

Policy Statements on Lesbian, Gay, and Bisexual Concerns

RESOLUTION ON APPROPRIATE THERAPEUTIC RESPONSES TO SEXUAL ORIENTATION

[Adopted by the American Psychological Association Council of Representatives, August 14, 1997.]

Whereas societal ignorance and prejudice about same gender sexual orientation put some gay, lesbian, bisexual and questioning individuals at risk for presenting for 'conversion' treatment due to family or social coercion and/or lack of information (Haldeman, 1994);

Whereas children and youth experience significant pressure to conform with sexual norms, particularly from their peers;

Whereas children and youth often lack adequate legal protection from coercive treatment;

Whereas some mental health professionals advocate treatments of lesbian, gay, and bisexual people based on the premise that homosexuality is a mental disorder (e.g., Socarides et al, 1997);

Whereas the ethics, efficacy, benefits, and potential for harm of therapies that seek to reduce or eliminate same-gender sexual orientation are under extensive debate in the professional literature and the popular media (Davison, 1991; Haldeman, 1994; Wall Street Journal, 1997);

Therefore, be it resolved, That APA affirms the following principles with regard to treatments to alter sexual orientation:

That homosexuality is not a mental disorder (American Psychiatric Association, 1973); and

That psychologists 'do not knowingly participate in or condone unfair discriminatory practices' (*Ethical Principles of Psychologists and Code of Conduct*, American Psychological Association, 1992, Principle D, p. 1600); and

That 'in their work-related activities, psychologists do not engage in unfair discrimination based on...sexual orientation' (*Ethical Principles of Psychologists and Code of Conduct*, American Psychological Association, 1992, Standard 1.10, p. 1601); and

That 'in their work-related activities, psychologists respect the rights of others to hold values, attitudes, and opinions that differ from their own.' (*Ethical Principles of Psychologists and Code of Conduct*, American Psychological Association, 1992, Standard 1.09; p. 1601); and

That 'psychologists...respect the rights of individuals to privacy, confidentiality, self-determination and autonomy' (*Ethical Principles of Psychologists and Code of Conduct*, American Psychological Association, 1992, Principle D, p. 1599); and

That 'psychologists are aware of cultural, individual and role differences, including those due to...sexual orientation' and 'try to eliminate the effect on their work of biases based on [such] factors' (*Ethical Principles of Psychologists and Code of Conduct*, American Psychological Association, 1992, Principle D, pp. 1599-1600); and

That 'where differences of...sexual orientation ...significantly affect psychologist's work concerning particular individuals or groups, psychologists obtain the training, experience, consultation, or supervision necessary to ensure the competence of their services, or they make appropriate referrals' (*Ethical Principles of Psychologists and Code of Conduct*, American Psychological Association, 1992, Standard 1.08, p. 1601); and

That 'psychologists do not make false or deceptive statements concerning...the scientific or clinical basis for ... their services,' (*Ethical Principles of Psychologists and Code of Conduct*, American Psychological Association, 1992, Standard 3.03(a), p. 1604); and

That 'psychologists attempt to identify situations in which particular interventions...may not be applicable ...because of factors such as...sexual orientation' (*Ethical Principles of Psychologists and Code of Conduct*, American Psychological Association, 1992, Standard 2.04 (c), p. 1603); and

That 'psychologists obtain appropriate informed consent to therapy or related procedures' [which] 'generally implies that the [client or patient] (1) has the capacity to consent, (2) has been informed of significant information concerning the procedure, (3) has freely and without undue influence expressed consent, and (4) consent has been appropriately documented' (*Ethical Principles of Psychologists and Code of Conduct*, American Psychological Association, Standard 4.02(a), 1992, p. 1605); and

'When persons are legally incapable of giving informed consent, psychologists obtain informed permission from a legally authorized person, if such substitute consent is permitted by law' (*Ethical Principles of Psychologists and Code of Conduct*, American Psychological Association, 1992, Standard 4.02(b), p. 1605);.

That 'psychologists (1) inform those persons who are legally incapable of giving informed consent about the proposed interventions in a manner commensurate with the persons' psychological capacities, (2) seek their assent to those interventions, and (3) consider such persons' preferences and best interests' (*Ethical Principles of Psychologists and Code of Conduct*, American Psychological Association, 1992, Standard 4.02(c), p. 1605); and

That the American Psychological Association 'urges all mental health professionals to take the lead in removing the stigma of mental illness that has long been associated with homosexual orientation' (Conger, 1975, p.

633); and

Therefore, be it resolved, That the American Psychological Association opposes portrayals of lesbian, gay, and bisexual youth and adults as mentally ill due to their sexual orientation and supports the dissemination of accurate information about sexual orientation, and mental health, and appropriate interventions in order to counteract bias that is based in ignorance or unfounded beliefs about sexual orientation.

REFERENCES

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