

TO: Judiciary Committee

FROM: Tom Venzor, Executive Director

Nebraska Catholic Conference

DATE: February 26, 2021

RE: LB231 (Conversion Therapy Ban) (Oppose)

The Nebraska Catholic Conference advocates for the public policy interests of the Catholic Church and advances the Gospel of Life through engaging, educating, and empowering public officials, Catholic laity, and the general public. I am here to express the NCC's opposition for LB231.

The Catholic faith recognizes the supreme dignity of every person. Each of us is made in the image and likeness of God. The only appropriate response to this fundamental fact is charity, which is to will the good of the other. Charity extends to every aspect of our lives, including the ways we counsel and assist others in their life's journey.

LB231 attempts to address "conversion therapy" which has been utilized in counseling situations. As defined by LB231, "conversion therapy" would include not only problematic practices but also includes a number of benign practices. The task before us is to make critical distinctions between these two things.

This Committee has heard numerous heartbreaking stories this year and two years ago when LB167 was considered. It seems universally acknowledged that the problematic practices of conversion therapy are unhelpful, unsafe, and unethical. Professional licensing bodies can already discipline a licensed professional for engaging in these inappropriate techniques.<sup>2</sup>

LB231 is not simply restricted to harmful practices of conversion therapy. It also includes practices such as talk therapy. This therapeutic technique helps clients choose their counseling goals through the ability to explore the issues they are presenting.

Consider the following example which would be captured by LB231's problematic definition of conversion therapy. An 18-year old male experiences sexual or romantic attractions for somebody of the same sex. He considers these unwanted and undesired attractions. Rather than

<sup>&</sup>lt;sup>1</sup> LB231 defines "conversion therapy" as "a practice or treatment that seeks to change an individual's sexual orientation or gender identity, including efforts to change behaviors or gender expressions or to eliminate or reduce sexual or romantic attractions or feelings toward individuals of the same gender" (Sec. 3(4)(a)(i)).

<sup>&</sup>lt;sup>2</sup> For example, in a statement opposing conversion therapy, the American Counseling Association states that this practices "violates our Code of Ethics." "Conversion Therapy Bans," available at <a href="https://www.counseling.org/government-affairs/state-issues/conversion-therapy-bans">https://www.counseling.org/government-affairs/state-issues/conversion-therapy-bans</a> (last accessed on Feb. 25, 2021).

act on these attractions, he would prefer to live chastity by integrating his human sexuality with his moral or religious convictions. LB231 would prohibit a counselor from helping him realize his counseling goals. To provide contrast, if the attraction were to somebody of the opposite sex, this same 18-year old could seek such assistance without any issue. This unequal treatment raises serious constitutional problems for LB231.<sup>3</sup>

LB231 also purports to provide a religious accommodation.<sup>4</sup> Besides being practically meaningless, it ultimately proposes a false understanding of the health care provider and their moral or religious commitments. Section 3(3) assumes that a person can simply suspend their "pastoral and religious" ministry from their "capacity [as] a health care professional," as if one were hanging up their coat at the beginning of the work day only to be thrown back on when they leave the office. Certainly, counselors must suspend judgment and refrain from imposing their values onto their clients. But this sub-section would force health care professionals who are clergy members or religious counselors—an undefined and otherwise unrecognizable statutory term—to check their religious and moral values at the door. This treats pastoral and religious considerations as having no bearing on the overall well-being and health of a client or patient.<sup>5</sup> This faulty philosophical notion is especially problematic when the patient or client seeks a health care professional who understands and respects their moral or religious commitments.

For the foregoing reasons and others, the Nebraska Catholic Conference respectfully requests that you not advance LB231 to General File. Thank you for your time and consideration!

\_

This sub-section is a stark reminder that the work of legislating is not and cannot be divorced from philosophy and theology which both seek to arrive at a fundamental and total understanding of the world. In other words, legislative proposals often have embedded in them philosophical and theological ideas. LB231 is undoubtedly advancing a particular philosophical understanding of the human person and the nature of human sexuality, an understanding that is largely flawed as has been partially developed in this testimony.

<sup>&</sup>lt;sup>3</sup> The 11<sup>th</sup> Circuit Court of Appeals very recently reviewed a similar proposal and considered it unconstitutional. *See Otto v. City of Boca Raton*, No. 19-10604 (11<sup>th</sup> Cir. Nov. 11, 2020). In *Otto*, a 3-judge panel of the 11<sup>th</sup> Circuit struck down a so-called conversion therapy ban based on its content-based and viewpoint-based restrictions. The 11<sup>th</sup> Circuit, in arriving at its conclusion about content-based restriction, noted that "[i]t only matters that some words about sexuality and gender are allowed, and others are not." This same rule can be applied here in LB231: you can provide counseling about sexuality and gender with some words—words of affirmation to assist somebody further same-sex attraction or gender expression—but you cannot provide counseling with other words—words that help somebody eliminate or reduce their unwanted same-sex attractions or gender dysphoria.

<sup>&</sup>lt;sup>4</sup> See Sec. 3(3) ("This section does not apply to a practice or treatment conducted by a clergy member or religious counselor who is acting in a pastoral or religious capacity and not in the capacity of a health care professional.").

<sup>&</sup>lt;sup>5</sup> The irony of the idea contained in this sub-section that pastoral or religious care can simply be separated from health care is not lost with regard to the etymological roots of psychology which literally means study (*logos*) of the soul (*psyche*).