**Protecting Youth from the Dangerous Practice of Conversion Therapy**

Few practices hurt LGBTQ youth more than attempts to change their sexual orientation or gender identity through conversion therapy. Conversion therapy has been condemned by every major medical organization in the country, and the U.S. Substance Abuse and Mental Health Services Administration recently concluded that such interventions are “coercive, can be harmful, and should not be part of behavioral health treatment.” Fortunately, state officials can help limit the practice of conversion therapy using executive authority.

**What is conversion therapy?** [Conversion therapy](https://www.aacap.org/aacap/policy_statements/2018/Conversion_Therapy.aspx), also known as “reparative therapy,” is the dangerous practice of attempting to change an individual’s sexual orientation or gender identity. Conversion therapy methods may include aversion therapy, talk therapy, shaming, hypnosis, or other techniques.

**How common is conversion therapy?** [More than 698,000 LGBTQ adults](https://williamsinstitute.law.ucla.edu/wp-content/uploads/Conversion-Therapy-LGBT-Youth-Update-June-2019.pdf) (ages 18-59) have been subjected to some form of conversion therapy, including around 350,000 LGBTQ adults who received it as adolescents. An estimated [16,000 LGBTQ youth](https://williamsinstitute.law.ucla.edu/demographics/conversion-therapy-and-lgbt-youth/) (ages 13-17) will receive conversion therapy from a licensed health care professional before they reach age 18, and [2 in 3 LGBTQ](https://www.thetrevorproject.org/wp-content/uploads/2019/06/The-Trevor-Project-National-Survey-Results-2019.pdf) youth report that someone has tried to convince them to change their sexual orientation or gender identity.

**Who opposes conversion therapy?** Major medical and scientific and education associations—including the American Medical Association, the American Academy of Pediatrics, the National Education Association, and the National Association of Social Workers—[strongly oppose](https://www.lambdalegal.org/publications/health-and-med-orgs-stmts-on-sex-orientation-and-gender-identity) the practice of conversion therapy on minors. The practice lacks scientific credibility, is unethical, and operates under the misguided belief that being LGBTQ is a disorder that requires treatment.

The American Psychological Association, for instance, confirms that conversion therapy can pose critical health risks to LGBTQ minors such as increased risks of depression, suicidality, and substance use disorder. The American Medical Association refers to conversion therapy as “clinically and ethically inappropriate,” and the National Association of Social Workers affirms that conversion therapy “can negatively affect one’s mental health and cannot and will not change sexual orientation or gender identity.”

**Do states restrict or ban conversion therapy?** Yes. Recognizing that conversion therapy poses serious health risks to LGBTQ minors, [19 states and the District of Columbia](https://www.lgbtmap.org/equality-maps/conversion_therapy) have passed laws prohibiting licensed mental health and medical professionals from performing conversion therapy on minors. More than 50 local jurisdictions across the United States have also banned the practice, and many state professional licensing boards (such as the Ohio Counselor, Social Worker, and Marriage and Family Therapist Board) have issued guidance confirming that conversion therapy is not part of legitimate mental health treatment.

Governors and state officials have also taken steps to restrict or ban conversion therapy even in the absence of legislation. State leaders have recently used executive action to address conversion therapy as follows:

* In **New York**, Governor Cuomo [directed](https://www.governor.ny.gov/news/governor-cuomo-announces-executive-actions-banning-coverage-conversion-therapy) the Department of Financial Services, the Office of Mental Health, and the Department of Health to issue regulations 1) barring the coverage of conversion therapy by state-regulated private health insurers and the Medicaid program; and 2) prohibiting state-licensed or -funded mental health facilities from practicing conversion therapy on minors. Governor Cuomo took this action in 2016, paving the way for a comprehensive legislative ban in 2019.
* In **North Carolina**, Governor Cooper issued an [executive order](https://governor.nc.gov/documents/executive-order-no-97-protecting-minors-conversion-therapy) to prohibit the use of state or federal funds for conversion therapy. The order directs the Department of Health and Human Services to disallow the payment of state and federal funds, including Medicaid funding and mental health funding, for conversion therapy on minors. Although the order’s protections are not as comprehensive as pending legislation, Governor Cooper’s leadership brought much-needed attention to this issue and helped educate policymakers and the media on the dangers of conversion therapy.
* In **Utah**, Governor Herbert [directed](https://www.sltrib.com/news/politics/2019/06/27/watch-live-utah-gov-gary/) the Division of Occupational and Professional Licensing to work with the four boards that it oversees, beginning with the Psychologist Licensing Board, to issue rules that ban the practice of conversion therapy on minors. The rules—which were modeled after failed legislation during the 2019 session—received [nearly unanimous support](https://www.sltrib.com/news/politics/2019/11/27/gov-herbert-announces/) during the public comment process and went into effect in January 2020, making Utah the [19th state](https://www.npr.org/2020/01/22/798603313/utah-becomes-latest-state-to-ban-discredited-lgbtq-conversion-therapy) in the country to ban conversion therapy on minors. No additional legislation is needed in Utah.
* In **Virginia**, the Department of Health Professions—working closely with Governor Northam and Attorney General Herring—has [coordinated](https://wtkr.com/2019/04/05/state-health-officials-in-virginia-take-steps-to-ban-conversion-therapy/) an effort among its five major boards (Psychology, Counseling, Medicine, Nursing, and Social Work) to each issue new guidance and then new regulations to ban the practice of conversion therapy on minors. Although each board must meet and vote separately on new guidance and regulations, this process (once complete) will make Virginia the 20th state to ban conversion therapy on minors. Although no additional legislation will be needed in Virginia, legislative protections are [expected to advance](https://www.newsweek.com/virginia-could-become-20th-state-ban-gay-conversion-therapy-after-bill-passes-state-senate-1483540) during the 2020 legislative session.

**Are there limits to how states can limit conversion therapy using executive action?** Yes. The use of executive action has varied significantly by state based on the way that mental and behavioral health providers are licensed and regulated. Some states, such as Utah and Virginia, have consolidated their licensing boards under a single state agency. This structure enables each board or the entire agency to adopt streamlined rules—often rules that are as strong as what would have been adopted in legislation—to prohibit conversion therapy on minors. In other states, however, these boards operate independently (i.e., the boards are not consolidated under a single state agency). In these states, such as New York and North Carolina, governors have less authority to direct boards to take similar action and thus may be limited to restricting the use of state and federal funds (such as Medicaid or mental health funding) for conversion therapy.