HARMFUL SEXUAL ORIENTATION AND GENDER IDENTITY CHANGE EFFORTS

Whereas, In 2017, 14.6% of high school students identified as lesbian, gay, bisexual, or are unsure of their sexual orientation. Additionally, nearly 2% of high school students identify as transgender. According to the American Psychiatric Association, being lesbian, gay, bisexual, transgender, queer or questioning (LGBTQ) is not a disease, disorder, illness, deficiency, or shortcoming; and

Whereas, LGBTQ youth who experience family rejection based on their sexual orientation or gender identity face serious health risks, including being over eight times more likely to report having attempted suicide, over five times more likely to report high levels of depression, and over three times more likely to use illegal drugs compared with their peers. Conversely, the Family Acceptance Project demonstrates that LGBTQ young adults with an increased amount of family acceptance had significantly higher levels of self-esteem, social support, and general health compared to peers with low levels of family acceptance; and

Whereas, Sexual orientation and gender identity change efforts, commonly referred to as “conversion therapy”, pose critical health risks to lesbian, gay, bisexual and transgender youth, provoking mental health conditions that lead to anxiety, depression and suicide, while proven to be ineffective. One study, for instance, found that rates of attempted suicide by LGBTQ youth whose parents tried to change their sexual orientation were more than double the rate of LGBTQ youth who reported experiencing no sexual orientation change efforts; and

Whereas, Research by the American Psychological Association, the American Psychiatric Association, the American Academy of Pediatrics, as well as a 2019 study by the Trevor Project has found that sexual orientation or gender identity change efforts are ineffective and dangerous; and

Whereas, As of 2020, 19 states and the District of Columbia and Puerto Rico, plus 59 counties and cities recognize sexual orientation change therapies as harmful to youth, and therefore have implemented either laws or regulations protecting against so-called “conversion therapy” practices; therefore, be it

Resolved, That National PTA and its constituent associations promote and support educational programs that inform families and youth about the harmful impact of sexual orientation or gender identity change efforts; and be it further

Resolved, That National PTA and its constituent associations provide a list of available resources to assist states, districts, councils and local units in planning such programs that affirm all students, regardless of sexual orientation, gender identity and gender expression; and be it further
Resolved, That National PTA and its constituent associations advocate for and support legislation and policies that protect our youth from harmful, discredited programs that claim to change their sexual orientation or gender identity.