

Available research does not support the use of conversion therapy as an effective method in the treatment of LGBT persons. Evidence shows that the practice may cause emotional or physical harm to these individuals, particularly adolescents or young persons

Conversion Therapy has consistently been debunked by the scientific community and is considered a pseudoscience. Sexual orientation cannot be changed. Many wish it could be, particularly those who are gay and their

families. Because being LGBT is not a choice, preference or lifestyle. Efforts to change orientation are cruel. Conversion therapy creates false hope, and research shows an increase of depression among its subjects.

If people view conversion therapy as a viable option, when it doesn't work, families as well as society at large becomes even less tolerant and rejection increases.

Twenty states and the District of Columbia have passed legislation which prohibits state licensed mental health practitioners from the use of conversion therapy with LGBT youth.

A number of prominent national professional health associations have made public statements opposing the use of conversion therapy because it is harmful and ineffective. These include the American Academy of Pediatrics, the American Academy of Child and Adolescent Psychiatry, the American Medical Association, the American Psychological Association, the National Association of Social Workers and numerous others..

Several of these associations have called on Congress and state legislatures to pass laws that ban conversion therapy and have endorsed the Therapeutic Fraud Prevention Act, a federal bill that would have prohibited the practice of conversion therapy, including the National Association of School Psychologists, the American Psychoanalytic Association, the American Counseling Association, and the American Academy of Pediatrics.

Please read the following public statements by some of these organizations regarding this unacceptable and harmful practice.

Substance Abuse and Mental Health Services Administration: maintains that being LGBTQ+ is not a mental disorder, points to lack of evidence that change efforts can alter sexual orientation or gender and considers change efforts inappropriate. Further, the statement warns that change efforts may be harmful.

American Academy of Child and Adolescent Psychiatry "The American Academy of Child and Adolescent Psychiatry finds no evidence to support the application of any therapeutic intervention operating under the premise that a specific sexual orientation, gender identity, and/or gender expression is pathological. Furthermore, based on the scientific evidence, the AACAP asserts that such conversion therapies (or other interventions imposed with the intent of promoting a particular sexual orientation and/or gender as a preferred outcome) lack scientific credibility and clinical utility. Additionally, there is evidence that such interventions are harmful. As a result, conversion therapies should not be part of any behavioral health treatment of children and adolescents."

American Academy of Pediatrics 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.

American Association for Marriage and Family Therapy, [T]he 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.

American College of Physicians The College opposes the use of conversion, reorientation, or reparative therapy for the treatment of LGBT persons. The belief that sexual orientation can be changed can only increase the probability of rejection by families and society at large, increasing the likelihood of depression, substance abuse and suicide.

American Counseling Association The 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 ACAs position and the Ethics Committees statement in opposition to the treatment. To do otherwise violates the spirit and specifics of the ACA Code of Ethics.

American Medical Association Aversion therapy (a behavioral or medical intervention which pairs unwanted behavior, in this case, homosexual behavior, with unpleasant sensations or aversive consequences) is no longer recommended for gay men and lesbians. Through psychotherapy, gay men and lesbians can become comfortable with their sexual orientation and understand the societal response to it.

American Psychiatric Association Psychotherapeutic modalities to convert or repair homosexuality are based on developmental theories whose scientific validity is questionable. Furthermore, anecdotal reports of cures are counterbalanced by anecdotal claims of psychological harm. In the last four decades, reparative therapists have not produced any rigorous scientific research to substantiate their claims of cure. Until there is such research available , [the American Psychiatric Association] recommends that ethical practitioners refrain from attempts to change individuals sexual orientation, keeping in mind the medical dictum to first, do no harm.

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

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.

The American Psychological Association 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 American Psychological Association concludes that there is insufficient evidence to support the use of psychological interventions to change sexual orientation;

Be it further resolved that the American Psychological Association 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 American Psychological Association 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.

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

National Association of Social Workers, Taken to the extreme, homophobia in social workers and other practitioners can lead to the use of conversion or reparative therapies, which are explicitly condemned by NASW.

. 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.

I am grateful to have an opportunity to submit this information and I am hopeful the information I have included it assists in legislative decision making for our state.

Policy should be dictated by research, not personal belief systems or ideas that seem intuitively right. The citizens of North Dakota should feel assured that legislative topics are well researched, and our elected officials are willing to take the time to seriously address any and all feedback.

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