

**MINUTES OF THE MEETING  
OF THE  
ASSEMBLY COMMITTEE ON HEALTH AND HUMAN SERVICES**

**Seventy-Ninth Session  
April 19, 2017**

The Committee on Health and Human Services was called to order by Chairman Michael C. Sprinkle at 1:41 p.m. on Wednesday, April 19, 2017, in Room 3138 of the Legislative Building, 401 South Carson Street, Carson City, Nevada. The meeting was videoconferenced to Room 4406 of the Grant Sawyer State Office Building, 555 East Washington Avenue, Las Vegas, Nevada. Copies of the minutes, including the Agenda ([Exhibit A](#)), the Attendance Roster ([Exhibit B](#)), and other substantive exhibits, are available and on file in the Research Library of the Legislative Counsel Bureau and on the Nevada Legislature's website at [www.leg.state.nv.us/App/NELIS/REL/79th2017](http://www.leg.state.nv.us/App/NELIS/REL/79th2017).

**COMMITTEE MEMBERS PRESENT:**

Assemblyman Michael C. Sprinkle, Chairman  
Assemblywoman Amber Joiner, Vice Chair  
Assemblywoman Teresa Benitez-Thompson  
Assemblyman Richard Carrillo  
Assemblyman Chris Edwards  
Assemblyman John Hambrick  
Assemblyman William McCurdy II  
Assemblywoman Brittney Miller  
Assemblyman James Oscarson  
Assemblyman Tyrone Thompson  
Assemblywoman Robin L. Titus  
Assemblyman Steve Yeager

**COMMITTEE MEMBERS ABSENT:**

None

**GUEST LEGISLATORS PRESENT:**

Senator David R. Parks, Senate District No. 7  
Senator Joseph (Joe) P. Hardy, Senate District No. 12  
Senator Becky Harris, Senate District No. 9  
Senator Scott Hammond, Senate District No. 18



**STAFF MEMBERS PRESENT:**

Marsheilah Lyons, Committee Policy Analyst  
Mike Morton, Committee Counsel  
Terry Horgan, Committee Secretary  
Trinity Thom, Committee Assistant

**OTHERS PRESENT:**

Mark H. Fiorentino, representing Gender Justice Nevada  
Brooke Maylath, President and Advocate, Transgender Allies Group, Reno, Nevada  
Holly Welborn, Policy Director, American Civil Liberties Union of Nevada  
Lea Cartwright, representing Nevada Psychiatric Association  
Diana Loring, Private Citizen, Reno, Nevada  
Stacey Shinn, Policy Director, Progressive Leadership Alliance of Nevada  
Wendy Stolyarov, Legislative Director, Libertarian Party of Nevada  
Ronald W. Lawrence, Private Citizen, Las Vegas, Nevada  
Kimberly Mull, Policy Specialist, Nevada Coalition to End Domestic and Sexual Violence  
Jared Busker, Policy Analyst, Children's Advocacy Alliance  
Ashley Clift-Jennings, Private Citizen, Reno, Nevada  
Sarah Collins, representing Nevada Psychological Association  
Richard Dalton, Private Citizen, Sun Valley, Nevada  
Laura Haynes, Private Citizen, Tustin, California  
Lynn Chapman, State Vice President, Nevada Eagle Forum  
Janine Hansen, State President, Nevada Families for Freedom  
Karen England, Executive Director, Nevada Family Alliance  
John Wagner, Carson City Vice-Chairman, Independent American Party of Nevada  
William P. Tarbell, Private Citizen, Sparks, Nevada

**Chairman Sprinkle:**

[Roll was taken. Committee rules and protocol were explained.] Is there anything from the Committee right now? [There was no response.] I will go ahead and open up the hearing on Senate Bill 201 (1st Reprint).

**Senate Bill 201 (1st Reprint): Enacts provisions relating to conversion therapies.  
(BDR 54-301)**

**Senator David R. Parks, Senate District No. 7:**

[Senator Parks spoke from prepared text ([Exhibit C](#)).] Senate Bill 201 (1st Reprint) prohibits conversion therapy for minors. Conversion therapy, sometimes referred to as reparative therapy, is a range of treatments that aim to change someone's sexual orientation from homosexual to heterosexual, as well as change someone's gender identity. Conversion therapy is a dangerous, unscientific, and unethical practice based on the premise that people can change their sexual orientation or gender identity. Conversion therapy has been

denounced and discredited by virtually all major American medical, psychiatric, psychological, and professional counseling organizations. Young people who have undergone conversion therapy have reported increased anxiety, depression, helplessness, hopelessness, social withdrawal, self-destructive behavior such as drug abuse, and, in some cases, they have committed suicide. The devastating consequences of conversion therapy are well documented. Today, mainstream medical establishments agree that conversion therapy does not work; that it is a dangerous, unscientific, and unethical practice based on the premise that people can change their sexual orientation or gender identity and expression. Medical science also recognizes that being lesbian, gay, bisexual, or transgender is part of the natural spectrum of human identity and is not a disease, disorder, or illness.

Senate Bill 201 (1st Reprint) simply states that a person who is licensed to provide professional mental health counseling with a patient under 18 years of age shall be considered engaging in unprofessional conduct and shall be subject to discipline by the relevant licensing entity if they provide sexual orientation or gender identity conversion therapy. This proposed legislation states that a mental health provider may not seek to change an individual's sexual orientation or gender identity if that person is under the age of 18. This includes efforts to change behaviors or gender expressions, or to eliminate or reduce sexual or romantic attractions or feelings toward other individuals. Leading medical and mental health experts from across the country and around the world have all condemned conversion therapy; however, this treatment continues to be practiced. At this point, the medical establishment agrees that conversion therapy does not work and can be abusive. Conversion therapy has been regarded as harmful by the following organizations:

- The American Psychological Association
- The American Psychiatric Association
- The American Medical Association's Council on Scientific Affairs [now Council on Science and Public Health]
- The American Academy of Pediatrics
- The Governing Council of the American Counseling Association
- The American Psychoanalytic Association
- The American Academy of Child and Adolescent Psychiatry
- The National Association of Social Workers
- The American School Counselor Association
- The Pan American Health Organization.

