# 45:1-54 & 45:1-55 LEGISLATIVE HISTORY CHECKLIST

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**LAWS OF**: 2013 **CHAPTER**: 150

**NJSA:** 45:1-54 & 45:1-55 (Protects minors by prohibiting attempts to change sexual orientation)

BILL NO: A3371 (Substituted for S2278)

**SPONSOR(S)** Eustace and others

**DATE INTRODUCED:** October 15, 2012

**COMMITTEE:** ASSEMBLY: Women and Children

SENATE: -

AMENDED DURING PASSAGE: No

**DATE OF PASSAGE:** ASSEMBLY: June 24, 2013

**SENATE:** June 27, 2013

**DATE OF APPROVAL:** August 19, 2013

**FOLLOWING ARE ATTACHED IF AVAILABLE:** 

FINAL TEXT OF BILL (Introduced version of bill enacted)

Yes

A3371

**SPONSOR'S STATEMENT** (Begins on page 5 of introduced bill): Yes

COMMITTEE STATEMENT: ASSEMBLY: Yes

SENATE: No

(Audio archived recordings of the committee meetings, corresponding to the date of the committee statement, *may possibly* be found at www.njleg.state.nj.us)

FLOOR AMENDMENT STATEMENT: No

LEGISLATIVE FISCAL ESTIMATE: No

S2278

**SPONSOR'S STATEMENT:** (Begins on page 2 introduced bill): Yes

**COMMITTEE STATEMENT:** ASSEMBLY: No

SENATE: Yes

FLOOR AMENDMENT STATEMENT: No

LEGISLATIVE FISCAL ESTIMATE: No.

(continued)

VETO MESSAGE:	No
GOVERNOR'S PRESS RELEASE ON SIGNING:	Yes
GOVERNOR'S SIGNING STATEMENT:	Yes

#### **FOLLOWING WERE PRINTED:**

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REPORTS: No

HEARINGS: No

NEWSPAPER ARTICLES: Yes

LAW/RWH

<sup>&</sup>quot;Governor perfecting his balancing act," The Record, 8-20-13

<sup>&</sup>quot;Ban on anti-gay therapy signed," The Philadelphia Inquirer, 8-20-13

<sup>&</sup>quot;N.J. becomes second state to ban gay conversion therapy for minors," The Star-Ledger, 8-20-13

<sup>&</sup>quot;Christie Gay Therapy Stand Adds to Challenges Clouding 2016 Bid," Bloomberg Press, 8-20-13

<sup>&</sup>quot;Christie signs Gay 'Conversion Therapy' Ban," The New York Times, 8-20-13

<sup>&</sup>quot;Christie OKs gay conversion therapy ban," Daily Record, 8-20-13

<sup>&</sup>quot;Snub for 'Gay conversion," The Wall Street Journal, 8-20-13

<sup>&</sup>quot;NJ Teen Celebrates Anti-Conversion Therapy Law," NewJersey101.5, 8-20-13

<sup>&</sup>quot;Jersey City 'gay conversion' group's leader blasts state ban on treating minors," The Jersey Journal, 8-20-13

Title 45.
Subtitle 1.
Chapter 1.
Article 4.(New)
Sexual
Orientation
Change Efforts
§§1,2 C.45:1-54 &
45:1-55

### (CORRECTED COPY)

# P.L.2013, CHAPTER 150, *approved August 19*, *2013*Assembly, No. 3371

1 AN ACT concerning the protection of minors from attempts to 2 change sexual orientation and supplementing Title 45 of the 3 Revised Statutes.

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**BE IT ENACTED** by the Senate and General Assembly of the State of New Jersey:

