA's December 1999 Position Statement on Reparative Therapy.

From: http://www.apsa.org/About\_APsaA/Position\_Statements/Attempts\_to\_Change\_Sexual\_Orientation.aspx

## 7. American Academy of Pediatrics



The American Academy of Pediatrics advises youth that "Counseling may be helpful for you if you feel confused about your sexual identity. Avoid any treatments that claim to be able to change a person's sexual orientation, or treatment ideas that see homosexuality as a sickness."

From: <a href="http://www.apa.org/pi/lgbt/resources/just-the-facts.pdf">http://www.apa.org/pi/lgbt/resources/just-the-facts.pdf</a> (pg 6)

Therapy directed at specifically changing sexual orientation is contraindicated, since it can provoke guilt and anxiety while having little or no potential for achieving changes in orientation.

Homosexuality and Adolescence, 92 Pediatrics 631 (1993), available at <a href="http://pediatrics.aappublications.org/content/92/4/631.full.pdf">http://pediatrics.aappublications.org/content/92/4/631.full.pdf</a> Pg. 633.

#### 8. American School Counselor Association



Lesbian, gay, bisexual, transgendered and questioning (LGBTQ) youth often begin to experience self-identification during their preadolescent or adolescent years, as do heterosexual youth. These developmental processes are essential cognitive, emotional and social activities, and although they may have an impact on student

development and achievement, they are not a sign of illness, mental disorder or emotional problems nor do they necessarily signify sexual activity.

...It is not the role of the professional school counselor to attempt to change a student's sexual orientation/gender identity but instead to provide support to LGBTQ students to promote student achievement and personal well-being. ...sexual orientation is not an illness and does not require treatment...

From: http://www.apa.org/pi/lgbt/resources/just-the-facts.pdf

## 9. New York State Psychiatric Association



# MEMORANDUM IN SUPPORT WITH RECOMMENDATIONS A-6983-A (Glick)

AN ACT to amend the education law, in relation to prohibiting mental health professionals from engaging in sexual orientation change efforts with a patient under the age of eighteen years and expanding the definition of professional misconduct with respect to mental health professionals.

New York State Psychiatric Association (NYSPA), the medical specialty society of more than 4,000 psychiatrists practicing in New York State, would like to express its strong support for this bill. This bill would prevent mental health professionals from providing sexual orientation change efforts to minors under eighteen by defining such activities as professional misconduct.

...NYSPA strongly supports the protection of all LGBT minors by prohibiting sexual orientation change efforts and recommend further strengthening the bill by adding to the definition of professional misconduct offering to engage in sexual orientation change efforts.

February \_\_\_, 2014

From: <a href="http://www.nyspsych.org/assets/docs/position%20statement%20-%20conversion%20therapy.pdf">http://www.nyspsych.org/assets/docs/position%20statement%20-%20conversion%20therapy.pdf</a>

#### 10. American Academy of Physician Assistants



The American Academy of Physician Assistants opposes any psychiatric treatment directed specifically at changing sexual orientation, such as 'conversion' or 'reparative' therapy which is based upon the assumption that homosexuality per se is a mental disorder or based upon the a priori

assumption that the patient should change his/her sexual orientation.

From: http://spiritindia.com/health/healthcare-physician-assistants-vote-on-retail-clinics-reparative-therapy/

#### 11. American Association for Marriage and Family Therapy



## AAMFT Position on Couples and Families (2009)

From time to time AAMFT receives questions about a practice known as reparative or conversion therapy, which is aimed at changing a person's sexual orientation. As stated in previous AAMFT policy, the association does not consider homosexuality a disorder that requires treatment, and as such, we see no basis for [reparative therapy]. AAMFT expects its members to practice based on the best research and clinical evidence available.

From: <a href="http://www.aamft.org/imis15/content/about-aamft/">http://www.aamft.org/imis15/content/about-aamft/</a>
position on couples.aspx

#### 12. American Academy of Child and Adolescent Psychiatry



This Practice Parameter was approved by the AACAP Council on May 31, 2012.

Principle 6. There is no established evidence that change in a predominant, enduring homosexual pattern of development is possible. Although sexual fantasies can, to some degree, be suppressed or repressed by those who are ashamed of or in conflict about them, sexual desire is not a choice. However, behavior, social role, and—to a degree—identity and self-acceptance are. Although operant conditioning modifies sexual fetishes, it does not alter homosexuality. Psychiatric efforts to alter sexual orientation through "reparative therapy" in adults have found little or no change in sexual orientation, while causing significant risk of harm to self-esteem. A study of efforts to do so in adults has been criticized for failure to adequately consider risks such as increased anguish, self-loathing, depression, anxiety, substance abuse and suicidality, and for failure to support appropriate coping with prejudice and stigma.

