

June 6, 2017

Representative Kay Khan

Chair, Joint Committee on Children, Families and Persons with Disabilities
24 Beacon St
Room 146
Boston, MA 02133

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Director, *The Center for Population Research in LGBT Health*
Co-Chair, *The Fenway Institute*

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Senator Jennifer Flanagan

Chair, Joint Committee on Children, Families and Persons with Disabilities
24 Beacon St
Room 312-D
Boston, MA 02133

RE: An Act relative to abusive practices to change sexual orientation and gender identity in minors (H.1190)

Dear Chairwoman Khan, Chairwoman Flanagan, and members of the Joint Committee on Children, Families and Persons with Disabilities,

The Fenway Institute would like to testify in support of Bill H.1190, An Act relative to abusive practices to change sexual orientation and gender identity in minors. The Fenway Institute works to make life healthier for those who are lesbian, gay, bisexual, and transgender (LGBT), as well as people living with HIV and the larger community. We do this through research and evaluation, education and training, policy analysis, and public health advocacy. We are the research division of Fenway Health, a federally qualified health center and Ryan White Part C HIV clinic in Boston, MA. The Sidney Borum, Jr. Health Center is a program of Fenway Health that provides safe, non-judgmental care for LGBT youth, homeless youth, and other young people who may not feel comfortable going anywhere else.

We support this bill because research has shown that conversion therapy to alter sexual orientation and gender identity is ineffective, unethical, and harmful—especially for youth. According to the American Psychological Association's Task Force on Appropriate Therapeutic Responses to Sexual Orientation Change Efforts, there is no methodologically sound research that has demonstrated the effectiveness of conversion therapy to alter sexual orientation.¹

In a study analyzing the experiences of over 200 people who underwent conversion therapy to change their sexual orientation, researchers found that only 13% of participants reported “successful” outcomes from conversion therapy. Even among participants who considered their therapy a success, many

¹ American Psychological Association. August 2009. *Report of the American Psychological Association Task Force on Appropriate Therapeutic Responses to Sexual Orientation*. Available online at: <https://www.apa.org/pi/lgbt/resources/therapeutic-response.pdf>

still reported same-sex desires and sexual encounters. Nearly all of the participants who reported no longer having any same-sex desire at all were themselves providers of ex-gay counseling.² For the 176 participants who reported self-perceived failure in changing their sexual orientation, 155 reported significant long-term harm from the conversion therapy. The respondents who did not report long-term harm viewed their failure as an opportunity to fully embrace their sexual orientation rather than try to change it. Negative health outcomes reported by participants as a result of conversion therapy included depression, anxiety, suicidal ideation and attempts, damaged self-esteem, internalized homophobia, and social isolation. Among the respondents who were subjected to aversive conditions, such as electric shock therapy, all reported long-term psychological damage in addition to physical injuries like pain and burns.³

According to a 2015 report from the U.S. Substance Abuse and Mental health Services Administration (SAMHSA), *Ending Conversion Therapy: Supporting and Affirming LGBTQ Youth*, there is no peer-reviewed research to support claims that conversion therapy for gender nonconforming people is effective. Furthermore, research does exist that shows the harmful effects that rejection and lack of support has on the health and well-being of gender minority youth. As such, conversion therapy to change gender identity clearly has the potential to cause great harm and distress for gender minority youth.⁴

In addition to being harmful and ineffective, conversion therapy efforts with sexual and gender minority youth are unethical and inappropriate. Conversion therapy is inconsistent with the principle of “Do No Harm,” and it also violates professional standards of care and principles of providing nondiscriminatory and equitable care to all clients. The 2015 SAMHSA report states that “lesbian, gay, and bisexual orientations are normal variations of human sexuality and not mental health disorders,” and as such, all “behavioral efforts that attempt to change an individual’s sexual orientation are inappropriate.”⁵ The change from Gender Identity Disorder to Gender Dysphoria in the Diagnostic and Statistical Manual of Mental Disorders signifies a shift in professional behavioral health practices away from pathologizing someone’s gender identity itself, and instead focusing on the distress one experiences as a result of incongruence between sex at birth and gender identity. As such, behavioral health interventions are only appropriate for treating distress that may exist, not for treating the identity itself. Research has shown that gender affirming support and treatment, including medical interventions like hormone therapy and surgeries, are effective in treating gender dysphoria.⁶

