

## Draft of USJS 2.3 — 7/9/21

# U. S. Joint Statement on Conversion Therapy

### Purpose and Overarching Position

The purpose of this initiative on efforts to change sexual orientation or gender identity is to protect the public by committing to end the practice of so-called conversion therapy in the US. This joint statement was signed by XX major medical and psychological professional organizations representing more than YY healthcare providers in the U.S. It represents a shared commitment to certain principles and guidelines when addressing the needs of people who are questioning their sexual orientation or gender identity. It is specifically concerned with the practice of so-called conversion therapy, also known as reparative or reorientation therapy, or by the terms of sexual orientation change efforts (SOCE) or gender identity change efforts (GICE).

### Background

Decades of research findings and clinical expertise have revealed that variations in sexual orientation and gender identity are a normal part of human development. Virtually all major medical and psychological professional associations have concluded that neither same-gender desire or behavior nor the expression of diverse gender identities or characteristics constitute, per se, a mental illness or pathology. Having same- or multi-gender attractions, behaviors, and desires and transgender, non-binary, and gender diverse identities and expressions are healthy. Most major professional associations already have position statements relative to Lesbian, Gay, Bisexual, Transgender, Questioning, Queer, and Non-binary (LGBTQ+) health and/or the ineffectiveness and potential harms of efforts to change sexual orientation.<sup>1</sup> Research

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<sup>1</sup> [https://policysearch.ama-assn.org/policyfinder/detail/\\*?uri=%2FAMADoc%2FHOD.xml-0-805.xml](https://policysearch.ama-assn.org/policyfinder/detail/*?uri=%2FAMADoc%2FHOD.xml-0-805.xml)

<https://www.apa.org/about/policy/sexual-orientation>

<https://www.apa.org/about/policy/resolution-gender-identity-change-efforts.pdf>

[http://www.socialworkers.org/diversity/new/documents/hria\\_pro\\_18315\\_socce\\_june\\_2015.pdf](http://www.socialworkers.org/diversity/new/documents/hria_pro_18315_socce_june_2015.pdf)

<http://www.psychiatry.org/file%20library/about-apa/organization-documents-policies/policies/position-2013-homosexuality.pdf>

<http://www.guideline.gov/content.aspx?id=38417#Section420>

[http://www.aamft.org/iMIS15/AAMFT/Content/about\\_aamft/position\\_on\\_couples.aspx](http://www.aamft.org/iMIS15/AAMFT/Content/about_aamft/position_on_couples.aspx)

<http://annals.org/article.aspx?articleid=2292051>

<http://www.counseling.org/news/updates/2013/01/16/ethical-issues-related-to-conversion-or-reparative-therapy>

and experience shared by scholars, clinicians, and patients have shown such efforts to be ineffective and harmful.<sup>2</sup> Thus, it raises profound ethical concerns when individuals are led to believe that they can or should change these aspects of their identity. Assertions that such change efforts are viable or desirable are not based on sound evidence. They can themselves be dangerous by exacerbating harmful stigma already suffered by sexual and gender minorities and by framing therapeutic practices in ways that conflict with scientific and ethical principles embraced by the therapeutic professions.

### Conversion Efforts Violate Core Ethical Principles of the Healthcare Professions.

This statement reflects and reinforces some of the core ethical principles of the health professions. Historically, the principle to “do no harm” has been a fundamental practice for healthcare professionals. The ethical principle of “Respect for People’s Rights and Dignity,” including the right of self-determination<sup>3</sup> requires that each individual is seen as

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<http://www.apsa.org/content/2012-position-statement-attempts-change-sexual-orientation-gender-identity-or-gender>

[http://www.schoolcounselor.org/asca/media/asca/PositionStatements/PS\\_LGBTQ.pdf](http://www.schoolcounselor.org/asca/media/asca/PositionStatements/PS_LGBTQ.pdf)

<http://www.cswe.org/File.aspx?id=85010>

[http://www.wpanet.org/detail.php?section\\_id=7&content\\_id=1807](http://www.wpanet.org/detail.php?section_id=7&content_id=1807)

<http://hrc-assets.s3-website-us-east-1.amazonaws.com//files/documents/SupportingCaringforTransChildren.pdf>

[https://www.aacap.org/AACAP/Policy\\_Statements/2018/Conversion\\_Therapy.aspx](https://www.aacap.org/AACAP/Policy_Statements/2018/Conversion_Therapy.aspx)

[http://www.jaacap.com/article/S0890-8567\(12\)00500-X/pdf](http://www.jaacap.com/article/S0890-8567(12)00500-X/pdf)

<sup>2</sup>[http://www.psychotherapy.org.uk/UKCP\\_Documents/policy/MoU-conversiontherapy.pdf](http://www.psychotherapy.org.uk/UKCP_Documents/policy/MoU-conversiontherapy.pdf)

<http://store.samhsa.gov/product/Ending-Conversion-Therapy-Supporting-and-Affirming-LGBTQ-Youth/All-New-Products/SMA15-4928>

[http://www.paho.org/hq/index.php?option=com\\_content&view=article&id=6803%3A2012-therapies-change-sexual-orientation-lack-medical-justification-threaten-health&catid=740%3Anews-press-releases&Itemid=1926&lang=en](http://www.paho.org/hq/index.php?option=com_content&view=article&id=6803%3A2012-therapies-change-sexual-orientation-lack-medical-justification-threaten-health&catid=740%3Anews-press-releases&Itemid=1926&lang=en)

