



## Commentary: A Position Statement on Sexual Orientation Conversion Therapies by Members of the Board of Directors of the Portuguese Society of Clinical Sexology (SPSC)

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Studies carried out in the most diverse scientific fields (in particular, medicine and psychology) refute any association between homosexuality and pathology. In the social sciences, the evidence points to the serious harm of such assumptions, both personally and socially.

In 1973, the American Psychiatric Association (APA), recognizing this evidence, removed homosexuality from its list of mental illnesses and went on to explicitly condemn any attempt of what some call *reorientation* or *conversion therapy* (Drescher, 2015).

Two decades later, in 1992, the World Health Organization took the same position (Cochran et al., 2014).

Nonheterosexual sexual orientation is not a disease, disorder, or clinical syndrome. It does not, therefore, make sense for mental health technicians, or others, to treat sexual orientation using techniques and procedures that aim to improve people's lives and should not serve personal moral convictions (Greene, 2007). Moreover, improper use of these procedures may aggravate the suffering of those seeking help on grounds of sexual orientation (APA, 2000; Pan American Health Organization & World Health Organization, 2012).

It is true that non-heterosexual sexual orientation is often associated with psychological distress caused by social and family exclusion,

bullying, social homophobia, violence, professional discrimination, heterosexism and internalized homophobia (e.g., Hall, 2018; Ross et al., 2018).

Moreover, the effects of homophobia are felt at different moments in the life cycle, and especially in the periods of psychological, emotional, and social transition, and thus of greater vulnerability. For this reason, promoting a nonpathologizing approach and reducing personal suffering, if any, of those who are homo- or bisexual, requires the mobilization of educational agents, citizens, and technicians to create a fairer, nondiscriminatory and nonhomophobic society.

Sexology, sexual therapy, and mental health specialists, when sought after, may use appropriate procedures to help nonheterosexuals to live adaptively according to their sexual orientation. If clinical professionals do not feel able to follow international clinical and ethical guidelines, due to personal values or lack of adequate training, it is their duty to those who seek their services, to refer them to clinicians that can conduct psychotherapeutic interventions that are guided by evidence-based intervention models that promote well-being and psychological adjustment (O'Shaughnessy & Speir, 2018; American Psychiatric Association, 2009).

Over the past decade, the positions on sexual orientation in this statement have been reinforced by international and national organizations such as the American Psychological Association (2008), the APA (2018) and the Portuguese Psychological Association (Ordem dos Psicólogos Portugueses, 2017).

The current position is in line with a previous position taken by Portuguese Society of Clinical Sexology 10 years ago.

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