Statement offered by Matt Goldenberg, Psy.D., LMHC

Good morning Madam Chair & Members of the Committee. My name is Matthew Goldenberg. I am a licensed mental health counselor and am part of a group practice in Seattle where I treat many LGBTQ clients.

I am here today to urge passage of HB 2451 to better protect the youth of our community from the practice of sexual orientation change efforts, or conversion therapies. As a mental health practitioner, I have seen first hand the health outcomes of young clients who are exposed to these practices.

Washington State currently does not have provisions in statute that will more fully protect the psychological and emotional health of minors who identify as or are perceived to be gay or lesbian. I have had the opportunity to work therapeutically with adults who have been exposed to sexual orientation change efforts, and I’d like to share with you the outcome of one client.

As a young man, this client grew up in a community that enforced strict gender roles and outcast any people who identified as or appeared to be gay. He was subject to shaming messages about his perceived difference by both his parents and friends of his community. When the client turned thirteen his parents enforced weekly therapy sessions with a mental health professional who claimed to offer treatments that would change sexual orientation. The treatment lasted several years, and included both clear direction to suppress sexual desires by pairing sexual thoughts with a disturbing image and behavioral interventions meant to impress a strong masculine expression. He became submissive, and highly isolated. As a way to cope with the harrowing ordeal of sexual orientation change therapy, this client began to drink alcohol. At first, the client was taking alcohol from his parents without their knowledge, drinking enough to pass out at night and hopefully sleep. But soon drinking alcohol became the only way he could learn to cope with the deep shame he felt.

I saw this man as an adult, about ten years after he left home and ended his conversion therapy. In total he was subject to 13 years of sexual orientation change efforts. He had never learned how to develop a healthy self-esteem. His alcoholism had progressed to the point that his skin was yellow from jaundice. He suffered from liver failure, heart disease, stomach ulcers, and tremor so severe it was not possible to work. He was prone to seizures triggered by alcohol withdrawal and had difficulty remembering why he walked into a room due to short-term memory loss. Upon beginning treatment he was acutely suicidal and could not recall a day that he had not felt intensely depressed.
The long-term effects of sexual orientation change efforts are both physical and psychological. The American Psychological Association has provided reports clearly stating that conversion therapy is contra indicated. As a Washington resident and a health care provider I am bound to provide effective, evidence-based treatments that establish high quality care for members of this community. Adding sexual orientation change therapies to the State’s Uniform Disciplinary Act as a cause for disciplinary action towards health care providers will help to protect the public from these damaging therapies.