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

<sup>3</sup> American Psychiatric Association (2000). *Therapies Focused on Attempts to Change Sexual Orientation (Reparative or Conversion Therapies): COPP Position Statement*. Retrieved July 10, 2016 from <https://www.psychiatry.org/file%20library/about-apa/organization-documents-policies/policies/position-2000-therapies-change-sexual-orientation.pdf>

a whole person supported in their right to explore, define, articulate, and live out their own identity.<sup>4</sup> For this reason, it is essential for clinicians to acknowledge the broad spectrum in which individuals may live positively and healthfully with their sexual orientation and gender identity/expression. In order to do so, it is necessary to have an equal understanding of and respect for sexual and gender minorities as well as the religious, spiritual, and other ideological values of individuals, families, and communities. The principle of “Integrity”<sup>5</sup> calls on healthcare professionals to ensure accuracy and truthfulness in their work and to avoid making fraudulent, deceptive, or unclear claims or promises to their patients, while the principle of “Justice” invites professionals to be sure that their biases, competence, and limitations do not unjustly interfere in their work. To ensure all healthcare providers adhere to the principle of “Beneficence and Nonmaleficence,” it is essential to recognize that a person is not mentally ill or developmentally delayed because they experience same-sex attractions or transgender, nonbinary, or diverse gender identities or expressions.<sup>6</sup> When a conflict with an individual’s sexual or gender identity or expression is present, the recommended focus of treatment is to comprehensively assess the sources of distress for the individual about their sexual orientation or gender identity and provide interventions to address such distress, without directly or indirectly pressuring the individual to identify one way or another. Treatment should also focus on creating a healthy, productive environment for patients to explore potential social or physical identity changes and their relationship to gender, sex, and sexual orientation. Exploration of issues pertaining to gender and sexuality, in a way that does not favor or presume a particular identity or experience, would *not* be considered conversion therapy.

Research or treatment approaches based on stigmatization of or efforts to change sexual orientation or gender identity violates the above core ethical principles. The focus of treatment when such individuals seek therapeutic assistance should be to reduce the distress such individuals experience regarding their sexual orientation or gender identity,<sup>7</sup> and healthcare providers should seek to grant those in their care the liberty to express their true identity without fear of stigma, pressure, or reprisal. Healthcare professionals should strive to acquire a full understanding of and respect for sexual and gender minorities at the same time and in the same ways as they appreciate the full range of people’s religious, spiritual, ideological and other values and experiences forged in families and communities around the world.

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<sup>4</sup> Reconciliation and Growth Project (2017). Resolving Distress Between Faith-Based Values and Sexual and Gender Diversity: A Guide for Mental Health Professionals. Retrieved February 21, 2017, from <http://www.reconciliationandgrowth.com/>

<sup>5</sup> American Psychological Association (2010). *Ethical Principles of Psychologists and Code of Conduct*. Retrieved July 2, 2016, from <http://www.apa.org/ethics/code>

<sup>6</sup> Reconciliation and Growth Project (2017).

<sup>7</sup> Ibid.

## Goals and Objectives

The signatories of this statement share a commitment to protecting the public from the risks and harms of conversion therapy and to ensuring full access to the benefits of ethical, affirmative healthcare for sexual and gender minorities. Given the fact that gender and sexual diversity is not associated with mental disorder, and given the lack of evidence showing that conversion therapy can effectively change sexual orientation or gender identity, and given the strong evidence that such change efforts can increase stigma and cause other harms to patients and their families, we urge all healthcare professionals to commit themselves to ensure that:

- The public is informed about the research on conversion therapy and the risks thereof;
- Affirmative behavioral, psychological, and emotional healthcare interventions are available to reduce the negative effects of minority stress for those experiencing individual or family conflict associated with sexual orientation or gender identity;
- Healthcare professionals are made aware of the ethical issues surrounding conversion therapy, including acquiring appropriate training to competently deal with requests for conversion therapy and to provide ethical support to clients in distress over their sexual orientation and/or gender identity;
- Healthcare professionals from various disciplines collaborate to promote individual and public health through education, advocacy, or social justice efforts about the risks and harms of conversion therapy.

## Roles and Responsibilities

This statement does not define a specific list of actions that every organization will carry out. Instead, it sets out a framework by which organizations may be guided in responding to the challenges of treating individuals who present with concerns about their sexual orientation or gender identity. In general, the statement's signatories agree to accept the following roles and responsibilities:

- Each organization will review its codes of ethical conduct for members and consider the need for the creation of specific amendments to those codes. Professional associations will ensure that their members have access to the latest information regarding the potential risks and harms of conversion therapy;
- Organizations will work together to create a shared information resource on the potential risks and harms of conversion therapy to assist both professionals and members of the public in accessing up-to-date research on the matter;
- Those with a responsibility for clinical and academic training, and those responsible for continuing professional development, will work to ensure that such programs provide healthcare providers with a sufficient degree of cultural competence to work effectively with sexual and gender minority clients;
- Clinicians who are not sufficiently trained around issues of sexual orientation and/or gender identity/expression will make every effort to seek appropriate

- training or consultation or to connect patients with clinicians and agencies who are trained to provide culturally competent clinical care;
- Auditing and accrediting organizations will review their current guidelines and policies for practitioners and training organizations to assess the need for more specific standards to demonstrate awareness of and compliance with policies regarding conversion therapy.

We aim to end the use of ineffective and harmful mental health practices; build greater social acceptance of sexual and gender minorities of all ages; account for developmental considerations in each stage of life; and encourage the provision of, and access to, appropriate, affirmative therapies for all individuals who seek treatment. Understanding and supporting the experiences of sexual and gender minorities will help reduce health disparities and improve the health and wellbeing of these individuals, their families and their communities. This joint statement is a collaborative effort that underscores the depth of our commitment to the ethical treatment of those at risk from conversion therapy.

#### Review

The undersigned organizations will review the statement 12 months after publication.

#### Notes:

(The footnotes will be copied here as endnotes once the document is ratified.)