There is no empirical evidence that adult homosexuality can be prevented if gender nonconforming children are influenced to be more gender conforming. Indeed, there is no medically valid basis for attempting to prevent homosexuality, which is not an illness. On the contrary, such efforts may encourage family rejection and undermine self-esteem, connectedness, and caring, which are important protective factors against suicidal ideation and attempts. As bullies typically identify their targets on the basis of adult attitudes and cues, adult efforts to prevent homosexuality by discouraging gender variant traits in "prehomosexual children" may risk fomenting bullying. Given that there is no evidence that efforts to alter sexual orientation are effective, beneficial, or necessary, and the possibility that they carry the risk of significant harm, such interventions are contraindicated.

From: <a href="http://www.guideline.gov/content.aspx?id=38417">http://www.guideline.gov/content.aspx?id=38417</a>

13. World Health Organization (ICD-10) - Pan American Health Organization (the North and South American Regional Office of the World Health Organization)

"Cures" for an Illness That Does Not Exist: Purported Therapies Aimed at Changing Sexual Orientation Lack Medical Justification and are Ethically Unacceptable (2012)

"Reparative" or "conversion therapies" have no medical indication and represent a severe threat to the health and human rights of the affected persons. They constitute unjustifiable practices that should be denounced and subject to adequate sanctions and penalties.

From: <a href="http://www.paho.org/hq/index.php?">http://www.paho.org/hq/index.php?</a>
option=com docman&task=doc view&gid=17703.

#### **B.** Legislative Acts - Passed and Proposed

#### Federal:



# Bill Summary & Status 113th Congress (2013 - 2014) H.CON.RES.69

**Latest Title:** Stop Harming Our Kids Resolution of 2013

Sponsor: Rep Speier, Jackie [CA-14] (introduced 12/4/2013)

Cosponsors (17)

**Latest Major Action:** 12/6/2013 Referred to House

subcommittee. Status: Referred to the Subcommittee on Health.

# December 4, 2013 CONCURRENT RESOLUTION

Expressing the sense of Congress that efforts by mental health practitioners to change an individual's sexual orientation is dangerous and harmful and should be prohibited from being practiced on minors.

Whereas being lesbian, gay, bisexual, transgender, or gender nonconforming is not a disorder, disease, illness, deficiency, or shortcoming;

Whereas the American Psychological Association's 2008 resolution on Transgender, Gender Identity, and Gender Expression Non-discrimination states that `discrimination and prejudice against people based on their actual or perceived gender identity or expression detrimentally affects psychological, physical, social, and economic well-being';

Whereas the development of all children and adolescents into healthy and productive adults is a national priority and ending prejudice and injustice based on sexual orientation and gender nonconformity is a human rights issue;

Whereas the American Academy of Pediatrics, the American Counseling Association, the American Psychiatric Association, the American Psychological Association, the American School Counselor Association, the National Association of School Psychologists, and the National Association of Social Workers, together representing more than 480,000 health and mental health professionals, have all taken the position that homosexuality is not a mental disorder and thus is not something that needs to be or can be `cured';

Whereas the American Psychological Association, American Psychiatric Association, National Association of Social Workers, American Counseling

Association Governing Council, and American Psychoanalytic Association have not found `sexual orientation change efforts to be safe or effective';

Whereas the American Psychological Association's 2009 resolution on Appropriate Affirmative Responses to Sexual Orientation Distress and Change Efforts `concludes there is insufficient evidence to support the use of psychological interventions to change sexual orientation';

Whereas the American Psychiatric Association has opposed since 2000 `any psychiatric treatment, such as `reparative' or conversion therapy, which is based upon the assumption that homosexuality per se is a mental disorder or based upon the a priori assumption that a patient should change his/her homosexual orientation';

Whereas the American Psychological Association's Task Force on Appropriate Therapeutic Responses to Sexual Orientation's systematic review of peer-reviewed journal literature on sexual orientation change efforts concluded that `attempts to change sexual orientation may cause or exacerbate distress and poor mental health in some individuals, including depression and suicidal thoughts';

Whereas the American Psychological Association issued a resolution on Appropriate Affirmative Responses to Sexual Orientation Distress and Change Efforts in 2009 advising parents, guardians, young people, and their families `to avoid sexual orientation change efforts that portray homosexuality as a mental illness or developmental disorder and to seek psychotherapy, social support, and educational services that provide accurate information on sexual orientation and sexuality, increase family and school support, and reduce rejection of sexual minority youth';