The states of California; Illinois; New Jersey; Oregon; and Vermont; and Washington, D.C., have already enacted laws protecting lesbian, bisexual, gay, transgender, and questioning (LBGTQ) youth from conversion therapy, and more than a dozen other states have introduced similar legislation. This bill was previously introduced in the 2015 Legislative Session. That bill was Senate Bill 353 of the 78th Session. It passed the Senate Committee on Commerce and Labor as well as the full Senate; however, it never got a hearing here in the Assembly.

It is also important to point out that prohibiting conversion therapy would not prevent religious leaders from counseling youth on sexual issues. I think that it is important to point out that religious freedom challenges to this type of legislation in several other states have withstood First Amendment challenges. According to our own United States Court of Appeals for the Ninth Circuit, conversion therapy prohibitions do not violate the religious freedom rights of mental health providers who wish to provide such therapy to minors or of the potential patients themselves. Let us be clear here, conversion therapy is nothing more than getting LGBTQ youth to hate themselves. Finally, I would like each of you to consider this: If conversion therapy really works to turn a homosexual into a heterosexual, why would it not work to turn someone who is heterosexual into a homosexual?

**Chairman Sprinkle:**

I will open this up to questions from the Committee.

**Assemblyman Edwards:**

I am glad you spoke about the religious exemption from this, because of the pastoral duties of all the clergy; however, I do not see that in the bill.

**Senator Parks:**

It is not specifically mentioned in the bill; however, there have been numerous actions taken by appeals courts where challenges have been made to the laws in other states. They have been unanimous in the opinion that they do not infringe on religious rights—neither the First Amendment nor the separation of church and state.

**Assemblyman Edwards:**

Would you be happy with a friendly amendment to add it to the bill so no one would doubt it?

**Senator Parks:**

I would want to see the wording first. I would certainly consider looking at wording that might do that.

**Assemblywoman Titus:**

As a physician, I joke that you can put 5 doctors in a room and you will get 15 different opinions about how to heal someone. I have heard testimony from medical professionals and counselors in support of the bill who agree that this bill is needed. I have also heard and seen written testimony from other professionals that this bill is not necessary. I am curious about this particular type of therapy. It seems egregious. Is this the only type of therapy that has risen to the level that we need a statute to ban a health care provider from performing it? I do not typically see medical procedures or counseling being banned.

**Senator Parks:**

One does not come to mind, but I am sure if we searched the *Nevada Revised Statutes* (NRS), we would probably find other prohibitions not too different from conversion therapy. There are other individuals who will be testifying who could probably give you a more complete answer.

**Assemblyman Yeager:**

I note the effective date is January 1, 2018. What is the thought behind an effective date so far out? Is it possible to make the effective date sooner?

**Senator Parks:**

We asked for that date so the various organizations would have the time to discuss it among their membership and provide whatever rulemaking was deemed appropriate.

**Chairman Sprinkle:**

Are there other questions from the Committee?

**Assemblyman Edwards:**

The bill speaks about conversion therapy as "any practice or treatment that seeks to change the sexual orientation or gender identity of a person . . . ." My concern is, if you have kids who are younger than 18 years old who are going through puberty and they do not have a lot of guidance, they may have a lot of questions and may need some professional to talk with. It seems as though this could preclude that counseling.

**Senator Parks:**

I tend to disagree with you. Discussions are certainly appropriate; however, when we are getting into conversion therapy, we are talking about a situation that deals with a much deeper level of discussion. It typically goes along the lines of, "That is not what you are feeling. You should be acting in a very different way. You should deny those feelings you may have. You should have different feelings." If we look back, many years ago we used shock therapy. It was a fairly common practice to try to dissuade people from the thoughts and feelings they had.

**Assemblyman Oscarson:**

The bill refers to "disciplinary action." Are you going to propose anything in your bill concerning what that disciplinary action would be? Would you leave it up to the boards to determine what the process for an infraction might be, and how would you prove it?

**Senator Parks:**

The intent was to let the various organizations set whatever rulemaking they wished to promulgate about this. It would be up to an organization to regulate its membership. It would be totally independent from what would be placed in statute.

**Chairman Sprinkle:**

You had a rather significant list of accredited institutions that have come out in opposition, as you stated in your opening testimony. Is there any list of accredited scientific institutions that are supportive of conversion therapy that you are aware of?

**Senator Parks:**

I am totally unaware of any. I cannot find any accredited organization that supports conversion therapy.

**Chairman Sprinkle:**

I will now call up anyone in support of S.B. 201 (R1).

**Mark H. Fiorentino, representing Gender Justice Nevada:**

I am here this afternoon on behalf of Jane Heenan, Director of Gender Justice Nevada, with apologies that Jane could not be here to testify in person. I want to point out that Jane submitted written testimony ([Exhibit D](#)), and we ask that you review it as part of your deliberations. Obviously, the organization supports the adoption of the bill.

**Brooke Maylath, President and Advocate, Transgender Allies Group, Reno, Nevada:**

Paraphrasing the written testimony I submitted ([Exhibit E](#)), methods known as conversion or reparative therapy are based on developmental theories whose scientific validity has been very questionable. There have been many recorded cases of harm, some of which you will hear today. All of these are designed to put a person in conflict with those feeling that are immutable within. It creates substantial psychological harm to reinforce those damaging, internalized attitudes. In our opinion, this is nothing less than child abuse. When we look at the statute in Nevada concerning child abuse, it clearly states that it is an abuse of a child by physical or mental injury of a nonaccidental nature. There is nothing accidental about turning a child against his or her immutable sense of self. That will cause injury. There is no excuse for a licensed professional to go forward with that kind of damaging activity to try to be able to "pray the gay away." There is also no religious exemption for child abuse.

