

Sexual Orientation Change Efforts and LGBTQ Youth Mental Health

Sexual orientation change efforts (SOCE), sometimes referred to as ‘reparative therapy’ or ‘conversion therapy,’ are a range of dangerous and discredited practices aimed at changing one’s sexual orientation or gender identity or expression. These harmful practices are based on the false claim that being gay or transgender is a mental illness that should be cured. In fact, the American Psychiatric Association determined that homosexuality was not a mental illness, but a normal variant of human nature, in 1973. Unfortunately, young lesbian, gay, bisexual, transgender, and questioning (LGBTQ) people may be coerced and subject to these harmful SOCE practices, resulting in a range of negative outcomes including depression, substance abuse, and suicidality.

Do Sexual Orientation Change Efforts (SOCE) Work?

No. SOCE have not been proven to change a person’s sexual orientation by any credible scientific study. In fact, Dr. Robert Spitzer, whose research had previously been misused to support SOCE, has retracted his original claims, stating that all data regarding SOCE has been misinterpreted, and that there is no conclusive evidence that it works.¹ A study published in 2002 found that 88% of participants in reparative therapy failed to achieve a sustained change in their sexual behavior with only 3% reporting becoming heterosexual. Of the 8 respondents (out of a sample of 202) who reported a change in sexual orientation, 7 worked as ex-gay counselors or group leaders.²

Are SOCE condoned by major medical organizations?

No. SOCE are not condoned by the American Psychological Association, American Psychiatric Association, and The American School Counselor Association, The American Academy of Pediatrics, and the American Medical Association. 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....”³ The American Medical Association, “opposes, the use of ‘reparative’ or ‘conversion’ therapy that 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 homosexual orientation.”⁴

Are SOCE harmful for LGBTQ young people?

Yes. The American Psychiatric Association has made clear that, “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.”⁵ The Pan American Health Organization, a regional office of the World Health Organization, concluded that SOCE, “lack medical justification and represent a serious threat to the health and well-being of affected people.”⁶ Furthermore, SOCE creates divisions between young people and their families, creating family rejection of young people’s sexual orientation.⁷

How do young people experience SOCE?

Young people experience SOCE as a form of family rejection.⁸ The American Academy of Child and Adolescent Psychiatry, warns that efforts by a therapist to change a minor’s sexual orientation “may encourage family rejection and undermine self-esteem, connectedness and caring, important protective factors against suicidal ideation and attempts.”⁹

¹ Benedict Carey, *Psychiatry Giant Sorry for Backing Gay ‘Cure,’* (May 18, 2012), http://www.nytimes.com/2012/05/19/health/dr-robert-l-spitzer-noted-psychiatrist-apologizes-for-study-on-gay-cure.html?pagewanted=all&_r=0.

² Ariel Shidlo & Michael Schroeder, *SEXUAL CONVERSION THERAPY: ETHICAL, CLINICAL, AND RESEARCH PERSPECTIVES* 135-150 (2002).

³ American Psychological Association, *Resolution on Appropriate Affirmative Responses to Sexual Orientation Distress and Change Efforts* (2009).

⁴ American Medical Association, *H-160.991 Health Care Needs of the Homosexual Population* (1991).

⁵ American Psychiatric Association *Position Statement*, December 1998.

⁶ World Health Organization, *“Therapies” to change sexual orientation lack medical justification and threaten health* (May 2012), http://new.paho.org/hq/index.php?option=com_content&task=view&id=6803&Itemid=1926. See also *Pitcherskaia v. I.N.S.*, 118 F.3d 641 (9th Cir. 1997) (holding that involuntary psychiatric treatment to “cure” a person’s homosexuality may constitute persecution, even where the treatment is intended to benefit rather than punish).

⁷ Caitlin Ryan, et al., *Family Rejection as a Predictor of Negative Health Outcomes in White and Latino Lesbian, Gay, and Bisexual Young Adults*, *PEDIATRICS* 346 (2009).

