

Testimony in Opposition to House Bill 1430

Dear Members of the North Dakota Legislative Assembly,

I am here to strongly oppose this bill as it raises significant concerns about ethical practice, the protection of vulnerable populations, and the potential for harm to individuals seeking social work services.

The proposed bill attempts to prohibit conversion therapy while simultaneously creating a loophole that allows practices that may perpetuate the same harm under the guise of aligning with personal or spiritual beliefs. Specifically, I am concerned with the following points:

1. Ambiguity Around "Self-Determination" and Potential for Harm

While the bill emphasizes the importance of self-determination, it fails to account for the significant power dynamics between a licensed clinical social worker and their client. Individuals questioning their sexuality or gender identity, especially youth, are often subjected to external pressures from family, religious institutions, or cultural norms. These pressures can distort what might appear to be their "self-determined" choice, leaving them vulnerable to coercive practices disguised as legitimate counseling.

2. Inconsistencies with Established Ethical Standards

The National Association of Social Workers (NASW) <https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Code-of-Ethics-English> explicitly condemns conversion therapy as harmful and unethical. By creating space for social workers to engage in practices aligning a client's identity with personal or spiritual beliefs, this bill risks undermining the rigorous ethical standards that protect clients. Such language blurs the line between affirming care and potentially harmful interventions, creating confusion for practitioners and jeopardizing client well-being.

3. Risks to Mental Health and Well-Being

Research has consistently shown that any form of therapy aimed at changing an individual's sexual orientation or gender identity, even when framed as client-directed, can result in severe psychological distress. Depression, anxiety, self-harm, and suicide are well-documented consequences of such practices. The language of this bill could inadvertently reintroduce harmful practices, increasing risks for vulnerable populations already at a heightened risk of mental health challenges.

4. Need for Affirmative, Evidence-Based Care

Licensed social workers play a critical role in providing affirmative, evidence-based care to individuals navigating questions of sexuality and gender identity. The focus of such care should always prioritize acceptance and support, free from judgment or attempts to change fundamental aspects of identity. This bill's provisions conflict with evidence-based practices and the social work profession's core commitment to diversity, inclusion, and client empowerment.

5. Protection of Youth

This bill includes a provision requiring parental or guardian authorization for treatment. This can disproportionately harm minors questioning their identity in non-affirming family environments. Denying

minors access to unbiased, affirming care perpetuates harm and limits their ability to seek support from trained professionals who prioritize their well-being.

Conclusion

In summary, while I appreciate the bill's acknowledgment of the harms of conversion therapy, it introduces dangerous ambiguities that risk enabling unethical practices under the guise of client self-determination. I urge this committee to reject House Bill 1430 and instead focus on legislation that strengthens protections for LGBTQ+ individuals, ensures access to affirmative care, and upholds the highest ethical standards for social work practice.

Sincerely,

Jennifer Boub