This bill only applies to licensed providers who have a privileged license from the state of Nevada. Those who hold a privileged license from the state have a duty to maintain their professional ethics at all times. There is no exemption to be able to step away from your professional ethics to abuse and harm another human being.

**Holly Welborn, Policy Director, American Civil Liberties Union of Nevada:**

We looked up a few different types of alternative therapies that have been banned in the state of Nevada and in other states. Examples include rebirthing therapy and psychedelic therapy. Electroshock therapy is regulated in several states, including Nevada. Seven states have passed similar legislation to what is being presented here today, and there are 15 states with pending legislation. Psychiatric associations are recognizing this as a practice that has no validity. They are debunking some of these methodologies medically. When we are looking at the issue of conversion therapy, we are talking about a long-term history of discrimination against the LGBTQ community. These therapies are incredibly invasive. They include

shock treatments, lobotomies, excessive porn, and putting young people in situations where they are made to simulate heterosexual sex. This is an invasive therapy that is damaging to children. A lot of that has changed to themes where one tells the child that he or she is inherently wrong and that he or she was born with some kind of abnormality. This is not healthy for any adult, and it is certainly not healthy for children.

Although the *U.S. Constitution* protects speech, physician/professional communication may reasonably be regulated. It is true that doctor-patient communications are entitled to the strongest protection our *Constitution* has to offer; however, those communications are not immune from regulation. If the regulation is consistent with the norms of medical practice, then the regulation would stand. Senate Bill 201 (1st Reprint) seeks to codify professional, ethical standards largely adopted by all medical and mental health associations in this country. There is no reliable evidence that conversion therapies are effective treatments, nor that a person's sexual orientation can be changed. There is evidence, however, that conversion therapies cause harm and pose serious risks to participants' mental health. This is particularly true for young people.

The medical autonomy interest requires that we apply a balancing test. The state has a heavier interest in protecting the rights of children and their personal health autonomy. The protection of that state interest outweighs the interests of the [freedom of] speech in these cases when it comes to these children. We say that today as the American Civil Liberties Union, which is something we typically do not get behind, but we are talking about the liberty interests of the child and whether or not they actually get to make choices in their health moving forward. This legislation is that important.

**Lea Cartwright, representing Nevada Psychiatric Association:**

We want to reiterate our support for this bill, and we supported it on the Senate side. The American Psychiatric Association took a strong stance against conversion therapy in 1998, so we are happy to support our parent organization at our state level.

**Diana Loring, Private Citizen, Reno, Nevada:**

[Diana Loring spoke from prepared text ([Exhibit F](#)).] I have been a woman for as long as I can remember. I am here in support of S.B. 201 (R1). Conversion therapy does not work; conversion therapy is wrong; conversion therapy is dangerous; and conversion therapy kills. Here are a couple of examples of conversion therapies that have been used in the past. Throughout the 1940s and into the early 1950s, they would peel back each eyelid, insert an icepick, run it into the brain, wriggle it about, sever the frontal lobes which wrought a lobotomy. This procedure was sometimes done in an office and could be done in a matter of minutes. In electroshock therapy, they would attach electrodes to your genitals and shock you. I do not know about you, but if someone put electrodes on my genitals and shocked me, I would tell them anything they wanted to hear to make it stop.

Today's techniques are more psychological. Conversion therapy typically encourages people to change or conceal who they are, convincing them that their sexual orientation or gender expression is a source of shame or danger. There are those in this room this afternoon who

will tell you this bill takes away their rights to choose what is best for their children. My question to them is, what about their child's right to their gender identity? Transitioning is a struggle you cannot imagine. It is a journey I doubt many of you can make. Please protect the children of Nevada who feel like me and vote yes for S.B. 201 (R1). You may not always be comfortable when you see us, you may not always understand our world, but I do hope you understand that we are a part of yours.

**Stacey Shinn, Policy Director, Progressive Leadership Alliance of Nevada:**

I am speaking today from the perspective of my background as a social worker. In 1992, the National Association of Social Workers National Committee on Lesbian, Gay, and Bisexual Issues recognized the emergence of misleading therapies and released the following statement for its members:

. . .the increase in media campaigns, often coupled with coercive messages from family and community members, has created an environment in which lesbians and gay men often are pressured to seek reparative or conversion therapies, which cannot and will not change sexual orientation. Aligned with the American Psychological Association's (1997) position, NCLGB believes that such treatment potentially can lead to severe emotional damage. . . . No data demonstrate that reparative or conversion therapies are effective, in fact, they may be harmful. . . . The literature indicates that "interventative therapies" that attempt to alter sexual orientation of lesbians and gay men have succeeded only in reducing sexual behavior and self-esteem, rather than actually shaping attractions of opposite gender.

Practicing discriminatory therapies like conversion therapy is against our national code of ethics, and as a profession that is nurturing and supportive to the LGBT community; we would like to see this become policy in Nevada.

**Wendy Stolyarov, Legislative Director, Libertarian Party of Nevada:**

[Wendy Stolyarov spoke from prepared text ([Exhibit G](#)).] The Libertarian Party of Nevada abhors so-called conversion therapy, especially its use on minors. We believe that sexual identity is naturally diverse, and that people should never have their minds or bodies violated simply because of who they are or who they love. The moral depravity of torturing children for not conforming to a heteronormative paradigm is odious beyond speech. Not only is conversion therapy unspeakably cruel, it is wholly ineffective. Thousands of people have suffered through it yet remain unchanged though they carry the emotional, and sometimes physical, scars for life.