Whereas the American Academy of Child and Adolescent Psychiatry published a practice principles in 2012 in the Journal of the American Academy of Child and Adolescent Psychiatry stating Principle 6: `Clinicians should be aware that there is no evidence that sexual orientation can be altered through therapy, and that attempts to do so may be harmful,' and finding that `There is no empirical evidence adult homosexuality can be prevented if gender nonconforming children are influenced to be more gender conforming. Indeed, there is no medically valid basis for attempting to prevent homosexuality, which is not an illness. On the contrary, such

efforts may encourage family rejection and undermine self-esteem, connectedness and caring, important protective factors against suicidal ideation and attempts. . . . Given that there is no evidence that efforts to alter sexual orientation are effective, beneficial or necessary, and the possibility that they carry the risk of significant harm, such interventions are contraindicated.';

Whereas the National Association of Social Workers prepared a 1997 policy statement in which it stated `Social stigmatization of lesbian, gay and bisexual people is widespread and is a primary motivating factor in leading some people to seek sexual orientation changes. Sexual orientation conversion therapies assume that homosexual orientation is both pathological and freely chosen. No data demonstrates that reparative or conversion therapies are effective, and, in fact, they may be harmful.';

Whereas the American Counseling Association Governing Council issued a position statement in April of 1999 in which it stated `We oppose the promotion of `reparative therapy' as a `cure' for individuals who are homosexual.';

Whereas the American Psychoanalytic Association updated its position statement in June 2012, on attempts to change sexual orientation, gender, identity, or gender expression, and in the statement the association states `As with any societal prejudice, bias against individuals based on actual or perceived sexual orientation, gender identity or gender expression negatively affects mental health, contributing to an enduring sense of stigma and pervasive self-criticism through the internalization of such prejudice. Psychoanalytic technique does not encompass purposeful attempts to `convert', `repair', and change or shift an individual's sexual orientation, gender identity or gender expression. Such directed efforts are against fundamental principles of psychoanalytic treatment and often result in substantial psychological pain by reinforcing damaging internalized attitudes.':

Whereas in 2010, the World Professional Association for Transgender Health released a statement urging the de-pathologization of gender variance in which it states `The expression of gender characteristics, including identities, that are not stereotypically associated with one's

assigned sex at birth is a common and culturally diverse human phenomenon which should not be judged as inherently pathological or negative.';

Whereas research by Caitlyn Ryan et al. entitled `Family Rejection as a Predictor of Negative Health Outcomes in White and Latino Lesbian, Gay, and Bisexual Adults' published in 2009, found that certain young people experienced sexual orientation change efforts as a form of rejection, and that minors who experience family rejection based on their sexual orientation face especially serious health risks and that such youth were 8.4 times more likely to report having attempted suicide, 5.9 times more likely to report high levels of depression, and 3.4 times more likely to use illegal drugs compared with peers from families that reported no or low levels of family rejection; and

Whereas several States have enacted or are considering legislation and other measures to prohibit sexual orientation change efforts in children and adolescents: Now, therefore, be it

Resolved by the House of Representatives (the Senate concurring),

# **SECTION 1. SHORT TITLE.**

 This resolution may be cited as the `Stop Harming Our Kids Resolution of 2013'.

# SEC. 2. SENSE OF CONGRESS REGARDING SEXUAL ORIENTATION CHANGE EFFORTS DIRECTED AT MINORS.

 (a) In General- It is the sense of Congress that sexual orientation change efforts directed at minors are discredited and ineffective, have no legitimate therapeutic purpose, and are dangerous and harmful.

- (b) State Encouragement- Congress encourages each State to take steps to protect minors from efforts that promote or promise to change sexual orientation or gender identity or expression based on the premise that being lesbian, gay, bisexual, transgender, or gender nonconforming is a mental illness or developmental disorder that can or should be cured.
- (c) Sexual Orientation Change Efforts Defined- In this resolution, the term `sexual orientation change efforts' means any practice by a licensed mental health provider, health care provider, or counselor that seeks or purports to impose change of an individual's sexual orientation or gender identity or expression, including reducing or eliminating sexual or romantic attractions or feelings toward a person of the same gender and efforts to change behaviors, gender identity, or gender expression. Such term does not include counseling that--
  - (1)(A) provides acceptance, support, and understanding of a person;
  - (B) facilitates a person's coping, social support, and identity exploration and development;
  - (C) provides developmentally appropriate counseling for a person seeking to transition from one gender to another; or
  - (D) provides sexual orientation- and gender identityneutral interventions to prevent or address unlawful conduct or unsafe sexual practices; and

 (2) does not seek to change sexual orientation or gender identity or expression.

