

SB 201 Conversion Therapy Proposed Amendment Rationale

Inasmuch as I am opposed to conversion therapy in all of its aversive and demeaning ways, I feel that the bill can be refined to protect the agency and health of the “questioning” youth.

I believe that there are some people who will have depression, anxiety or other mental illnesses separate and distinct from any gender identification identities. These people deserve the right to be treated by competent and accessible professionals. This should not be considered conversion therapy.

I worry that, if a professional counselor of any kind is serving in an ecclesiastical calling and is approached by a questioning youth, he/she should be able to mentor and protect the agency and self-determination of the youth without having such interaction be called conversion therapy. Likewise, he/she cannot break the confidentiality bond of clergy from such interaction. Having been trained as a physician and having served as a bishop, I have had to have had a “Chinese wall” between my two roles. Both roles have been to help and not harm or limit the agency of an individual. Surely, also, no one would be doing a person a favor by remaining silent about the dangers of unsafe sex, which is a “behavior”. Thus, warning of the possible risks of such behavior should not be considered “conversion therapy”.

That is why I have proposed the amendment 4025 to SB201. Removing “behaviors”; substituting “a” for “any”; and clarifying the role of the “psychotherapist” so a “questioning” youth would not be frozen out of seeking a mentor who is trusted and competent.

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