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- 1. The Legislature finds and declares that:
- a. Being lesbian, gay, or bisexual is not a disease, disorder, illness, deficiency, or shortcoming. The major professional associations of mental health practitioners and researchers in the United States have recognized this fact for nearly 40 years;
- b. The American Psychological Association convened a Task Force on Appropriate Therapeutic Responses to Sexual Orientation. The task force conducted a systematic review of peer-reviewed journal literature on sexual orientation change efforts, and issued a report in 2009. The task force concluded that sexual orientation change efforts can pose critical health risks to lesbian, gay, and people, including confusion, depression, helplessness, hopelessness, shame, social withdrawal, suicidality, substance abuse, stress, disappointment, self-blame, decreased selfesteem and authenticity to others, increased self-hatred, hostility and blame toward parents, feelings of anger and betrayal, loss of friends and potential romantic partners, problems in sexual and emotional intimacy, sexual dysfunction, high-risk sexual behaviors, a feeling of being dehumanized and untrue to self, a loss of faith, and a sense of having wasted time and resources;
- c. The American Psychological Association issued a resolution on Appropriate Affirmative Responses to Sexual Orientation Distress and Change Efforts in 2009, which states: "[T]he [American Psychological Association] advises parents, guardians, young people, and their families to avoid sexual orientation change efforts that portray homosexuality as a mental illness or developmental disorder and to seek psychotherapy, social support,

and educational services that provide accurate information on 2 sexual orientation and sexuality, increase family and school 3 support, and reduce rejection of sexual minority youth";

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- d. (1) The American Psychiatric Association published a position statement in March of 2000 in which it stated: "Psychotherapeutic modalities to convert or 'repair' homosexuality are based on developmental theories whose scientific validity is Furthermore, anecdotal reports of 'cures' are questionable. counterbalanced by anecdotal claims of psychological harm. In the last four decades, 'reparative' therapists have not produced any rigorous scientific research to substantiate their claims of cure. Until there is such research available, [the American Psychiatric Association] recommends that ethical practitioners refrain from attempts to change individuals' sexual orientation, keeping in mind the medical dictum to first, do no harm;
- (2) The potential risks of reparative therapy are great, including depression, anxiety and self-destructive behavior, since therapist alignment with societal prejudices against homosexuality may reinforce self-hatred already experienced by the patient. Many patients who have undergone reparative therapy relate that they were inaccurately told that homosexuals are lonely, unhappy individuals who never achieve acceptance or satisfaction. possibility that the person might achieve happiness and satisfying interpersonal relationships as a gay man or lesbian is not presented, nor are alternative approaches to dealing with the effects of societal stigmatization discussed; and
- (3) Therefore, the American Psychiatric Association opposes any psychiatric treatment such as reparative or conversion therapy which is based upon the assumption that homosexuality per se is a mental disorder or based upon the a priori assumption that a patient should change his or her sexual homosexual orientation";
- The American School Counselor Association's position statement on professional school counselors and lesbian, gay, bisexual, transgender, and questioning (LGBTQ) youth states: "It is not the role of the professional school counselor to attempt to change a student's sexual orientation/gender identity but instead to provide support to LGBTQ students to promote student Recognizing that sexual achievement and personal well-being. orientation is not an illness and does not require treatment, professional school counselors may provide individual student planning or responsive services to LGBTQ students to promote selfacceptance, deal with social acceptance, understand issues related to coming out, including issues that families may face when a student goes through this process and identify appropriate community resources";
- The American Academy of Pediatrics in 1993 published an article in its journal, Pediatrics, stating: "Therapy directed at specifically changing sexual orientation is contraindicated, since it

can provoke guilt and anxiety while having little or no potential for achieving changes in orientation";