Childhood exposure to conversion therapy can cause anxiety, depression, homelessness, drug abuse, and suicide. Even if conversion therapy did work, though there is no evidence that it does, it would be a solution in search of a problem if there is nothing wrong with LGBT people being who they are at heart. According to the Human Rights Campaign, California, Illinois, New Jersey, Oregon, Vermont, and the District of Columbia, have passed laws to prevent licensed mental health providers from offering conversion therapy to minors.



The Libertarian Party of Nevada strongly urges you to add Nevada to that list. We endorse S.B. 201 (R1) in the strongest possible terms, urge you to support it as well, and thank Senator Parks and his cosponsors for bringing such an important and compassionate bill forward.

**Chairman Sprinkle:**

At this point, I am going to go down to southern Nevada.

**Ronald W. Lawrence, Private Citizen, Las Vegas, Nevada:**

[Ronald Lawrence spoke from prepared text ([Exhibit H](#)).] I have been a licensed marriage and family therapist in Nevada for 30 years, and I am currently a certified supervisor for the American Association for Marriage and Family Therapy. I supervise 30 psychotherapists here in Las Vegas, Nevada. My deep concern in being here today to support S.B. 201 (R1) is because I have been in the trenches with this issue. In the past decades that I have been a practicing therapist, I have treated scores of young people who have been victimized by reparative therapy in their teenage years. Talking about theory, I talk about the astounding work of psychosocial theorist Erik Erikson, who tells us that the psychosocial task as far as development is concerned in the teenage years is basically identity formation. If identity formation does not happen, it is identity diffusion—we end up having young people who really do not know who they are because they have been subjected to reparative therapy.

I have had people in my office who have experienced every type of reparative therapy one can imagine. Even though I have such responsibilities and am in charge of so many people, I make it my personal business to staff these cases and help them any way I can. I have had people who had electrodes attached to their genitals, as previously mentioned. People have had their flesh burned from these electrodes. There were people who had ammonia shoved up their noses as a deterrent for having homoerotic thoughts. It has taken me into deep research where I know for sure that the biogenetic nature of humanity is to be the patchwork quilt that we are. The latest information from The American Society of Human Genetics tells us this is so.

I want to talk a bit about what this shameful process of reparative therapy is like. What happens to our young people in their teens is that they question their sexual orientation. We know their hormones are surging and that attractions occur. These young people know more about who they are attracted to and what gender they are versus knowing who they really are as people. Reparative therapy interferes with that process of creating an identity formation. The end result is there is not one person who I personally treated for reparative therapy who does not have posttraumatic stress disorder (PTSD). When I say posttraumatic stress disorder, I mean PTSD equal to a battlefield soldier.

I am here to say that S.B. 201 (R1) is an absolute necessity if we are going to bring love and compassion and help people find their authentic selves in psychotherapy versus harming them by telling them they need to change who they are. I appeal to the legislators in front of me to pass this bill. I have seen the worst of the worst. I have had to do repair operations in

regard to the families who lost two children to suicide during reparative therapy. I know who the therapists were—the people who perpetrated this—and I have deep regrets about the fact that there was nothing I could do.

**Kimberly Mull, Policy Specialist, Nevada Coalition to End Domestic and Sexual Violence:**

Ditto.

**Jared Busker, Policy Analyst, Children's Advocacy Alliance:**

We are in support of this legislation.

**Ashley Clift-Jennings, Private Citizen, Reno, Nevada:**

My story is not unique. I was a nationally ranked soccer player, top of my class academically, and popular with my peers. I was also confused as to why I was attracted to both boys and girls. I was also a very committed member of my church. I knew my church's policies on same-sex relationships. Naturally, this put me in a bind. Thanks to my own thoughts and feelings about my sexual orientation, I felt a tremendous amount of anxiety and cognitive dissonance, mostly because I also loved my church, my God, and my youth group. I truly assumed it had something to do with sexual abuse being in my history, and set about fixing this thing that was broken inside me. I took matters into my own hands and enrolled in reparative therapy. My parents were not religious and did not encourage me to do this. They actually encouraged me to be my authentic self. Sadly, I did not follow their direction; but I refused because I really did not want to accept that I was a flawed human being who had something wrong with me—which I had learned from my church community. I prayed and tried everything my church family suggested at the time to get rid of these feelings. Then I was encouraged to attend Exodus International meetings. Exodus International, if you are not familiar with this organization, was a nonprofit interdenominational ex-gay Christian umbrella organization connecting organizations that sought people who wished to limit their homosexual desires. It started in 1976 and ceased activities in 2013.

In 2013, the former chief executive officer, Alan Chambers, publicly apologized to the LGBT community for the pain and hurt Exodus had caused them and announced that the ministry was permanently shutting down. Chambers' decision effectively delivered the death blow to the beleaguered ex-gay movement at the time. He said that he never saw one of the members or Exodus leaders become heterosexual, so deep down, he knew that it was not true.

After two years of reparative therapy, it became very clear to me that my orientation was not changing. Unfortunately, that caused me to become even more disconnected from myself and my peers. The only option I had at that point was to deny my feelings existed and to continue living outwardly as a heterosexual person. While attending an Ivy League school, I was literally at times stuck in my dorm room, unable to socialize, and suffering from a deep depression. I got on medication and was in counseling for four years, but these feelings still did not go away. Four years of a world-renowned education that cost the price of a small

house was wasted because I was struggling so hard with my identity. I found it hard to focus on anything outside my own anxiety and cognitive dissonance. Thankfully, I escaped with over a 3.0 grade point average, but I cannot say that I felt like a whole person.

