

Senate Human Services
Senator Judy Lee, Chair
March 11, 2025
HB 1430

Good morning, Chair Lee and members of the Senate Human Services Committee. For the record, my name is Dr. Jon Ulven, and I am a licensed psychologist with Sanford Health Fargo where I serve as the Adult Psychology Department Chair and have the honor of providing clinical care to patients and supervising students as they train to become part of the behavioral health workforce. I grew up in rural North Dakota and I have been with Sanford Health for more than 20 years.

Thank you for the opportunity to testify in opposition to HB 1430. I ask that you vote no on this bill.

I would like to start by also thanking the members of the House Human Services Committee for defining conversion therapy in this bill and for adding the statement: "It is an ethical violation for a licensee to conduct conversion therapy."

The bill's definition of conversion therapy and its unethical application are both correct and important as they recognize conversion therapy is a harmful and discredited practice that has been condemned by medical and psychological organizations around the world.

So why oppose the bill if it accurately defines the term conversation therapy and codifies the fact that conversion therapy is unethical? Two reasons:

- 1) The treatment outlined as not an ethical violation in the bill is actually a form of conversion therapy
- 2) The rationale for allowing this treatment – an individual's spiritual or personal beliefs – is not an acceptable reason to deviate from the underlying science that informs professional practice nor the ethical code that governs professional practice in behavioral health

The latter half of HB 1430 explains a process whereby an individual questioning their gender identity may seek services from a licensed social worker who may "... counsel an individual who is questioning their sexuality or gender and wants to align their sexuality or gender with the individual's personal or spiritual beliefs."

Further, section 4A states as a condition of engaging in practices or treatments under this section, the social worker "shall ensure the practice or treatment is in alignment with the individual's self-determination."

It appears that the legislation is referencing a situation where someone is dissatisfied with their gender or sexuality, and they seek care from a licensed social worker with the purpose to change their orientation. An example scenario that would fall under this guidance: A patient who is homosexual presents to a licensed social worker and asks the social worker to help make them identify as heterosexual.

Simply put, that is conversion therapy, also known as "reparative" or "reorientation" therapy.

HB 1430 defines this approach to treating patients as acceptable if – and because – it aligns with personal or spiritual beliefs. As I said above, personal or spiritual beliefs do not allow a profession to deviate from best practices of a profession, what scientific study has consistently demonstrated, or practices that professional ethics code prohibits.

The National Association of Social Workers specifically states that sexual orientation, gender identity and gender expression are irrefutable forms of identity and therefore condemns all forms of conversion practices. Further, NASW states “These practices stand in direct conflict with NASW’s professional code of ethics, and these practices represent a significant risk of harm by subjecting individuals to forms of treatment.”¹

There are numerous studies that have concluded conversion therapy is both ineffective and often harmful to the patient. A significant Cornell University study² reviewed 47 peer-reviewed studies and concluded “... there is no credible evidence that sexual orientation can be changed through therapeutic intervention.” And further, “There is also powerful evidence that trying to change a person’s sexual orientation can be extremely harmful. Taken together, the overwhelming consensus among psychologists and psychiatrists who have studied conversion therapy or treated patients who are struggling with their sexual orientation is that therapeutic intervention cannot change sexual orientation.”

I won’t belabor the research nor the negative impact conversion therapy is known to have on patients.

I think the two important points are that the practice outlined in this bill can be characterized as conversion therapy and personal or spiritual beliefs cannot authorize a licensed mental health provider to practice in a way that is an ethical violation of their profession and against accepted opinions of science.

In conclusion, I ask you to please vote no on HB 1430. Thank you for your consideration. I would be happy to answer any questions.

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¹ <https://www.socialworkers.org/Practice/LGBTQIA/Sexual-Orientation-and-Gender-Diversity>

² <https://whatweknow.inequality.cornell.edu/topics/lgbt-equality/what-does-the-scholarly-research-say-about-whether-conversion-therapy-can-alter-sexual-orientation-without-causing-harm/>