- g. The American Medical Association Council on Scientific Affairs prepared a report in 1994 in which it stated: "Aversion therapy (a behavioral or medical intervention which pairs unwanted behavior, in this case, homosexual behavior, with unpleasant sensations or aversive consequences) is no longer recommended for gay men and lesbians. Through psychotherapy, gay men and lesbians can become comfortable with their sexual orientation and understand the societal response to it";
- h. The National Association of Social Workers prepared a 1997 policy statement in which it stated: "Social stigmatization of lesbian, gay, and bisexual people is widespread and is a primary motivating factor in leading some people to seek sexual orientation changes. Sexual orientation conversion therapies assume that homosexual orientation is both pathological and freely chosen. No data demonstrates that reparative or conversion therapies are effective, and, in fact, they may be harmful";
- i. The American Counseling Association Governing Council issued a position statement in April of 1999, and in it the council states: "We oppose 'the promotion of "reparative therapy" as a "cure" for individuals who are homosexual'";
- j. (1) The American Psychoanalytic Association issued a position statement in June 2012 on attempts to change sexual orientation, gender, identity, or gender expression, and in it the association states: "As with any societal prejudice, bias against individuals based on actual or perceived sexual orientation, gender identity or gender expression negatively affects mental health, contributing to an enduring sense of stigma and pervasive self-criticism through the internalization of such prejudice; and
- (2) Psychoanalytic technique does not encompass purposeful attempts to 'convert,' 'repair,' change or shift an individual's sexual orientation, gender identity or gender expression. Such directed efforts are against fundamental principles of psychoanalytic treatment and often result in substantial psychological pain by reinforcing damaging internalized attitudes";
- k. The American Academy of Child and Adolescent Psychiatry in 2012 published an article in its journal, Journal of the American Academy of Child and Adolescent Psychiatry, stating: "Clinicians should be aware that there is no evidence that sexual orientation can be altered through therapy, and that attempts to do so may be harmful. There is no empirical evidence adult homosexuality can be prevented if gender nonconforming children are influenced to be more gender conforming. Indeed, there is no medically valid basis for attempting to prevent homosexuality, which is not an illness. On the contrary, such efforts may encourage family rejection and undermine self-esteem, connectedness and caring, important protective factors against suicidal ideation and attempts. Given that there is no evidence that efforts to alter sexual orientation are

effective, beneficial or necessary, and the possibility that they carry the risk of significant harm, such interventions are contraindicated";

- 1. The Pan American Health Organization, a regional office of the World Health Organization, issued a statement in May of 2012 and in it the organization states: "These supposed conversion therapies constitute a violation of the ethical principles of health care and violate human rights that are protected by international and regional agreements." The organization also noted that reparative therapies "lack medical justification and represent a serious threat to the health and well-being of affected people";
- m. Minors who experience family rejection based on their sexual orientation face especially serious health risks. In one study, lesbian, gay, and bisexual young adults who reported higher levels of family rejection during adolescence were 8.4 times more likely to report having attempted suicide, 5.9 times more likely to report high levels of depression, 3.4 times more likely to use illegal drugs, and 3.4 times more likely to report having engaged in unprotected sexual intercourse compared with peers from families that reported no or low levels of family rejection. This is documented by Caitlin Ryan et al. in their article entitled Family Rejection as a Predictor of Negative Health Outcomes in White and Latino Lesbian, Gay, and Bisexual Young Adults (2009) 123 Pediatrics 346; and
- n. New Jersey has a compelling interest in protecting the physical and psychological well-being of minors, including lesbian, gay, bisexual, and transgender youth, and in protecting its minors against exposure to serious harms caused by sexual orientation change efforts.

- 2. a. A person who is licensed to provide professional counseling under Title 45 of the Revised Statutes, including, but not limited to, a psychiatrist, licensed practicing psychologist, certified social worker, licensed clinical social worker, licensed social worker, licensed marriage and family therapist, certified psychoanalyst, or a person who performs counseling as part of the person's professional training for any of these professions, shall not engage in sexual orientation change efforts with a person under 18 years of age.
- b. As used in this section, "sexual orientation change efforts" means the practice of seeking to change a person's sexual orientation, including, but not limited to, efforts to change behaviors, gender identity, or gender expressions, or to reduce or eliminate sexual or romantic attractions or feelings toward a person of the same gender; except that sexual orientation change efforts shall not include counseling for a person seeking to transition from one gender to another, or counseling that:
- (1) provides acceptance, support, and understanding of a person or facilitates a person's coping, social support, and identity exploration and development, including sexual orientation-neutral

1 interventions to prevent or address unlawful conduct or unsafe 2 sexual practices; and 3 (2) does not seek to change sexual orientation. 4 5 3. This act shall take effect immediately. 6 7 8 **STATEMENT** 9 10 This bill prohibits counseling to change the sexual orientation of 11 a minor. 12 Under the provisions of the bill, a person who is licensed to provide professional counseling, including, but not limited to, a 13 14 psychiatrist, licensed practicing psychologist, certified social 15 worker, licensed clinical social worker, licensed social worker, 16 licensed marriage and family therapist, certified psychoanalyst, or a person who performs counseling as part of the person's professional 17 18 training, is prohibited from engaging in sexual orientation change 19 efforts with a person under 18 years of age. 20 The bill defines "sexual orientation change efforts" as the 21 practice of seeking to change a person's sexual orientation, 22 including, but not limited to, efforts to change behaviors or gender 23 expressions, or to reduce or eliminate sexual or romantic attractions 24 or feelings toward a person of the same gender. The term, however, 25 does not include counseling for a person seeking to transition from 26 one gender to another, or counseling that: provides acceptance, 27 support, and understanding of a person or facilitates a person's 28 coping, social support, identity exploration and development, 29 including sexual orientation-neutral interventions to prevent or 30 address unlawful conduct or unsafe sexual practices; and does not 31 seek to change sexual orientation. 32 33 34 35 36