Today, thankfully, I have accepted my sexual identity as a bisexual woman; however, I spent over a decade in denial, walking around with a tremendous amount of anxiety and guilt. It affected my self-esteem and my fear of emotional intimacy with other people. It was a cage I wish I had the key to many years ago. Reparative therapy was once an extremely alluring solution to my inner struggle; now I realize it only prolonged my struggle and quite literally held me back from living an authentic and emotionally healthy life for over a decade. I am extraordinarily grateful for the courage of Senator Parks to bring this bill to the Assembly, and encourage the legislators to support this bill. I am strongly in support of this bill, and I cannot begin to imagine the pain of minors who would be forced by their parents to go through this type of therapy. I was a willing participant.

**Sarah Collins, representing Nevada Psychological Association:**

We have submitted a letter in strong support of S.B. 201 (R1) ([Exhibit I](#)). The Nevada Psychological Association (NPA) believes it is important to put the following on the record: The NPA stands in unequivocal support of S.B. 201 (R1). Numerous organizations have provided statements over the past two years opposing the idea that homosexuality is mental illness and that sexual orientation or gender can be "cured" or "repaired." We assert any treatment designed to cure homosexuality is based on ignorance and unfounded beliefs about same-gender sexual orientation or attraction. Senate Bill 201 (1st Reprint) provides a measure of protection for unsuspecting minors or families who may fall prey to counselors claiming that they cure or repair sexual orientation or gender identity.

**Richard Dalton, Private Citizen, Sun Valley, Nevada:**

I am very much in support of S.B. 201 (R1). I have a lot of friends who went through reparative therapy. All of those friends still have what has been mentioned—PTSD. I have friends who went through electroshock therapy. The trauma was horrific; this needs to stop. It needs to stop happening to our children. I urge you to vote in favor of this because it causes harm that is irreparable. The damage to a person's psyche does not change. You can grow to love who you are, you can grow to love who you have become, but the damage done by well-meaning parents, pastors, social workers, and others has to stop. I wish that we could outlaw this against the churches and against pastors. I know that is not possible because of First Amendment rights, but it needs to stop in the churches, because the church is the primary problem. This bill at least works toward stopping the therapists, and I applaud the efforts made by Senator Parks and the Senate passing it. I urge you to pass this bill.

**Chairman Sprinkle:**

At this point, we will bring up anyone in opposition to S.B. 201 (R1).

**Senator Joseph (Joe) P. Hardy, Senate District No. 12:**

[Senator Hardy spoke from prepared text ([Exhibit J](#)).] We have heard real, tragic histories. We three Senators voted not in favor of the bill; yet we are not in favor of conversion therapy. Because of the way the system works in the Legislature, we do not come up in favor of something if we are proposing an amendment that has not been termed to be "friendly" ([Exhibit K](#)). The amendment is not a friendly amendment only because the bill's sponsor has not accepted it as a friendly amendment. If you look at the amendment, you will find that it does not really change the fact that conversion therapy is not a good thing. If we do not really believe in conversion therapy, then we probably should not be paying for it or allow anyone else to pay for it, but that is another issue. I was appreciative of the reality that there is not an organization I know of that supports conversion therapy. As far as professional ethics are concerned, I think anyone in the caring professions is interested in the individual.

This is the Legislature. We are familiar with how the process works. If we come to something we know is going to be a concern, that we know is a problem in implementation, it behooves us to say something. In order to say something, we have to say we will not vote for it because of the problems that are going to exist.

My hat is off to the people who have had the courage to share today, and I admire what they have been able to teach us in the way of empathy and sympathy and understanding. You have the comments I made on the floor of the Senate about this bill ([Exhibit L](#)): "I am not in favor of conversion therapy," and then I went on about the concerns I had that were not answered, as we usually do in the legislative process, with an amendment. So that obligation put me in the position where I needed to speak out and change, if possible, what has happened. In as much as I am opposed to conversion therapy and the aversive and demeaning ways of it you have heard about, I feel that the bill can be refined to protect the agency and health of questioning youth.

When I first read the bill, it left out the "Q"—the questioning youth. I believe that there are some people who will have depression, anxiety, or mental illnesses separately and distinct from any other identity that they may have as far as being LGBTQ. People who are not in such an identity deserve to be treated as well as the LGBTQ community if they have depression, anxiety, or any other problem by competent, accessible professionals, and this should not be considered conversion therapy. I worry that if a professional counselor of any kind is serving, as I was, as a bishop—an ecclesiastical calling—and is approached by a questioning youth, the professional should be able to mentor or protect the agency and the self-determination of the youth without having such interaction be called conversion therapy.

Likewise, the pastor, bishop, preacher, cannot break the bonds of confidentiality about such an interaction. Having been trained as a physician and having served as a bishop, I have had to maintain a Chinese wall between my two roles. Both roles have been to help and not harm, or even to limit, the agency of an individual. As a professional acting in the role of a bishop, for instance, no one who is a professional would be doing a person a favor if they did not warn them about the dangers of unsafe sex. That is one of the problems I had with the word "behaviors" in the original bill. Warning of the possible risks of sexual behavior

should not be considered conversion therapy. That is why I have, working with Senator Harris and Senator Hammond, proposed the amendment you have before you, removing "behaviors" and substituting "a" for the word "any" and clarifying the role of the psychotherapist so a questioning youth would not be frozen out of seeking a mentor who is both trusted and competent.

**Chairman Sprinkle:**

As the person bringing this amendment forward, I am going to allow the Committee to ask a few questions about your amendment.

**Senator Hardy:**

In the rush of things, I did not get other people's names on it as cosponsors, but I would be happy if they wanted to weigh in on the amendment, because it is theirs as well.

**Assemblywoman Miller:**

My question concerns understanding religious exemptions for this bill and the fact that someone may go to a minister, pastor, or priest for questions. The bill seems to guarantee that this could not be forced on a minor due to the parents forcing it on the minor. With this amendment, how do we still protect the kids? How do we guarantee that if a child under 18 years of age does go to their religious leader, that it is not being forced by a parent?