⁸ *Id.*

How does family acceptance or rejection affect LGBTQ young people?

Young people who experience family rejection based on their sexual orientation face especially serious health risks.¹⁰ In one study, lesbian, gay, and bisexual young adults who reported higher levels of family rejection during adolescence 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.¹¹ Family acceptance is an important protective factor that has been shown to help prevent suicide behavior and mental health issues. In one study, fewer than half as many participants from highly accepting families reported suicidal thoughts in the past 6 months compared with those who reported low acceptance. Similarly, the prevalence of suicide attempts among participants who reported high levels of family acceptance was nearly half the rate of those who reported family acceptance.¹²

How can I help a young person who has been subject to SOCE?

Encourage the young person to seek help if they are suffering or feeling depressed. The Trevor Lifeline is free, confidential crisis intervention and suicide prevention lifeline, available 24/7 at **866-488-7386**. Family acceptance of a youth's sexuality or gender identity is another important way to reduce the risk of suicide or substance abuse for the youth. If the young person is experiencing anxiety or other symptoms of mental illness, psychotherapy by a licensed mental health practitioner is encouraged.¹³

Should schools refer students to SOCE treatment?

No. Schools may endanger LGBTQ students, foster a hostile atmosphere, and potentially open themselves to liability by referring students to SOCE or allowing SOCE-based programming. The American School Counselor Association has made clear that, "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."¹⁴

Has any legislation prohibiting SOCE been passed?

Yes. In 2012 California passed SB 1172 banning the practice of SOCE on persons younger than 18 years of age. Similar legislation has been introduced in New Jersey and Massachusetts. At the federal level Rep. Jackie Speier introduced the Stop Harming our Kids Resolution (H.Con.Res. 141), aimed at protecting LGBTQ youth from SOCE practices. Rep. Jackie Speier has also begun an investigation to see if Medicare or Tricare was used to reimburse SOCE practices.

Do bills prohibiting SOCE prevent religious counseling?

No. These bills are strictly designed to prevent licensed therapists from conducting SOCE.¹⁵ These bills do not affect ministers or persons conducting religious counseling; California Bill SB 1172 clarifies "this chapter shall not apply to any priest, rabbi, or minister of the gospel of any religious denomination when performing counseling services as part of his or her pastoral or professional duties".¹⁶ This only prevents ministers from practicing SOCE if they are acting as a licensed therapist when performing SOCE or claiming to be acting as a licensed therapist.¹⁷

For more information about sexual orientation change efforts (SOCE) and legislation which bans this dangerous and discredited practice, please contact Alison Gill, The Trevor Project Government Affairs Director, at 202-204-4730 or by email at alison.gill@thetrevorproject.org.

⁹ Jennifer Medicus, *Practice Parameter on Gay, Lesbian, or Bisexual Sexual Orientation, Gender Nonconformity, and Gender Discordance in Children and Adolescents*, 51 JOURNAL OF THE AMERICAN ACADEMY OF CHILD & ADOLESCENT PSYCHIATRY 9, 957-74 (2012).

¹⁰ Id.

¹¹ Caitlin Ryan, et al., *Family Rejection as a Predictor of Negative Health Outcomes in White and Latino Lesbian, Gay, and Bisexual Young Adults*, PEDIATRICS 346 (2009).

¹² Caitlin Ryan et al., *Family Acceptance in Adolescence and the Health of LGBT Young Adults*, 23 J. C. Adol. Psych. Nurs. 205 (Nov. 2010).

¹³ Id.

¹⁴ American School Counselor Association *Position statement: Gay, lesbian, transgendered, and questioning youth* (2007), www.schoolcounselor.org/content.asp?contentid=217

¹⁵ 2012 Cal A.L.S. 835

¹⁶ Cal. Bus. & Prof. Code § 4980.01(b)

¹⁷ 2012 Cal A.L.S. 835; Cal. Bus. & Prof. Code § 4980.01(b)