



# **D.C. CATHOLIC CONFERENCE**

*ADVANCING GOSPEL VALUES IN THE DISTRICT OF COLUMBIA*

## **Statement to the Committee on Health**

### **Conversion Therapy for Minors Prohibition Amendment Act of 2014**

**Submitted by  
Michael Scott**

**Director  
D.C. Catholic Conference**

The D.C. Catholic Conference represents the public policy interests of the Archdiocese of Washington within the District of Columbia. We submit this testimony with regard to the *Conversion Therapy for Minors Prohibition Amendment Act of 2014*. We thank Chairwoman Yvette Alexander for the opportunity to engage in this discussion.

The Catholic Church highly values human sexuality by which a man and a woman give themselves to one another sexually as an expression of marital love and openness to the procreation and education of children. The Church's teachings, doctrines, and traditions uphold the truth and meaning of human sexuality in this regard.

As such, sexual acts outside of marriage are contrary to the creative design of men and women and the meaning and dignity of marriage. Single men and women are called to love celibately and married men and women are called to love in lifelong monogamous relationships. All are called to acknowledge and accept their sexual identity.

The Committee has heard from a number of organizations on the nature and utility of sexual orientation change efforts (SOCE). Apart from these organizations, the Catholic Medical Association, which is one of the largest associations of physicians and healthcare professionals in the nation, is supportive of SOCE. (*Homosexuality and Hope*, Catholic Medical Association, 2010)

The Church is open to such therapeutic interventions, advising that "Catholics who experience homosexual tendencies and who wish to explore therapy should seek out the counsel and assistance of a qualified professional who has preparation and competence in psychological counseling." (*Ministry to Persons with a Homosexual Inclination: Guidelines for Pastoral Care*, United States Conference of Catholic Bishops, 2006).

In this context, the D.C. Catholic Conference opposes the *Conversion Therapy for Minors Prohibition Amendment Act of 2014* (the Act). Not only would the Act outlaw SOCE for minors – a practice the Church believes to be morally acceptable – but it could also create other significant problems.

#### **1. Parental Rights**

Parents have the primary responsibility for the welfare and education of their children. However the Act would usurp parents' rights to make important decisions they feel are in the best interests of their children in this regard.

The Church stresses that “Parents should also have recourse to specialists with solid scientific and moral formation in order to identify the causes over and above the symptoms [of same-sex attraction], and help the subjects to overcome difficulties in a serious and clear way.” (*The Truth and Meaning of Human Sexuality: Guidelines for Education within the Family*, Pontifical Council for the Family, Numbers 72, 1995).

## **2. Free Speech**

The Act’s broad language raises troubling constitutional concerns. It states that “[a] provider shall not engage in sexual orientation change efforts with an individual who is under the age of 18 years.” *The Mental Health Service Delivery Reform Act of 2001*, which the Act amends, defines “provider” in part as “an individual or entity that...[i]s duly licensed or certified to provide mental health services or mental health supports in the District of Columbia.” The D.C. Code defines “mental health professional” to include “a licensed social worker.” D.C. Code § 7-1201.01. As a result, the Act may apply to licensed social workers who provide counseling services to students in many schools in the District of Columbia including those operated by the Archdiocese of Washington.

The Act further defines “sexual orientation change efforts” to mean “a practice by a provider that seeks to change a person’s sexual orientation, including efforts to change behaviors [or] gender...expression.”

The Conference has concern that this definition may go beyond the Act’s intent and, rather than merely addressing sexual orientation change efforts, may also prohibit simple speech regarding what a religion teaches about human sexuality.

For instance, if a student involved in a same-sex encounter were to ask an archdiocesan counselor what the Catholic Church teaches about homosexuality, this Act could be read to prohibit the counselor from answering that question even as a mere statement of fact. After all, the counselor might reasonably expect that the student could “change [his] behavior” in view of what the Catholic Church teaches on the subject.

Therefore the Act may violate the First Amendment’s protection of freedom of speech. By prohibiting speech based on the message it conveys – for example, that the Catholic Church teaches that same-sex conduct is immoral – the Act qualifies as a content-based speech restriction. The Supreme Court of the United States has repeatedly stated that content-based restrictions of speech are presumptively unconstitutional. *See, e.g., R.A.V. v. City of St. Paul*, 505 U.S. 377, 382 (1992) (“Content-based regulations are presumptively invalid.”)

## **3. Other Considerations**

It is unclear whether the Act accounts for the Superior Court of the District of Columbia’s ruling that ex-gays are a protected class for the purposes of sexual orientation non-discrimination. *See, e.g. Parents and Friends of Ex-Gays v. Government of District Office of Human Rights*, 2008 CA 003662 P(MPA), slip op. at 6 (D.C. Super. Ct., June 26, 2009) (“[The Office of Human Rights] ruling that ex-gays are not protected from discrimination under the HRA...directly contravenes the plain language and intent of the statute.”)

Additionally the Conference believes that the proper oversight of psychological care resides with mental health professionals rather than city officials. Otherwise city officials risk interfering with a person’s right to seek and receive professional treatment and even infringing upon established physician-patient relationships.

## **Conclusion**

While the Conference does not contest the city government's general authority to regulate mental health services, the government must not use that power to suppress speech or ideas simply because they are unpopular, or to interfere with the right of parents to raise their children in accordance with their sincere beliefs about what is right.

In light of these significant concerns, the Conference urges that the Committee oppose the *Conversion Therapy for Minors Prohibition Amendment Act*.