**Senator Hardy:**

I appreciate the word "force" because in life, something I uphold dearly is that concept of agency. I cannot force anybody to do anything. There are people who do not believe that; some of them we call parents. The reality is that we have an uphill battle trying to raise children in such a way that we do not hurt them any more than we are going to anyway. I have eight children; they are all smarter than me, so you will have to ask them how it happened. I do not know that there are any guarantees in life. Realistically, I think this bill will actually help people understand the reality of agency and the reality of choice. I do not have an easy answer for you.

**Assemblyman Edwards:**

I like the definition you included about conversion therapy. It seems to me you are talking about counseling sessions and not aversion therapy, which would be the electric shock, the ice water, et cetera. What you are saying here is that conversion therapy is simply a matter of counseling—a verbal kind of approach.

**Senator Hardy:**

I feel that the methods that have been aversive and reparative that we heard are egregiously horrible. They should not be done. Obviously, some things like lobotomies are not done any more. They used to be done for all sorts of things and not just a conversion or reparative therapy. I stand in support of halting those kinds of things, and I stand in support of the amendment because it allows clarity concerning what can be done and by whom, and allows more refinement to the legislation than just using the definition.

**Assemblyman Yeager:**

I have a question about the definition section of conversion therapy. I see that you are removing the term "behaviors." It says what you are not allowed to do, and that is sort of a subsection. It says, "including . . . treatment that seeks to change behaviors or gender expressions." What is the rationale for removing the words "behaviors or?" Are there certain behaviors you are trying to get at that you do not think fit into the definition of conversion therapy that we have been talking about?

**Senator Hardy:**

You are exactly right. "Behaviors" can be risky if you are the professional, the parent, counselor, or the religious person who misses the opportunity to say, "Unsafe sex is unsafe for a reason." If you are going to act out on any behavior or any inclination, either homosexual or heterosexual, it behooves those of us who know what the risks are to tell people what the risks are. We do not need people risking themselves or others in a situation that may or may not be compatible with whatever identity they identify with.

**Assemblyman Yeager:**

I am somewhat confused, because on page 2 of the amendment mock-up ([Exhibit K](#)), at line 7, there seems to already be an exemption for counseling that addresses unlawful sexual conduct or unsafe sexual practices. I see that already as not being a definition of conversion therapy. I understand where you are coming from with behaviors, but is there some kind of behavior that would not fall into the rubric of unsafe sexual practices that you are trying to get at by striking that word?

**Senator Hardy:**

Your understanding is as my understanding is, and all the more reason to cross it out because it is not needed. It is defined later. I do not need to have that same "By the way, this is what I mean by behaviors" there, when it is defined on the next page.

**Chairman Sprinkle:**

Was this amendment initially presented in the Senate and not accepted, or is this a new amendment you are bringing here to the Assembly?

**Senator Hardy:**

This is a new amendment. I stood on the floor of the Senate and stated my concerns. That is why I included my floor statement as testimony. That floor statement was not considered in the Senate during the vote. After the vote, I needed to do something that would allow me to state clearly that I am not in favor of conversion therapy. I think it is reprehensible, and I think that we should not be doing it. At the same time, I have an obligation, as a legislator, to move this forward in such a way that it refines what we have already defined.

**Chairman Sprinkle:**

Thank you for clarifying that for me. Are there any other questions on the amendment? [There were none.] All right, if you would like to go ahead and give us your comments.

**Senator Becky Harris, Senate District No. 9:**

My concerns and my portion of the amendment came through a little different process that I would like to outline for the Committee. After the vote, I had a moment to talk to the sponsor of the bill, Senator Parks, and outline my concerns to him. My concerns are a little more nuanced than Senator Hardy's. My concerns come in the context of mentoring. Senator Hardy and I had a conversation about the ability to propose an amendment, and he said he would be willing to consider an amendment. That is how my portion of this amendment comes before you today.

I want to go on the record as saying that I condemn conversion therapy, and I certainly think that the Legislature should take steps to root it out wherever it is found. I agree that psychological harm and child abuse should be avoided, rooted out, condemned, and guarded against. I think young people should be free to have their own self-determination about what is right for them. I think we need to root out the bad actors. After I heard the testimony on the Senate floor, my concern was that we may be excluding mentors to whom the LGBTQ youth might naturally turn on the basis of their particular professions. Often in committee testimony, we hear how these young people feel isolated. They feel as though they do not have resources; they feel as though there is nowhere for them to have their conversations. We have good, quality individuals who are psychiatrists, psychologists, social workers, nurses, and marriage and family therapists who volunteer in the community and who condemn conversion therapy. These people are known to these youth as their coaches or their music teachers or through the Boys and Girls Clubs. To inadvertently cut youth off from having conversations with their coaches or mentors about their concerns would be doing a disservice to these children. That is how Senator Hardy and I started talking about giving people of particular professions the ability to have conversations with youth outside of a private practice when they are not acting in their capacity as medical providers and the young people are not patients seeking medical treatment from those providers. If the youth cannot go to their parents or they do not have someone else they can talk to about their questions, they should at least be able to ask some questions and possibly be referred to some resources. I thought the language in the original bill was a little bit broad in that we are, perhaps inadvertently, cutting off an ability for these young people, who have all kinds of questions, to be appropriately and effectively mentored.

The amendment talks about members of a particular profession who are not acting in their capacity as medical providers. I would like to see an exception. I think cutting off mentors can be a dangerous thing. Most qualified medical providers condemn conversion therapy. Certainly, they should be subject to discipline where it exists and we should not be engaging in those types of practices, but I think there is a very real mentor capacity that we need to not overlook.

