

MAINE STATE LEGISLATURE

The following document is provided by the
LAW AND LEGISLATIVE DIGITAL LIBRARY
at the Maine State Law and Legislative Reference Library
<http://legislature.maine.gov/lawlib>



Reproduced from scanned originals with text recognition applied
(searchable text may contain some errors and/or omissions)

Majority

SMG
ROBS

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35

L.D. 1025

Date: 5/7/19

Majority

(Filing No. H-213)

HEALTH COVERAGE, INSURANCE AND FINANCIAL SERVICES

Reproduced and distributed under the direction of the Clerk of the House.

**STATE OF MAINE
HOUSE OF REPRESENTATIVES
129TH LEGISLATURE
FIRST REGULAR SESSION**

COMMITTEE AMENDMENT "A" to H.P. 755, L.D. 1025, Bill, "An Act To Prohibit the Provision of Conversion Therapy to Minors by Certain Licensed Professionals"

Amend the bill in section 1 in subsection 2-A in the 2nd to last line (page 1, line 6 in L.D.) by striking out the following: "within the last 5 years"

Amend the bill in section 2 in subsection 3 in the 3rd line (page 1, line 12 in L.D.) by striking out the following: "within the last 5 years"

Amend the bill in section 4 in §59-C by striking out all of subsection 1 (page 1, lines 32 to 36 and page 2, lines 1 to 10 in L.D.) and inserting the following:

1. Conversion therapy. "Conversion therapy" means any practice or treatment that seeks or claims to change an individual's sexual orientation or gender identity, including, but not limited to, any effort to change gender expression or to eliminate or reduce sexual or romantic attractions, feelings or behavior toward others based on the individual's gender. "Conversion therapy" does not include the following:

A. Any practice or treatment that assists an individual undergoing a gender transition;

B. Any practice or treatment that provides acceptance, support and understanding to an individual as long as the practice or treatment does not seek or claim to change the individual's sexual orientation or gender identity; and

C. Any practice or treatment that facilitates an individual's coping, social support or identity exploration and development, including any therapeutic treatment such as talk therapy that is neutral with regard to sexual orientation and gender identity that does not seek or claim to change an individual's sexual orientation or gender identity and that seeks to prevent or address unlawful conduct or unsafe sexual practices, as long as the counseling does not seek or claim to change the individual's sexual orientation or gender identity.'

Amend the bill by striking out all of section 37 and inserting the following:

COMMITTEE AMENDMENT

ROF

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45

'Sec. 37. Legislative findings; legislative intent.

1. Legislative findings. The Legislature finds that:

A. Conversion therapy is a practice or treatment, including but not limited to talk therapy, that seeks or claims to change a person's sexual orientation or gender identity. It is also referred to by other names, such as sexual orientation change efforts, gender identity change efforts, reparative therapy and reintegrative therapy;

B. A wide range of the major health and mental health associations in the United States recognize being lesbian, gay, bisexual or transgender and having same-sex sexual attractions as normal variants of human sexuality and gender identity, rather than an illness or developmental disorder;

C. The medical and social science consensus is that conversion therapy is a harmful and ineffective practice or treatment. Conversion therapy is based on the false premise that being lesbian, gay, bisexual or transgender is a mental illness or disorder and is caused by a developmental deficiency, trauma, abuse or unmet emotional needs and that conversion therapy can alter a person's sexual orientation or gender identity;

D. There is no competent and reliable scientific evidence supporting claims that conversion therapy can change an individual's sexual orientation; rather, there is substantial competent and reliable scientific evidence, including recently published research on young adults who experienced conversion therapy as children, that conversion therapy is ineffective and can and often does result in significant health and safety risks to consumers of those services, including suicidality, depression, guilt, helplessness, hopelessness, shame, social withdrawal and difficulties, substance use disorder and loss of religious faith as well as reduced educational and vocational development and economic losses;

E. In 2015, the United States Department of Health and Human Services, Substance Abuse and Mental Health Services Administration developed an expert consensus about how to address distress and conflicts about sexual orientation and gender identity in minors and concluded that conversion therapy for minors is not an appropriate treatment because it can be harmful and creates poor psychosocial outcomes, such as heightened psychological distress, compromised overall well-being and increased health disparities. Additionally, the Substance Abuse and Mental Health Services Administration concluded that conversion therapy is coercive in directing the child to conform to any gender expression or sexual orientation, or directing the parents to place pressure for specific gender expressions, gender identities and sexual orientations, and that doing so is inappropriate and reinforces harmful gender and sexual orientation stereotypes;

F. The nation's leading medical and mental health professional organizations, including the American School Counselor Association, the American Psychiatric Association, the American Psychological Association, the American Association of Child and Adolescent Psychiatry, the American Psychoanalytic Association, the American Counseling Association Governing Council, the American Medical Association, the American Academy of Pediatrics, the American Academy of Family Physicians, the National Association of Social Workers, the Pan American Health Organization and the World Professional Association for Transgender Health, have

R QF 4

COMMITTEE AMENDMENT "A" to H.P. 755, L.D. 1025

1 concluded that conversion therapy is ineffective in changing sexual orientation or
2 gender identity and poses safety and health risks; and

3 G. The State has a compelling interest in protecting the physical and psychological
4 well-being of minors, including the State's lesbian, gay, bisexual and transgender
5 youth and those youth seeking to examine or understand their sexual orientation or
6 gender identity, from the advertising, offering and administering of conversion
7 therapy and in protecting its minors from the serious health and safety harms that
8 conversion therapy can cause.

9 **2. Legislative intent.** It is the intent of the Legislature to protect the public health
10 and the safety of all youth of the State, including lesbian, gay, bisexual and transgender
11 youth and those youth seeking to examine or understand their sexual orientation or
12 gender identity, by prohibiting the advertising, offering and administering of therapy
13 designed to change a person's sexual orientation or gender identity, also known as
14 conversion therapy, to individuals under 18 years of age in the State.'

15 Amend the bill by relettering or renumbering any nonconsecutive Part letter or
16 section number to read consecutively.

17 **SUMMARY**

18 This amendment is the majority report of the committee. The amendment clarifies the
19 definition of "conversion therapy." The bill provides that evidence that a certified school
20 psychologist or guidance counselor has advertised, offered or administered conversion
21 therapy to a child within the last 5 years is grounds for discipline; the amendment retains
22 this provision but removes the 5-year limitation. The amendment also removes a similar
23 5-year limitation added by the bill to the current law that provides that evidence that an
24 applicant for such a certification has injured the health or welfare of a child through abuse
25 or exploitation is grounds for a denial of the certification. The amendment also adds an
26 additional finding and makes other clarifying changes to the legislative findings and
27 intent section.

28 **FISCAL NOTE REQUIRED**

29 (See attached)

COMMITTEE AMENDMENT



129th MAINE LEGISLATURE

LD 1025

LR 111(02)

An Act To Prohibit the Provision of Conversion Therapy to Minors by Certain Licensed Professionals

Fiscal Note for Bill as Amended by Committee Amendment *A (H-213)*
Committee: Health Coverage, Insurance and Financial Services

Fiscal Note Required: Yes

Fiscal Note

Minor cost increase - Other Special Revenue Funds

Minor savings - General Fund

Fiscal Detail and Notes

Additional costs to the regulatory boards either within or affiliated with the Department of Professional and Financial Regulation that are impacted by this legislation can be absorbed within existing budgeted resources. Any savings to the Department of Health and Human Services to adopt the changes are expected to be minor.