

HOUSE BILL REPORT

SB 5722

As Reported by House Committee On:
Health Care & Wellness

Title: An act relating to restricting the practice of conversion therapy.

Brief Description: Restricting the practice of conversion therapy.

Sponsors: Senators Liias, Walsh, Ranker, Pedersen, Rivers, Keiser, Fain, Frockt, Hunt and Kuderer.

Brief History:

Committee Activity:

Health Care & Wellness: 2/7/18, 2/16/18 [DP].

Brief Summary of Bill

- Establishes that the performance of conversion therapy by a licensed health care provider on a patient who is under 18 years old is unprofessional conduct.

HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

Majority Report: Do pass. Signed by 13 members: Representatives Cody, Chair; Macri, Vice Chair; Graves, Assistant Ranking Minority Member; Caldier, Clibborn, DeBolt, Harris, Jinkins, Riccelli, Robinson, Slatter, Stonier and Tharinger.

Minority Report: Do not pass. Signed by 2 members: Representatives Schmick, Ranking Minority Member; Maycumber.

Staff: Chris Blake (786-7392).

Background:

The Uniform Disciplinary Act (UDA) governs disciplinary actions for credentialed health care providers. The UDA defines acts of unprofessional conduct, establishes sanctions for such acts, and provides general procedures for addressing complaints and taking disciplinary action against a credentialed health care provider. Disciplinary responsibilities are divided

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between the Secretary of Health and the 16 health profession boards and commissions according to the profession that the health care provider is a member of and the relevant step in the disciplinary process.

Unprofessional conduct under the UDA includes a variety of acts such as negligence or malpractice, false advertising, convictions related to one's practice, current misuse of drugs or alcohol, betrayal of practitioner-patient privilege, practicing beyond the scope of one's profession, and misrepresentation or fraud related to the profession. Upon a finding of an act of unprofessional conduct, the disciplining authority may impose sanctions, including revocation or suspension of a license, restriction of practice, mandatory remedial education or treatment, monitoring of the practice, censure or reprimand, payment of a fine, corrective action, and refund of billing.

Summary of Bill:

The performance of conversion therapy by a licensed health care provider on a patient who is under 18 years old is unprofessional conduct. "Conversion therapy" is defined as a regime that seeks to change an individual's sexual orientation or gender identity. The term includes efforts to change behaviors or gender expressions or to eliminate or reduce sexual or romantic feelings toward individuals of the same sex.

Appropriation: None.

Fiscal Note: Available.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.

Staff Summary of Public Testimony:

(In support) This bill restricts the practice of conversion therapy which amounts to torture for young children. The practice ranges from physical abuse of children to talk therapy which regularly exposes children to the message that if they do not change their sexuality their lives will be meaningless and they will contract human immunodeficiency virus. Some children who receive conversion therapy face mental health challenges, including attempting suicide. This is a health issue for children. All children grow through similar developmental processes, however, LGBTQ children carry the additional burden of feeling marginalized. Lacking support from their family, schools, and community, LGBTQ children are at increased risk of depression, anxiety, substance abuse, and suicidal ideation. Devaluation and punishment toward the LGBTQ community still exists and may lead families to consider this kind of therapy. Clients have been told by therapists that being gay is a sin and that with enough therapy they can overcome this. Former conversion therapy clients are afraid of their family and community abandoning them. This bill will show that Washington is dedicated to the health of all residents and sends the message that it will no

longer tolerate this form of child abuse. This bill speaks to a fundamental issue that Washington values children and the lives of LGBTQ children. This legislation is necessary to protect LGBTQ youth.

In 2015 the federal Substance Abuse and Mental Health Services Administration and the American Psychological Association (APA) stated that conversion therapy or efforts to change an individual's sexual orientation or gender expression is a practice that is not supported by credible evidence and has been disavowed by behavioral experts. This practice is a technique that defines a very specific treatment outcome, such as gender conformity, which is not appropriate mental health treatment. The notion that there is an epidemic of adolescents flooding sex change clinics is based on one unreplicated study with inadequate data and is dangerously inaccurate. Recent research has found that many LGBTQ children have been subjected to or threatened with subjection to attempts to change their identity, and it is alarming how common this is.

There are nine states that have enacted similar legislation with bipartisan support and there no statistics that show a massive rise in suicide among LGBTQ youth following the enactment of bans on conversion therapy on minors. Federal courts have reviewed state laws that prohibit conversion therapy and have concluded that they protect public health. Court challenges to these bills have all failed.

(Opposed) Minors should have the privilege of seeking expert counsel in making decisions. Young people deserve the right to reach out to therapists and get the help that they are searching for. Patients have the right to resolve unwanted feelings, love who they want, and choose their gender identity. This bill seeks to deny minors access to the healthy talk therapy that they desire to help them live lives that are congruent with their beliefs. Voting against this bill will give young men and women a choice. Under this bill a therapist can only help if the feelings are toward someone of the opposite sex, not the same sex.

This therapy has helped some people to achieve a more fulfilling life and does not involve either coercion or psychological or physical abuse. Patients who have had conversion therapy have become more aware of their identity and feel less ashamed. Talk therapy is completely healthy, nonabusive, and noncoercive. People who have received this later in life wish they could have received it in their teens. In states that have conversion therapy bans, many therapists are afraid to see sexually-variant minors whose goal is change.

The APA has stated that sexual orientation and childhood gender dysphoria are fluid and frequently changed. There is currently increasing gender dysphoria among teen girls and they need talk therapy, not sex changes and this bill denies parents the right to choose therapy. This bill legislates gender dysphoric children on to the path of toxic chemicals, breast removal, potential castration, and more completed suicides, but forbids them talk therapy. Research shows that when talk therapy to change sexual attraction is done right, feelings of distress decrease and sense of well-being increases. Higher rates of suicide will occur if this bill is passed. This bill should be voted down before it contributes to the death of more young lives. Conversion therapy bans are dangerous and unjust.

Persons Testifying: (In support) Senator Liias, prime sponsor; Lucy Homans, Washington State Psychologist Association; Matt Goldenberg; Nicholas Oakley, Center for Youth Justice; and David Ward, Legal Voice.

(Opposed) Terry Trudel; Alberton Cargnano; Jeff Simunds; and Laura Haynes, National Task Force for Therapy Equality and American College of Pediatricians.

Persons Signed In To Testify But Not Testifying: Gretchen Stockman and Brian Tingley, Family Policy Institute; Michele Lewis; and Alexandra Montano, Washington State Board of Health.