**Senator Scott Hammond, Senate District No. 18:**

My two colleagues have stated why we brought the amendment, and they have done a really good job. I am not going to belabor that, but I will just say that when we take votes, it is very difficult sometimes. There are some votes that are more difficult than others, and this was one of them. I know the history of conversion therapy. In the past, we have had people use

shock, lobotomy, even excessive porn. There are a lot of bad things out there, and I condemn those practices as much as anybody. I do not believe that is what, as a society, we would like to embrace; however, when the concerns arose, and as I spoke with my colleagues, I understood there were several things we wanted to address. This amendment, I believe, does that.

When you look at the word "any," that might be too broad. We are talking about someone's agency. Even if a questioning youth came to you, you would not be able to respond to those questions with anything beyond just a listening ear. That is not always bad, but sometimes they do want to get a response from a mentor or from a coach or from someone. I certainly think we should leave that opportunity open so that someone can respond and talk to a youth and acknowledge the fact that the youth might be having a difficult time. Agency is important. That youth ought to be able to come to someone and get a response.

I am grateful for the opportunity to come before you today and present this amendment to you. The sponsor of the bill did a tremendous job. I understand that he had to go through a lot in life to get to this point where he can present a bill like this, be understood, and have the success I think he is going to have with the bill. I also am grateful that he has had the experiences that allow him to listen to what we are trying to present to you today. Sometimes, when you define something, it can be redefined a little more clearly, and that is our attempt this afternoon—define this a little more clearly and bring balance to this law so we can do a service to the youth of this state, as well as others who are questioning or wondering who they are and where they are going in life.

**Chairman Sprinkle:**

Thank you. Others in opposition to S.B. 201 (R1), would you like to step forward?

**Laura Haynes, Private Citizen, Tustin, California:**

I am a California-licensed psychologist and member of the American Psychological Association (APA) and the Alliance for Therapeutic Choice and Scientific Integrity, a national organization of therapists who provide therapy for unwanted sexual orientation and gender identity (SOGI). These therapists do not coerce therapy on minors, even if their parents want us to, and never use electric shock or aversive methods.

A recent ABC News hit piece on conversion therapy was unable to present any negative evidence against any licensed SOGI psychotherapist. The Southern Poverty Law Center has admitted, in a paper it posted in May 2016, that conversion therapy does not include electric shock or aversion therapy. We challenge therapy opponents to produce the name of one licensed mental health professional who is using electric shock to bring about SOGI change in minors.

Regarding a transgender girl who tragically committed suicide, her note said she went to Christian therapists. Few Christian therapists are trained in therapy for SOGI change, and there is no evidence her therapists were professional SOGI-change therapists. No research



shows youth who committed suicide had SOGI-change therapy. The American Psychological Association says in its authoritative *APA Handbook of Sexuality and Psychology* that no one is born gay. It says that biological factors taken together do not determine sexual orientation or gender identity. The *APA Handbook* and excellent research say that most, by far, who experience same-sex attraction also experience opposite-sex attraction, and their sexual attraction normally changes, mostly toward or to exclusive opposite-sex attraction. The exceptions are the minority. The *APA Handbook* says the vast majority of children who experience gender dysphoria come to accept their natural body gender by adulthood if allowed to.

It makes no sense to hide the truth of change and withhold help from the vast majority who may overcome their same-sex attraction or gender dysphoria and benefit from therapy. Six hundred publications, mostly peer-reviewed, show successful sexual orientation change through therapy. The authoritative *APA Handbook* says that excellent research shows there is a potentially causal relationship between childhood sexual molestation and ever having a same-sex relationship. How does S.B. 201 (R1) help children whose same-sex attraction was forced on them by child abuse and who want help to change their sexual attraction and behavior? Can you bring yourself to abuse child abuse victims again by depriving them of therapy?

**Lynn Chapman, State Vice President, Nevada Eagle Forum:**

I will be addressing page 2, lines 4 and 5 of the bill, ". . . a person who is under 18 years of age regardless of the willingness of the person or his or her parent or legal guardian to authorize such therapy." We have been hearing about therapy and how good therapy is for anything or everything that is affecting your family; in fact, it is encouraged. We are all broken. Every person is broken; we all have things we are either trying to change, we have problems, and sometimes we need advice. What do we do? Especially for women, we go to other women and we talk to friends. We talk to family, we talk to our parents, or we talk to doctors.

As a parent, I will do whatever it takes to help my child. When my daughter was under 18 years of age, there was nothing I would not do for my child to help her with whatever she needed. If it was bringing her to a doctor because she was ill or had questions, that was what I would do. Mathew Staver, founder and chairman of the Liberty Counsel, made a comment. He said, "Clients have the right to self-determination. They have the right to pursue their own counseling goals and to align their conflicts with their prioritized religious and moral values." Some people really want counseling. They need counseling, so why should they be prohibited from counseling?

**Janine Hansen, State President, Nevada Families for Freedom:**

I would like to talk about a couple of issues in this bill. None of us support extreme conversion therapy ideas, and most of those are not taking place any more. It is interesting to note that this bill bans talking about these issues. How can you have therapy if you cannot talk about it? That is one of the big problems with this bill.

In the *Nevada Revised Statutes* we should note that, if it is the compelling state interest to protect children from shock therapy or aversion therapy, then the language of the bill should specifically address the exact treatments it seeks to protect. It is compelling to note that Nevada minors are allowed to receive electroconvulsive therapy, known as shock therapy, provided informed consent is given. This treatment is covered by Medicaid. If you do not want this to happen, then you need to ban it under the uses of Medicaid, and you need to be specific in the bill as to what you are banning—not just talking about something. That really needs to be addressed in this bill, and it has not been. We are combining these extreme kinds of things such as shock therapy with just talking with a youth about some of these issues, and I think that is a big mistake.

