

Executive Summary: Health Impact Review of SB 5870

Prohibiting the Use of Aversion Therapy in the Treatment of Minors

Evidence indicates that SB 5870 has potential to mitigate harms and improve health outcomes among lesbian, gay, bisexual, transgender, queer, and questioning (LGBTQ) patients, a population that is disproportionately impacted by poor health outcomes, thereby decreasing health disparities.

BILL INFORMATION

Sponsors: Representatives Liias, Litzow, Pedersen, Fain, Ranker, Rivers, Frockt, Cleveland, Mullet, Kohl-Welles, Keiser, Chase, Billig, Hasegawa, Darneille, Habib

Summary of Bill:

- Expands the list of acts that constitute unprofessional conduct by a licensed health care provider to include performing prohibited aversion therapies, including sexual orientation change efforts, on a patient under age 18.
- Defines “prohibited aversion therapy” as a practice, treatment or therapy involving sexual orientation change efforts, or electrical shock or extreme temperatures intended to cause pain, discomfort or unpleasant sensations to the client or patient, except electroconvulsive therapies provided in accordance with guidelines set forward by the American Psychiatric Association and National Institute of Mental Health.
- Defines “sexual orientation change efforts” as any regimen that seeks to change an individual’s sexual orientation—including efforts to change behaviors or gender expressions, or to eliminate or reduce sexual or romantic attractions or feelings toward individuals of the same sex. The definition does not include psychotherapies that promote acceptance, support, and understanding or facilitate coping, social support, and identity exploration, or provide interventions to address unlawful conduct or unsafe sexual practices, as long as they do not seek to change sexual orientation.

HEALTH IMPACT REVIEW

Summary of Findings:

This health impact review found the following evidence regarding the provisions in SB 5870:

- A fair amount of evidence that prohibiting the use of specific aversion therapies in the treatment of minors would decrease the risk of harm and improve health outcomes for LGBTQ patients.
- Very strong evidence that LGBTQ adults and youth disproportionately experience many negative health outcomes, and therefore mitigating any emotional, mental, and physical harm among this population has potential to decrease health disparities.

FULL REVIEW

For review methods, logic model, strength-of-evidence analyses, and citations of empirical evidence refer to the full health impact review: <http://sboh.wa.gov/Portals/7/Doc/HealthImpactReviews/HIR-2015-05-SB5870.pdf>

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