From: <a href="http://thomas.loc.gov/cgi-bin/query/z?c113:H.CON.RES.69">http://thomas.loc.gov/cgi-bin/query/z?c113:H.CON.RES.69</a>:

#### State:

# California



# SB-1172 Sexual orientation change efforts.

(2011-2012)

Chapter 835

[ Approved by Governor September 30, 2012. Filed with Secretary of State September 30, 2012. ]

This bill would prohibit a mental health provider, as defined, from engaging in sexual orientation change efforts, as defined, with a patient under 18 years of age. The bill would provide that any sexual orientation change efforts attempted on a patient under 18 years of age by a mental health provider shall be considered unprofessional conduct and shall subject the provider to discipline by the provider's licensing entity.

The bill would also declare the intent of the Legislature in this regard.

- 865.1. Under no circumstances shall a mental health provider engage in sexual orientation change efforts with a patient under 18 years of age.
- 865.2. Any sexual orientation change efforts attempted on a patient under 18 years of age by a mental health provider shall be considered unprofessional conduct and shall subject a mental health provider to discipline by the licensing entity for that mental health provider.

From: <a href="https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?">https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?</a> bill id=201120120SB1172

# **New Jersey**



Senate Bill 2278 introduced October 15, 2012 - 25% progress, died in chamber

Action: June 27, 1013 - Substituted by A3371

Assembly Bill 3371: Status (Passed) August 19, 2013 - Approved P.L.2013, c.150

Bill Title: Protects minors by prohibiting counseling attempts to change sexual orientation.

A person who is licensed to provide professional counseling under Title 45 of the Revised Statutes, including, but not limited to, a psychiatrist, licensed practicing psychologist, certified social worker, licensed clinical social worker, licensed social worker, licensed marriage and family therapist, certified psychoanalyst, or a person who performs counseling as part of the person's professional training for any of these professions, shall not engage in sexual orientation change efforts with a person under 18 years of age.

From: <a href="http://www.njleg.state.nj.us/2012/Bills/A3500/3371\_I1.HTM">http://www.njleg.state.nj.us/2012/Bills/A3500/3371\_I1.HTM</a>

# **New York State**

#### Senate Bill S4917A-2013

Designates as professional misconduct, engaging in sexual orientation change efforts by mental health care professionals upon patients under 18 years of age.

#### Actions:

- 1 Jan 9, 2014: PRINT NUMBER 4917A
- 2 Jan 9, 2014: AMEND (T) AND RECOMMIT TO HIGHER EDUCATION
- 3 Jan 8, 2014: REFERRED TO HIGHER EDUCATION
- 4 May 1, 2013: REFERRED TO HIGHER EDUCATION

TITLE OF BILL: An act to amend the education law, in relation to prohibiting mental health professionals from engaging in sexual orientation change efforts with a patient under the age of eighteen years and expanding the definition of professional misconduct with respect to mental health professionals

PURPOSE: This bill would prohibit a mental health professional, as defined, from engaging in sexual orientation change efforts, as defined, with a patient under 18 years of age. The bill would provide that any sexual orientation change efforts attempted on a patient under 18 years of age by a licensed mental health professional shall be considered unprofessional conduct and shall subject the provider to discipline by the provider's licensing entity.

From: http://open.nysenate.gov/legislation/bill/S4917A-2013

# **Maryland**

#### **HOUSE BILL 91**

By: Delegate Cardin

Requested: September 24, 2013

Introduced and read first time: January 8, 2014 Assigned to: Health and Government Operations

AN ACT concerning Health Occupations – Sexual Orientation Change Efforts – Prohibited

FOR the purpose of prohibiting certain mental health care practitioners from engaging in certain sexual orientation change efforts with certain patients; providing that a certain mental health care practitioner who engages in certain sexual orientation change efforts with a certain patient shall be considered to have engaged in unprofessional conduct and shall be subject to discipline by a certain licensing board; defining certain terms; and generally relating to the prohibition of sexual orientation change efforts.

From: <a href="http://mgaleg.maryland.gov/2014RS/bills/hb/hb0091f.pdf">http://mgaleg.maryland.gov/2014RS/bills/hb/hb0091f.pdf</a>

# <u>Pennsylvania</u>

HOUSE BILL 1811, Session 2013

Referred to Committee on Human Services, October 29, 2013

AN ACT

Prohibiting mental health professionals from engaging in sexual orientation change efforts with an individual under 18 years of age.

The General Assembly of the Commonwealth of Pennsylvania hereby enacts as follows:

Section 1. Short title.

