



GLOBAL ALLIANCE
for Behavioral Health and Social Justice

Resolution on Protecting LGBTQ+ Minors & Young Adults from Conversion Therapy Practices

An official statement from the Global Alliance for Behavioral Health and Social Justice (formerly the American Orthopsychiatric Association)



As a behavioral health organization that embeds its work in principles of human rights, respect, and self-determination, the Global Alliance firmly supports legislation protecting LGBTQ+ children, adolescents and young adults from being subject to conversion therapy by licensed professionals. Conversion therapy consists of practices employed by licensed professionals or clergy to change, suppress or divert an individual's sexual orientation, gender identity or expression. Such practices have been disavowed by mental health and medical organizations for lacking scientific rigor and being unethical. Conversion therapy practices hold no therapeutic value and cause harm to individuals who are subject to them. It is our collective duty as a society to protect minors and young adults, who are vulnerable and still in development, from harm.

Conversion therapy practices are based on the premise that individuals who identify as LGBTQ+ are abnormal, pathological, and need to be "repaired." Research shows that same-gender sexual attractions or variations in gender identity and expression are normative aspects of human diversity and are not mental health disorders; therefore, seeking treatment to change an individual's sexual orientation, gender expression or identity is not evidence-driven practice. Recently, proponents of conversion therapy have begun referring to the harmful and unethical practices as Sexual Attraction Fluidity Exploration in Therapy (SAFE-T). The goal behind this seemingly innocuous framing is to try and counteract the negative outcomes associated with "reparative" or "conversion" therapy. Despite being widely recognized as harmful and tantamount to torture according to the UN Human Rights Council, conversion therapy continues to be used in many parts of the world.

- Only three (3) UN Member countries: **Brazil, Ecuador and Malta** have enacted nationwide laws that restrict conversion therapies for minors and adults
- Only **20 U.S. states and Washington D.C.** have laws **banning conversion therapy for LGBTQ+ minors under age 18** by licensed mental health practitioners
- **No states or Washington D.C.** have laws protecting LGBTQ+ minors against conversion therapy from **religious clergy or spiritual advisors**
- **698,000 adults** in the U.S. have been subjected to conversion therapy during their lifetime
- **20,000 LGBTQ+ youth** in the U.S. will receive conversion therapy from a licensed healthcare professional in the 30 states that do not have any protective policies addressing conversion therapy
- **57,000 LGBTQ+ youth** in the U.S. will receive conversion therapy from a religious or spiritual advisor

Minors are especially vulnerable to conversion therapy. The mental health impact is clear - young people who perceive high levels of rejection and discrimination from their families, communities or institutional systems because of their LGBTQ+ identity, are:

- More than **8x** as likely to have **attempted suicide**
- More than **2x** as likely to **experience homelessness**
- Nearly **6x** as likely to report **high levels of depression**
- More than **2x** as likely to be **trafficked** for sex in exchange for necessities

In keeping with our values and our commitment to human rights, and as global momentum grows, the Global Alliance urges United States and countries worldwide to pass nationwide laws protecting LGBTQ+ children, adolescents and young adults from conversion therapy (and similar practices with ever-changing names) by licensed practitioners. The Global Alliance also supports the recommendations laid forth by the professional consensus of the American Psychological Association (APA), the American Psychiatric Association, the National Association of Social Workers (NASW), and the Substance Abuse and Mental Health Services Administration (SAMHSA) in favor of therapies that support and affirm LGBTQ+ identifying individuals. Halting conversion therapy practices cannot be tackled in isolation, and the Global Alliance shares the commitment to promoting laws, policies, and programming that affirm, support, and value LGBTQ+ people.

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Additional Resources

[Universal Declaration of Human Rights](#)

Statements by National Associations:

[American Psychological Association Resolution on Appropriate Affirmative Responses to Sexual Orientation Distress and Change Efforts](#)

[American Psychiatric Association Reiterates Strong Opposition to Conversion Therapy](#)

[Sexual Orientation Change Efforts \(SOCE\) and Conversion Therapy with Lesbians, Gay Men, Bisexuals, and Transgender Persons Position Statement \(National Association of Social Workers\)](#)

[Ending Conversion Therapy: Supporting and Affirming LGBTQ Youth](#)

[Conversion Therapy and LGBTQ Youth Update – UCLA Williams Institute](#)

Ryan, C. (2020) Parent-initiated sexual orientation change efforts with LGBT adolescents: Implications for young adult mental health and adjustment, *Journal of Homosexuality*, 67, (2), 159-173.
<https://doi.org/10.1080/00918369.2018.1538407>

Schroeder, M. (2002) Ethical issues in sexual orientation conversion therapies: An empirical study of consumers, *Journal of Gay & Lesbian Psychotherapy*, 5, 3-4, 131-166, https://doi.org/10.1300/J236v05n03_09

Relevant Articles in the American Journal of Orthopsychiatry

Holley, L. C., Oh, H., & Thomas, D. (2019). Mental illness discrimination and support experienced by people who are of color and/or LGB: Considering intersecting identities. *American Journal of Orthopsychiatry*, 89(1), 16–26. <https://doi.org/10.1037/ort0000360>

la Roi, C., Meyer, I. H., & Frost, D. M. (2019). Differences in sexual identity dimensions between bisexual and other sexual minority individuals: Implications for minority stress and mental health. *American Journal of Orthopsychiatry*, 89(1), 40–51. <https://doi.org/10.1037/ort0000369>

Shramko, M., Toomey, R. B., & Anhalt, K. (2018). Profiles of minority stressors and identity centrality among sexual minority Latinx youth. *American Journal of Orthopsychiatry*, 88(4), 471–482. <https://doi.org/10.1037/ort0000298>

Williams, S. M., Frey, L. M., Stage, D. L., & Cerel, J. (2018). Exploring lived experience in gender and sexual minority suicide attempt survivors. *American Journal of Orthopsychiatry*, 88(6), 691–700. <https://doi.org/10.1037/ort0000334>

Coulter, R. W. S., Kessel Schneider, S., Beadnell, B., & O'Donnell, L. (2017). Associations of outside- and within-school adult support on suicidality: Moderating effects of sexual orientation. *American Journal of Orthopsychiatry*, 87(6), 671–679. <https://doi.org/10.1037/ort0000209>

Hatchel, T., Espelage, D. L., & Huang, Y. (2018). Sexual harassment victimization, school belonging, and depressive symptoms among LGBTQ adolescents: Temporal insights. *American Journal of Orthopsychiatry*, 88(4), 422–430. <https://doi.org/10.1037/ort0000279>

How you can help

- Join our LGBTQ+ Taskforce. Learn more at <https://www.bhjustice.org/lgbtq->
- Sign the Born Perfect Campaign to End Conversion Therapy Pledge, launched by the National Center for Lesbian Rights, to support LGBTQ Youth. Learn more at https://p2a.co/RLyUaHm?response_type=embed
- Use the advocacy and legislation toolkit created by The Trevor Project & National Center for Lesbian Rights to lobby your representatives and senators for **federal regulations protecting LGBTQ+ children, adolescents and young adults up to the age of 25 from conversion therapy practices**. The toolkit PDF is here: <http://www.nclrights.org/wp-content/uploads/2014/06/Conversion-Therapy-Toolkit.pdf>