² Shidlo A, Schroeder M. (2002). Changing sexual orientation: A consumer’s report. *Professional Psychology: Research and Practice*, 33(3), 249-259.

³ *Ibid.*

⁴ Substance Abuse and Mental Health Services Administration. October 2015. *Ending Conversion Therapy: Supporting and Affirming LGBTQ Youth*.

⁵ *Ibid.*

⁶ The World Professional Association for Transgender Health. 2011. *Standards of Care for the Health of Transsexual, Transgender, and Gender Nonconforming People*. Vers. 7. Available online at:

Given the lack of research demonstrating the effectiveness of conversion therapy and the potential harm that conversion therapy can cause, major health organizations, such as the World Health Organization,⁷ the American Medical Association,⁸ the American Academy of Pediatrics,⁹ and the American Psychological Association,¹⁰ have condemned the practice of conversion therapy. A jury in New Jersey found that a conversion therapy program that provided services to change sexual orientation was fraudulent and unconscionable.¹¹ The American Bar Association also passed a resolution that strongly recommended that “all federal, state, local, territorial, and tribal governments enact laws that prohibit state-licensed professionals from using conversion therapy on minors.”¹² Currently, eight states and Washington, DC prohibit conversion therapy on minors.¹³ We respectfully urge Massachusetts, long a leader in enlightened and equitable public policies for LGBT people, to outlaw conversion therapy with minors in the interest of protecting the health and well-being of LGBT and questioning youth.

Respectfully,

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The Fenway Institute, Fenway Health

Jane Powers, MSW, LICSW
Director of Behavioral Health
Fenway Health

[https://s3.amazonaws.com/amo_hub_content/Association140/files/Standards%20of%20Care%20V7%20-%20202011%20PATH%20\(2\)\(1\).pdf](https://s3.amazonaws.com/amo_hub_content/Association140/files/Standards%20of%20Care%20V7%20-%20202011%20PATH%20(2)(1).pdf)

⁷ World Health Organization. May 2012. “Therapies’ to change sexual orientation lack medical justification and threaten health.” Available online at: http://www.paho.org/hq/index.php?option=com_content&view=article&id=6803%3Atherapies-change-sexual-orientation-lack-medical-justification-threaten-health-&catid=740%3Anews-press-releases&Itemid=1926&lang=en

⁸ American Medical Association. *Policies on Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ) Issues*. Available online at: <https://www.ama-assn.org/delivering-care/policies-lesbian-gay-bisexual-transgender-queer-lgbtq-issues>

⁹ American Academy of Pediatrics. Committee on Adolescence. *Homosexuality and Adolescence*. Available online at: <http://pediatrics.aappublications.org/content/pediatrics/92/4/631.full.pdf>

¹⁰ American Psychological Association. August 2009. *Report of the American Psychological Association Task Force on Appropriate Therapeutic Responses to Sexual Orientation*. Available online at: <https://www.apa.org/pi/lgbt/resources/therapeutic-response.pdf>

¹¹ Ferguson v. JONAH, Law Div., Hudson Cy. (Bariso, J.S.C.), HUD-L-5473-12, February 5, 2015

¹² American Bar Association, 2015. Resolution 112., available at <https://www.americanbar.org/content/dam/aba/images/abanews/2015annualresolutions/112.pdf>.

¹³ Movement Advancement Project. “Conversion Therapy Laws.” Visited June 2, 2017. Available online at: http://www.lgbtmap.org/equality-maps/conversion_therapy