Protects minors by prohibiting attempts to change sexual orientation.

## ASSEMBLY, No. 3371

# STATE OF NEW JERSEY

### 215th LEGISLATURE

INTRODUCED OCTOBER 15, 2012

### Sponsored by:

Assemblyman TIMOTHY J. EUSTACE
District 38 (Bergen and Passaic)
Assemblyman HERB CONAWAY, JR.
District 7 (Burlington)
Assemblywoman HOLLY SCHEPISI
District 39 (Bergen and Passaic)
Assemblyman REED GUSCIORA
District 15 (Hunterdon and Mercer)
Assemblyman JOHN J. BURZICHELLI
District 3 (Cumberland, Gloucester and Salem)

### Co-Sponsored by:

Assemblywomen Vainieri Huttle, Lampitt, Tucker, Assemblyman Wisniewski, Assemblywomen Caride, Mosquera, Jasey, Senators Lesniak, Sweeney, Weinberg, Buono and Ruiz

### **SYNOPSIS**

Protects minors by prohibiting attempts to change sexual orientation.

### **CURRENT VERSION OF TEXT**

As introduced.



(Sponsorship Updated As Of: 6/28/2013)

AN ACT concerning the protection of minors from attempts to change sexual orientation and supplementing Title 45 of the Revised Statutes.

**BE IT ENACTED** by the Senate and General Assembly of the State of New Jersey:

- 1. The Legislature finds and declares that:
- a. Being lesbian, gay, or bisexual is not a disease, disorder, illness, deficiency, or shortcoming. The major professional associations of mental health practitioners and researchers in the United States have recognized this fact for nearly 40 years;
- The American Psychological Association convened a Task Force on Appropriate Therapeutic Responses to Sexual Orientation. The task force conducted a systematic review of peer-reviewed journal literature on sexual orientation change efforts, and issued a report in 2009. The task force concluded that sexual orientation change efforts can pose critical health risks to lesbian, gay, and people, including confusion, depression, bisexual helplessness, hopelessness, shame, social withdrawal, suicidality, substance abuse, stress, disappointment, self-blame, decreased selfesteem and authenticity to others, increased self-hatred, hostility and blame toward parents, feelings of anger and betrayal, loss of friends and potential romantic partners, problems in sexual and emotional intimacy, sexual dysfunction, high-risk sexual behaviors, a feeling of being dehumanized and untrue to self, a loss of faith, and a sense of having wasted time and resources;
  - c. The American Psychological Association issued a resolution on Appropriate Affirmative Responses to Sexual Orientation Distress and Change Efforts in 2009, which states: "[T]he [American Psychological Association] advises parents, guardians, young people, and their families to avoid sexual orientation change efforts that portray homosexuality as a mental illness or developmental disorder and to seek psychotherapy, social support, and educational services that provide accurate information on sexual orientation and sexuality, increase family and school support, and reduce rejection of sexual minority youth";
- d. (1) The American Psychiatric Association published a position statement in March of 2000 in which it stated: "Psychotherapeutic modalities to convert or 'repair' homosexuality are based on developmental theories whose scientific validity is questionable. Furthermore, anecdotal reports of 'cures' are counterbalanced by anecdotal claims of psychological harm. In the last four decades, 'reparative' therapists have not produced any rigorous scientific research to substantiate their claims of cure. Until there is such research available, [the American Psychiatric Association] recommends that ethical practitioners refrain from attempts to change individuals' sexual orientation, keeping in mind the medical dictum to first, do no harm;

