

January 12, 2023

To: Joint Committee for Review of Administrative Rules.

Re: Suspension of Marriage and Family Therapy, Professional Counseling, and Social Examining Board Rule Conversion Therapy.

From: Disability Rights Wisconsin, Ellie Jarvie, Lead Advocacy Specialist

Chairman Nass, Chairman Neylon, and members of the Committee, thank you for the opportunity to address the Joint Committee for Review of Administrative Rules on the need to retain the current ban on conversion therapy contained in the Conduct Code for social workers, marriage and family therapist and professional counselors.

I am Ellie Jarvie, a licensed social worker and Lead Advocacy Specialist at Disability Rights Wisconsin speaking to you today on its behalf. Disability Rights Wisconsin (DRW) is the federally mandated Protection and Advocacy system for the State of Wisconsin, charged with protecting the rights of individuals with disabilities and keeping them free from abuse and neglect. We ask that you oppose the attempt to suspend the rule banning Conversion Therapy.

As Wisconsin's Protection and Advocacy system we take an active interest in those issues that can have a significant and direct impact on the lives of the individuals we serve. Recent data indicates that LGBT people are more likely to have a disability than the general population. For example, in a survey of more than 26,000 transgender people, 39% reported having a disability. Additionally, the data shows that one in three lesbians and one in three bisexual women report having a disability in a population-based survey.¹ Therefore, DRW offers this testimony in an effort to make sure that people with disabilities are offered safe, effective and evidence-based treatments.

Conversion therapy does not meet any of these criteria.

Conversion Therapy is based upon the false belief that being gay, lesbian, bisexual or transgender is a sickness or disorder requiring Conversion/Reparative Therapy. Sexual orientation and gender identity are not mental disorders or diseases. There is no scientific evidence that sexual orientation change efforts (Conversion/Reparative Therapy) are effective in "curing" someone of being LGBT.

In fact, conversion therapy is generally recognized as harmful and opposed by the following professional groups:

American Academy of Child Adolescent Psychiatry
American Academy of Pediatrics,
American Association of Marriage and Family Therapy
American College of Physicians
American Counseling Association
American Medical Association
American Psychiatric Association
American Psychoanalytic Association
American Psychological Association
American School Counselor Association
National Association of Social Workers
Pan American Health Organization
Regional Office of the World Health Organization
World Psychiatric Association

In addition, the Substance Abuse and Mental Health Services Administration of the US Department of Health and Human Services has also strongly condemned this practice.

A 2020 report by the Williams Institute at UCLA School of Law made these key findings which document the harmful consequences of conversion therapy:

- Approximately 7% of LGB people in the U.S. have experienced conversion therapy: 81% received it from a religious leader and 31% received it from a health care provider. Some people received it from both religious advisors and health care providers.
- The odds of experiencing conversion therapy were greater among people who as children lived with a parent or another adult who was depressed, mentally ill, or suicidal; lived in a household with parental intimate partner violence; or reported emotional, physical, or sexual abuse.
- LGB people who experienced conversion therapy showed greater odds of having suicidal thoughts and attempts compared to LGB people who had not experienced conversion therapy:
 - o 92% greater odds of lifetime suicidal ideation
 - o 75% greater odds of planning to attempt suicide
 - o 88% greater odds of attempting suicide resulting in no or minor injury ²

Furthermore, the lead author of this report has commented that leading medical and social services organizations condemn the practice of conversion therapy as ineffective and harmful

and outreach to the public on the harms of conversion therapy is needed, particularly in areas where the practice is commonly used.³

It has been my experience that all too often, youth with disabilities are not seen as whole people and get very little support or education around issues of sexuality, so are left with incomplete and fractured information, and few resources to address their sexuality in general. Parents often struggle to get basic supports and services for their kids with disabilities, and will turn to a variety of resources, including religious-based services for support. Without a full understanding of the damage that conversion therapy can do, they may select what seems to be a good support for their child. Too often, as I just outlined, conversion therapy leaves youth with more mental health issues. Those of us with disabilities may have additional struggles with our sexuality for other reasons as well. We see the barriers and discrimination that people who identify as LGBT plus face. We already face barriers and discrimination in our day-to-day life navigating our disability. If there is a way that promises to help us blend in and be “normal” it can be tempting to go down this road. In addition, youth may be sensitive to the strain that pursuing supports and navigating a world that is not accessible can cause their family, and feel they are a burden.

A study in the journal of developmental psychology outlines the risks of unsupportive environments. The results suggest that feeling like a burden to "people in their lives" is a critical mechanism in explaining higher levels of depression and suicidal ideation among LGBT youth.⁴

But there can be a better way. My own experience growing up with Tourette Syndrome in Green Bay was filled with difficulties. My mother was an advocate to get me the supports and services I needed to thrive. This included individual therapy. Luckily, we selected an ethical therapist who understood the importance of acceptance and support. My family and I also had the support of our church, where we could see LGBT people who served as leaders in our church and community. It wasn't always easy, yet these communities gave me nurturing and encouragement which has allowed me to be a fully functioning adult. This includes serving as a foster and respite parent for ten years with my partner. Together, we have seen firsthand the damage done when youth do not have the resources and support they need, and the difference that can be made when quality support and treatment is provided so that they can become successfully functioning adults.

I work for the day that this can be the experience of all residents of Wisconsin. For the protection of people with disabilities, and for all of us who identify at LGBT, Disability Rights Wisconsin urges you to resist any efforts that would allow conversion therapy to be offered as standard treatment in our state, and to maintain the current rule which was informed by a broad consensus of this state's mental health professionals.

¹ Movement Advancement Project. July 2019. LGBT People with Disabilities. <https://www.lgbtmap.org/lgbt-people-disabilities>.

² John R. Blosnich, Ph.D., M.P.H., Emmett R. Henderson, M.S., Robert W.S. Coulter, Ph.D., M.P.H., Jeremy T. Goldbach, Ph.D., M.S.S.W, and Ilan H. Meyer, Ph.D. (2020) Sexual Orientation Change Efforts, Adverse Childhood Experiences, and Suicide Ideation and Attempt Among Sexual Minority Adults, United States, 2016–2018, Research and Practice

³ UCLA Williams Institute School of Law, <https://williamsinstitute.law.ucla.edu/press/lgb-suicide-ct-press-release/> June 15, 2020

⁴ Baams, Grossman and Russel, (2015) Minority stress and mechanisms of risk for depression and suicidal ideation among lesbian, gay, and bisexual youth, *Developmental Psychology*, May;51(5):688-96.