

DATE: February 14, 2017
TO: House Health, Education and Welfare Committee
RE: Support for H - 5277: This act would prohibit "conversion therapy" by licensed health care professionals with respect to children under eighteen (18) years of age.

The National Association of Social Workers – Rhode Island Chapter (NASW) is in opposition to any use of what is referred to as “conversion or reparative therapy” in relation to sexual orientation. Our national organization’s policy statement is:

NASW reaffirms this stance against reparative therapies and treatments designed to change sexual orientation or to refer clients to practitioners or programs that claim to do so. (NASW Policy Speaks. 2012.)

Reparative or Conversation Therapy is inappropriate and harmful because sexual orientation is not a mental health condition either by the standards of social work therapeutic practice or in the DSM 5. In essence, to suggest a therapy for a condition that does not exist would be considered malpractice from our perspective and clinical standards. If an individual is exploring sexual orientation and wishes professional assistance in the process, certainly there is nothing wrong with working with a therapist to do so, but by no means would a therapist attempt to change the sexual orientation of a person. That process, as indicated by studies, can be very damaging.

In addition, other professional groups also have statements against the use of conversion therapy. The American Academy of Pediatrics’ statement is as follows:

Therapy directed specifically at changing sexual orientation is counter indicated. This can provoke guilt and anxiety while having little or no potential for achieving changes in orientation.

The American Medical Association provides the following statement:

Opposes, the use of reparative or conversion therapy that is based upon the assumption that homosexuality is a mental disorder or based upon the prior assumption that the patient should change his/her homosexual orientation.

The American Psychological Association’s policy regarding conversion therapy in adolescents and children is as follows:

We are concerned that such interventions may increase the stigma, stress, and ultimately the stress of children and adolescents. We have serious concerns that the coercive or involuntary

treatment to children or adolescents has the potential to be harmful and may potentially violate current clinical and practice guidelines, standards for ethical practice, and human rights.

The National Association of Social Workers - Rhode Island Chapter opposes reparative or conversion therapy not just on clinical grounds, but also from civil and human rights perspectives. The scope of this problem is not known because the therapies are being offered by non-licensed individuals without consent or knowledge of local, state or federal governments. For this reason, we think this law is absolutely necessary so that when and if individuals attempt to coerce a person into receiving such therapy or a professional is offering such therapy, we have grounds to intervene before harm is done.

If you have any questions regarding this written testimony, please feel free to contact me at 401-274-4940 or rhodeislandnasw@gmail.com.

Respectively Submitted,

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Executive Director