- (2) The potential risks of reparative therapy are great, including depression, anxiety and self-destructive behavior, since therapist alignment with societal prejudices against homosexuality may reinforce self-hatred already experienced by the patient. Many patients who have undergone reparative therapy relate that they were inaccurately told that homosexuals are lonely, unhappy individuals who never achieve acceptance or satisfaction. The possibility that the person might achieve happiness and satisfying interpersonal relationships as a gay man or lesbian is not presented, nor are alternative approaches to dealing with the effects of societal stigmatization discussed; and
  - (3) Therefore, the American Psychiatric Association opposes any psychiatric treatment such as reparative or conversion therapy which is based upon the assumption that homosexuality per se is a mental disorder or based upon the a priori assumption that a patient should change his or her sexual homosexual orientation";
- e. The American School Counselor Association's position statement on professional school counselors and lesbian, gay, bisexual, transgender, and questioning (LGBTQ) youth states: "It is not the role of the professional school counselor to attempt to change a student's sexual orientation/gender identity but instead to provide support to LGBTQ students to promote student achievement and personal well-being. Recognizing that sexual orientation is not an illness and does not require treatment, professional school counselors may provide individual student planning or responsive services to LGBTQ students to promote self-acceptance, deal with social acceptance, understand issues related to coming out, including issues that families may face when a student goes through this process and identify appropriate community resources";
- f. The American Academy of Pediatrics in 1993 published an article in its journal, Pediatrics, stating: "Therapy directed at specifically changing sexual orientation is contraindicated, since it can provoke guilt and anxiety while having little or no potential for achieving changes in orientation";
- g. The American Medical Association Council on Scientific Affairs prepared a report in 1994 in which it stated: "Aversion therapy (a behavioral or medical intervention which pairs unwanted behavior, in this case, homosexual behavior, with unpleasant sensations or aversive consequences) is no longer recommended for gay men and lesbians. Through psychotherapy, gay men and lesbians can become comfortable with their sexual orientation and understand the societal response to it";
- h. The National Association of Social Workers prepared a 1997 policy statement in which it stated: "Social stigmatization of lesbian, gay, and bisexual people is widespread and is a primary motivating factor in leading some people to seek sexual orientation changes. Sexual orientation conversion therapies assume that homosexual orientation is both pathological and freely chosen. No

data demonstrates that reparative or conversion therapies are effective, and, in fact, they may be harmful";

- i. The American Counseling Association Governing Council issued a position statement in April of 1999, and in it the council states: "We oppose 'the promotion of "reparative therapy" as a "cure" for individuals who are homosexual'";
- j. (1) The American Psychoanalytic Association issued a position statement in June 2012 on attempts to change sexual orientation, gender, identity, or gender expression, and in it the association states: "As with any societal prejudice, bias against individuals based on actual or perceived sexual orientation, gender identity or gender expression negatively affects mental health, contributing to an enduring sense of stigma and pervasive self-criticism through the internalization of such prejudice; and
- (2) Psychoanalytic technique does not encompass purposeful attempts to 'convert,' 'repair,' change or shift an individual's sexual orientation, gender identity or gender expression. Such directed efforts are against fundamental principles of psychoanalytic treatment and often result in substantial psychological pain by reinforcing damaging internalized attitudes";
- k. The American Academy of Child and Adolescent Psychiatry in 2012 published an article in its journal, Journal of the American Academy of Child and Adolescent Psychiatry, stating: "Clinicians should be aware that there is no evidence that sexual orientation can be altered through therapy, and that attempts to do so may be harmful. There is no empirical evidence adult homosexuality can be prevented if gender nonconforming children are influenced to be more gender conforming. Indeed, there is no medically valid basis for attempting to prevent homosexuality, which is not an illness. On the contrary, such efforts may encourage family rejection and undermine self-esteem, connectedness and caring, important protective factors against suicidal ideation and attempts. Given that there is no evidence that efforts to alter sexual orientation are effective, beneficial or necessary, and the possibility that they carry the risk of significant harm, such interventions are contraindicated";
- 1. The Pan American Health Organization, a regional office of the World Health Organization, issued a statement in May of 2012 and in it the organization states: "These supposed conversion therapies constitute a violation of the ethical principles of health care and violate human rights that are protected by international and regional agreements." The organization also noted that reparative therapies "lack medical justification and represent a serious threat to the health and well-being of affected people";
- m. Minors who experience family rejection based on their sexual orientation face especially serious health risks. In one study, lesbian, gay, and bisexual young adults who reported higher levels of family rejection during adolescence were 8.4 times more likely to report having attempted suicide, 5.9 times more likely to report high levels of depression, 3.4 times more likely to use illegal drugs, and