The act shall be known and may be cited as the Protection of Minors from Sexual Orientation Change Counseling Act.

. . .

Section 4. Sexual orientation change efforts prohibited.

- (a) General rule.--A mental health professional shall engage in sexual orientation change efforts with an individual under 18 years of age.
- (b) Consent of minors.--Nothing in this act shall be construed to prevent a minor from voluntarily consenting to mental health care as provided in the act of February 13, 1970(P.L.19, No.10), entitled "An act enabling certain minors to consent to medical, dental and health services, declaring consent unnecessary under certain circumstances."

Section 5. Effective date.

This act shall take effect immediately.

From: http://www.legis.state.pa.us/cfdocs/legis/PN/Public/btCheck.cfm? txtType=HTM&sessYr=2013&sessInd=0&billBody=H&billTyp=B&billNbr=1811&pn=2603

# Washington, DC

Press Release by Councilmember Mary Cheh:

Bill would prohibit licensed mental health providers from offering conversion therapy to minors.

Washington, D.C. – Yesterday [date not indicated], Councilmember Mary Cheh (D-Ward 3) introduced legislation that would ban gay conversion or reparative therapy for minors. Such therapy attempts to alter the sexual orientation of individuals from homosexual to heterosexual.

From: <a href="http://www.marycheh.com/release/cheh-introduces-legislation-banning-gay-conversion-therapy/">http://www.marycheh.com/release/cheh-introduces-legislation-banning-gay-conversion-therapy/</a>

# **Massachusetts**

Bill H.154

188th (Current)

An Act relative to abusive practices to change sexual orientation and gender identity in minors

By Mr. Sciortino of Medford, a petition (accompanied by bill, House, No. 154) of Carl M. Sciortino, Jr. and others relative to the protection of the mental and physical health of minors from sexual orientation and/or gender identity change efforts.

Under no circumstances shall a licensed professional advertise for or engage in sexual orientation and gender identity change efforts with a patient less than 18 years of age. Any licensed professional violating this prohibition shall be such subject to discipline by the board, which may include suspension or revocation of license.

From: <a href="https://malegislature.gov/Bills/188/House/H154">https://malegislature.gov/Bills/188/House/H154</a>

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# Ohio

SB188 130th General Assembly 2013-2014

## **ABILL**

To amend sections 4723.43, 4732.01, 4732.17, and 4757.01 and to enact sections 4731.30, 4732.29, and 4757.35 of the Revised Code to prohibit persons licensed or certified, or in training to be licensed or certified, in occupations that provide professional counseling from engaging in sexual orientation change efforts with a person under eighteen years of age.

**Sec. 4757.35.** A person licensed or certified under this chapter, or a person seeking licensure or certification under this chapter who performs counseling, marriage and family therapy, or social work as part of the person's training, shall not engage in sexual orientation change efforts with any person under eighteen years of age.

From: <a href="http://www.legislature.state.oh.us/bills.cfm?ID=130\_SB\_188">http://www.legislature.state.oh.us/bills.cfm?ID=130\_SB\_188</a>

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# **Minnesota**

H.F. 1906

A bill for an act relating to health professionals; prohibiting sexual orientation change efforts with children; proposing coding for new law in Minnesota Statutes, chapter 214.

Subd. 2. Prohibition. (a) No provider shall engage in sexual orientation change efforts with a client under 18 years of age.

(b) Any sexual orientation change efforts attempted by a provider with a client under 18 years of age shall be unprofessional conduct and shall be subject to disciplinary action by the provider's licensing board. EFFECTIVE DATE. This section is effective the day following final enactment.

From: <a href="http://www.tcdailyplanet.net/news/2014/01/14/minnesota-legislators-introduce-bill-ban-ex-gay-therapy-minors">http://www.tcdailyplanet.net/news/2014/01/14/minnesota-legislators-introduce-bill-ban-ex-gay-therapy-minors</a>

# **Washington State**

HB 2451 - 2013-14 / SB 6449

Restricting the practice of sexual orientation change efforts.

House: Passed on third reading - Feb. 13, 2014

Senate: Feb 17, 2014: first reading - referred to Health Care; Feb 20: Public Hearing in the Senate Committee on Health Care

in the Senate Committee on Health Care

**Sec. 3....**The following conduct, acts, or conditions constitute unprofessional conduct for any license holder under the jurisdiction of this chapter:

. . .

(26)	Performing	sexual	orientation	change	efforts	on	а	patient
l	under age e	ighteen.						

From: http://apps.leg.wa.gov/billinfo/summary.aspx?bill=2451&year=2014

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