

Submitter: Sylas Veit

On Behalf Of:

Committee: House Committee On Behavioral Health and Health Care

Measure: HB2458

I am a mental health therapist who primarily works with queer and transgender clients, including drafting letters of support for gender affirming care. Conversion "therapy" sharply increases the likelihood that a youth who identifies as LGBTQ will attempt suicide, as well as increases the chances that they will have multiple suicide attempts when compared with other LGBTQ youth. LGBTQ youth already have a higher rate of self harm and suicide rates than non-LGBTQ youth due to the marginalization and social stigma that deems them inferior to youth who are cisgender and heterosexual. Conversion "therapy" is not a reliable practice in terms of "achieving" conversion and is inherently coercive to young people who are dependent on guardians and may not be able to opt out of conversion "therapy" without risking homelessness and/or abuse. Allowing licensed health professionals, including mental health clinicians, to engage in this practice tacitly endorses the perspective that being a queer and/or transgender person is wrong and must be extinguished systematically when one's parents or other loved ones deem it necessary.

A common tactic used in conversion therapy is "aversion," in which a person is "subjected to a negative, painful or distressing sensation while being exposed to a stimulus connected to their sexual orientation," per the Human Rights Council. This method, alongside others including pharmacological interventions, amounts to torture and inherently violates human rights. Even if it were possible or desired to change one's sexual orientation, gender identity, and other important identity markers (and no evidence suggests this is true), such insidious and extreme tactics would not be necessary. It is most appropriate to meet those who are having concerns about their gender and/or sexuality with kindness, compassion, and interest, not the coercion, shame, or abuse that characterize conversion "therapy." While my testimony has focused on LGBTQ youth, no person of any age should be subjected to practices that rely heavily on shame, coercion and abuse to achieve outcomes that are associated with health (even when the outcomes are desired by a client or patient). Much like there are ethical and legal standards that prohibit medical professionals from using any-means-necessary to treat a patient who has expressed a desire for a particular treatment, Oregon cannot allow conversion "therapy" to be performed, on the basis that it is ethically reprehensible and academically indicated to be an ineffective, harmful form of "treatment" of something that is not an illness or disease.

Oregon is known for being particularly welcoming to LGBTQ persons, though more work must be done to extend these rights to LGBTQ Oregonians of color. Banning conversion "therapy" is not only appropriate, it is required to foster wellness in those

who are already facing discrimination in housing, employment, medical care, and other important areas of social life and human rights. Please support HB 2458 so Oregon can protect ALL people who are under the LGBTQ umbrella and no longer allow pseudoscience to influence or direct the care of a vulnerable population.