### **A3371** EUSTACE, CONAWAY

- 3.4 times more likely to report having engaged in unprotected sexual intercourse compared with peers from families that reported no or low levels of family rejection. This is documented by Caitlin Ryan et al. in their article entitled Family Rejection as a Predictor of Negative Health Outcomes in White and Latino Lesbian, Gay, and Bisexual Young Adults (2009) 123 Pediatrics 346; and
  - n. New Jersey has a compelling interest in protecting the physical and psychological well-being of minors, including lesbian, gay, bisexual, and transgender youth, and in protecting its minors against exposure to serious harms caused by sexual orientation change efforts.

- 2. a. A person who is licensed to provide professional counseling under Title 45 of the Revised Statutes, including, but not limited to, a psychiatrist, licensed practicing psychologist, certified social worker, licensed clinical social worker, licensed social worker, licensed marriage and family therapist, certified psychoanalyst, or a person who performs counseling as part of the person's professional training for any of these professions, shall not engage in sexual orientation change efforts with a person under 18 years of age.
- b. As used in this section, "sexual orientation change efforts" means the practice of seeking to change a person's sexual orientation, including, but not limited to, efforts to change behaviors, gender identity, or gender expressions, or to reduce or eliminate sexual or romantic attractions or feelings toward a person of the same gender; except that sexual orientation change efforts shall not include counseling for a person seeking to transition from one gender to another, or counseling that:
- (1) provides acceptance, support, and understanding of a person or facilitates a person's coping, social support, and identity exploration and development, including sexual orientation-neutral interventions to prevent or address unlawful conduct or unsafe sexual practices; and
  - (2) does not seek to change sexual orientation.

3. This act shall take effect immediately.

#### **STATEMENT**

This bill prohibits counseling to change the sexual orientation of a minor.

Under the provisions of the bill, a person who is licensed to provide professional counseling, including, but not limited to, a psychiatrist, licensed practicing psychologist, certified social worker, licensed clinical social worker, licensed social worker, licensed marriage and family therapist, certified psychoanalyst, or a person who performs counseling as part of the person's professional

### **A3371** EUSTACE, CONAWAY

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training, is prohibited from engaging in sexual orientation change efforts with a person under 18 years of age.

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3 The bill defines "sexual orientation change efforts" as the 4 practice of seeking to change a person's sexual orientation, 5 including, but not limited to, efforts to change behaviors or gender 6 expressions, or to reduce or eliminate sexual or romantic attractions 7 or feelings toward a person of the same gender. The term, however, 8 does not include counseling for a person seeking to transition from 9 one gender to another, or counseling that: provides acceptance, 10 support, and understanding of a person or facilitates a person's coping, social support, identity exploration and development, 11 12 including sexual orientation-neutral interventions to prevent or 13 address unlawful conduct or unsafe sexual practices; and does not 14 seek to change sexual orientation.

### ASSEMBLY WOMEN AND CHILDREN COMMITTEE

### STATEMENT TO

### ASSEMBLY, No. 3371

## STATE OF NEW JERSEY

**DATED: JUNE 13, 2013** 

The Assembly Women and Children Committee reports favorably Assembly Bill No. 3371.

This bill prohibits counseling to change the sexual orientation of a minor.

Under the provisions of the bill, a person who is licensed to provide professional counseling, including, but not limited to, a psychiatrist, licensed practicing psychologist, certified social worker, licensed clinical social worker, licensed social worker, licensed marriage and family therapist, certified psychoanalyst, or a person who performs counseling as part of the person's professional training, is prohibited from engaging in sexual orientation change efforts with a person under 18 years of age.

The bill defines "sexual orientation change efforts" as the practice of seeking to change a person's sexual orientation, including, but not limited to, efforts to change behaviors or gender expressions, or to reduce or eliminate sexual or romantic attractions or feelings toward a person of the same gender. The term, however, does not include counseling for a person seeking to transition from one gender to another, or counseling that: provides acceptance, support, and understanding of a person or facilitates a person's coping, social support, identity exploration and development, including sexual orientation-neutral interventions to prevent or address unlawful conduct or unsafe sexual practices; and does not seek to change sexual orientation.

This bill is identical to Senate Bill No. 2278 (1R) (Lesniak/Sweeney/Weinberg) which was released by the Senate Health, Human Services, and Senior Citizens Committee on March 18, 2013 and is currently pending before the Senate.

# **SENATE, No. 2278**

# STATE OF NEW JERSEY

### 215th LEGISLATURE

INTRODUCED OCTOBER 15, 2012

**Sponsored by:** 

Senator RAYMOND J. LESNIAK

District 20 (Union)

**Senator STEPHEN M. SWEENEY** 

**District 3 (Cumberland, Gloucester and Salem)** 

**Senator LORETTA WEINBERG** 

District 37 (Bergen)

**Co-Sponsored by:** 

**Senator Buono** 

### **SYNOPSIS**

Protects minors by prohibiting counseling attempts to change sexual orientation.

### **CURRENT VERSION OF TEXT**

As introduced.



(Sponsorship Updated As Of: 12/21/2012)

#### **S2278** LESNIAK, SWEENEY

1	AN ACT concerning the protection of minors from counseling
2	attempts to change sexual orientation and supplementing Title 45
3	of the Revised Statutes.

**BE IT ENACTED** by the Senate and General Assembly of the State of New Jersey:

1. a. A person who is licensed to provide professional counseling under Title 45 of the Revised Statutes, including, but not limited to, a psychiatrist, licensed practicing psychologist, certified social worker, licensed clinical social worker, licensed social worker, licensed marriage and family therapist, certified psychoanalyst, or a person who performs counseling as part of the person's professional training for any of these professions, shall not engage in sexual orientation change efforts with a person under 18 years of age.

b. As used in this section, "sexual orientation change efforts" means the practice of seeking to change a person's sexual persuasion, including, but not limited to, efforts to change behaviors or gender expressions, or to reduce or eliminate sexual or romantic attractions or feelings toward a person of the same gender; except that sexual orientation change efforts shall not include counseling that:

- (1) provides acceptance, support, and understanding of a person or facilitates a person's coping, social support, and identity exploration and development, including sexual persuasion-neutral interventions to prevent or address unlawful conduct or unsafe sexual practices; and
  - (2) does not seek to change sexual persuasion.

2. This act shall take effect immediately.

### **STATEMENT**

This bill prohibits counseling to change the sexual orientation of a minor.

Under the provisions of the bill, a person who is licensed to provide professional counseling, including, but not limited to, a psychiatrist, licensed practicing psychologist, certified social worker, licensed clinical social worker, licensed social worker, licensed marriage and family therapist, certified psychoanalyst, or a person who performs counseling as part of the person's professional training, is prohibited from engaging in sexual orientation change efforts with a person under 18 years of age.

The bill defines "sexual orientation change efforts" as the practice of seeking to change a person's sexual persuasion, including, but not limited to, efforts to change behaviors or gender

### S2278 LESNIAK, SWEENEY

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expressions, or to reduce or eliminate sexual or romantic attractions or feelings toward a person of the same gender. The term, however, does not include counseling that: provides acceptance, support, and understanding of a person or facilitates a person's coping, social support, identity exploration and development, including sexual persuasion-neutral interventions to prevent or address unlawful conduct or unsafe sexual practices; and does not seek to change

sexual persuasion.

### SENATE HEALTH, HUMAN SERVICES AND SENIOR CITIZENS COMMITTEE

### STATEMENT TO

**SENATE, No. 2278** 

with committee amendments

## STATE OF NEW JERSEY

**DATED: MARCH 18, 2013** 

The Senate Health, Human Services and Senior Citizens Committee reports favorably and with amendments Senate Bill No. 2278.

As amended by the committee, this bill prohibits counseling to change the sexual orientation of a minor.

Under the provisions of the bill, a person who is licensed to provide professional counseling is prohibited from engaging in sexual orientation change efforts with a person under 18 years of age.

The bill defines "sexual orientation change efforts" as the practice of seeking to change a person's sexual orientation, including, but not limited to, efforts to change behaviors or gender expressions, or to reduce or eliminate sexual or romantic attractions or feelings toward a person of the same gender. The term, however, excludes counseling for a person seeking to transition from one gender to another, or counseling that: provides acceptance, support, and understanding of a person or facilitates a person's coping, social support, identity exploration and development, including sexual orientation-neutral interventions to prevent or address unlawful conduct or unsafe sexual practices; and does not seek to change sexual orientation.

The committee amended the bill to add a section expressing the Legislature's findings and declarations, replace references to "sexual persuasion" with "sexual orientation," include in the definition of "sexual orientation change efforts" the practice of seeking to change a person's gender identity, and excluding from that term counseling for a person seeking to transition from one gender to another.

As amended, this bill is identical to Assembly Bill No. 3371 (Eustace/Conaway/Schepisi/Gusciora/Burzichelli).

### GOVERNOR'S STATEMENT UPON SIGNING ASSEMBLY BILL No. 3371

Assembly Bill No. 3371, which I have signed today, prohibits individuals who are licensed to provide professional counseling under Title 45 of the New Jersey statutes from attempting to change a minor's sexual orientation.

At the outset of this debate, I expressed my concerns about government limiting parental choice on the care and treatment of their own children. I still have those concerns. Government should tread carefully into this area and I do so here reluctantly. I have scrutinized this piece of legislation with that concern in mind.

However, I also believe that on issues of medical treatment for children we must look to experts in the field to determine the relative risks and rewards. The American Psychological Association has found that efforts to change sexual orientation can pose critical health risks including, but not limited to, depression, substance abuse, social withdrawal, decreased selfesteem and suicidal thoughts.

I believe that exposing children to these health risks without clear evidence of benefits that outweigh these serious risks is not appropriate. Based upon this analysis, I sign this bill into law.

Date: 8/19/13

/s/ Chris Christie

Governor

Attest:

/s/ Charles B. McKenna

Chief Counsel to the Governor

NJ Hom	ne   Service	s A to Z	Departments/Agencies	FAQ
		Special a	The state of the s	distance of
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### Gov. Christie Signs Bill Banning Gay Conversion Therapy On Minors

Monday, August 19, 2013

Tags: Bill Action

This morning, Governor Christie signed legislation banning the practice of gay conversion therapy on minors in New Jersey. First introduced in October 2012, Assembly Bill 3371 "prohibits counseling to change the sexual orientation of a minor." It passed both houses of the legislature with bipartisan majorities in June. With the Governor's signature, New Jersey becomes only the second state in the country that bans this practice.

Previously, the Governor has stated that he opposes conversion therapy, and his action on this bill is consistent with his belief that people are born gay and homosexuality is not a sin. From an interview with Piers Morgan in 2011: http://youtu.be/QVNUszOgvII

Piers Morgan: Is homosexuality a sin?

Governor Christie: Well my religion says it's a sin. I mean I think, but for me, I've always believed that people are born with the predisposition to be homosexual. And so I think if someone is born that way it's very difficult to say then that's a sin. But I understand that my Church says that, but for me personally I don't look at someone who is homosexual as a sinner.

#### From the Governor's attached signing statement:

Assembly Bill No. 3371, which I have signed today, prohibits individuals who are licensed to provide professional counseling under Title 45 of the New Jersey statutes from attempting to change a minor's sexual orientation.

At the outset of this debate, I expressed my concerns about government limiting parental choice on the care and treatment of their own children. I still have those concerns. Government should tread carefully into this area and I do so here reluctantly. I have scrutinized this piece of legislation with that concern in mind.

However, I also believe that on issues of medical treatment for children we must look to experts in the field to determine the relative risks and rewards. The American Psychological Association has found that efforts to change sexual orientation can pose critical health risks including, but not limited to, depression, substance abuse, social withdrawal, decreased self-esteem and suicidal thoughts.

I believe that exposing children to these health risks without clear evidence of benefits that outweigh these serious risks is not appropriate. Based upon this analysis, I sign this bill into law.

Copy of the Governor's Statement Upon Signing Assembly Bill No. 3371[ pdf 8kB]

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