Also, this bill violates parental rights. Subsection 1 of NRS 126.036, which was passed unanimously by this body in 2013, says, "The liberty interest of a parent in the care, custody and management of the parent's child is a fundamental right." And of course, the U.S. Supreme Court has reaffirmed numerous times the fundamental right of parents, referred to as the parental rights doctrine to preserve the fundamental rights of the parent-child relationship. Many Supreme Court decisions do that, so this bill interferes with that right. It also takes away the right of the child. It is not just the parent's right that is being taken away. Say a 17-year-old child wants to choose to go to a therapist who might talk to him or her about some of these issues. Children are forbidden from doing it for themselves. Although many of these groups say that they believe in choice, they do not believe in choice for the parents, and they do not believe in choice for the child.

I want to talk about a couple of other issues I am concerned about. One is that there is no definition in the bill about what conversion therapy is, unless you are covering talking to people. What about a psychotherapist who serves as a lay minister in their church? Would they then be prohibited about talking about these issues? What about a Sunday school teacher or a young women's leader? Would they be prohibited from discussing these issues with a child or young woman who came to them wondering what was happening? There is no clarification in this bill. There are absolutely no religious protections in this bill. If you want to protect those, they need to be in the bill, because otherwise, they will just be ignored and people could be held accountable in ways we cannot anticipate.

This bill also violates the doctor-patient relationship in that it precludes what they can talk about. Talk about. We are not in favor of other kinds of therapy; we are in favor of talking about things. I am concerned that the next stop in this agenda would be to charge parents with child abuse who share religious beliefs that oppose the LGBTQ agenda. They are prohibiting them here. Is that the next stop? I hope you will look at this bill a little more closely and remove the idea that people cannot talk about these issues. And also, protect religious liberty, protect parents, and protect the rights of the child. They have the right to make decisions, too, but it is denied them in this particular bill.

**Karen England, Executive Director, Nevada Family Alliance:**

I would like to read a letter into the record from the National Task Force for Therapy Equality ([Exhibit M](#)).

**Chairman Sprinkle:**

I would ask if you are reading it and it is new information, that is fine. If it is redundant, we have it already submitted on the Nevada Electronic Legislative Information System (NELIS), and we are running out of time.

**Karen England:**

Is there a reason I cannot read it into the record? He wanted to testify, but you denied him the right to testify by phone.

**Chairman Sprinkle:**

I just told you exactly why.

**Karen England:**

I will go on to my points. The American Academy of Pediatrics is an organization of licensed professionals similar or comparable to the American College of Pediatricians and the American College of Physicians, and they do not agree that talk therapy should be banned. I think there is a fundamental misconception about the definition of conversion therapy. If this bill, or any amendments that the Senators proposed, were to define conversion therapy as shock therapy, ice bags, any of that, I would be the first to stand with Senator Parks and have a press conference saying that I agree—we should ban that. However, there are serious problems when this Legislature is going to do something like banning talk and prohibiting minors, many of whom have been abused, or who do not know if their same-sex attraction is unwanted, and actually want to talk to a therapist about it. Unless that therapist is 100 percent affirming, this proposed law prohibits them from having that discussion.

I do not know if you have done any of the research on same-sex attraction and minors—especially boys who have been abused—but it is common for them to wonder. What does that mean? In the end, they may turn out to still have same-sex attraction, but this bill prohibits them from really exploring anything but affirming that. We are not going to be helping kids if we are going to limit speech, and of all people, the speech of therapists and counselors. I do not have the perception that they are automatically bad and want to change the person; I actually think most people who go into therapy, counseling, and psychology actually have a heart for the people who are hurting and want to help them and not change them. So, please, do not ban talk.

**John Wagner, Carson City Vice-Chairman, Independent American Party of Nevada:**

We also do not want therapy that is going to do any damage at all, physically, to the subjects, whether male or female. I have no problem with speech or talk. The way I read this bill, the parent cannot allow anyone to talk to the child, and I think that is wrong. I think you should be able to talk but there should be no physical violence of any type on the child. I do thank Senator Parks for bringing this forward. He wants to get rid of that kind of therapy. I think that is child abuse if you are shocking people and putting cold water on them. That is wrong and, in that respect, I agree with him, but I do think we should be able to have speech.

**William P. Tarbell, Private Citizen, Sparks, Nevada:**

[William Tarbell spoke from prepared text ([Exhibit N.](#))] I am here in opposition to S.B. 201 (R1) in its present form. When this bill first came up a couple of years ago, it did not contain a specific reference to gender or transgender identity. That has been added since then. I raise the question, What is the science that promotes that particular identity being added? Also, the bill appears to be protecting all forms of orientation—heterosexual, bisexual, and asexual. I assume, therefore, that this bill would prevent any intervention with any of those orientations so defined in a law before the Legislature at the present time.

When I was 15 years of age, I made a decision to enter a church-related occupation as an ordained minister. I had a number of issues to work through as a teenager. If one of them had been same-sex attraction, knowing the standards of the denomination to which I belonged, I would have wanted to seek some assistance in dealing with that attraction. My fundamental identity as a young man, as a Christian, as a person seeking that occupation, would have led me to do what was necessary to deal with that particular attraction. This bill would prevent anyone under 18 from seeking some assistance in sorting it out, working it out, or whatever it might take. Reparative therapy of the sort that has been described here is horrible, and I would not have been looking for such therapy. I would, however, have been looking for someone to help me discuss it, think it through, and work it out. If it is the case that anyone under the age of 18 could not do that, I would then see this bill as negative.

Finally, there has been an assumption for some decades that fixed orientation, at least in regard to human sexuality, is a fact. I spent 40 years looking into this, studying it from every angle, going to meetings, listening to presentations, and I have yet to find firm, hard science that actually supports the idea of fixed, immutable orientation of any kind. That is why all the major religions of the world would have a problem with this bill, because all of them hope that a person may change, no matter how deeply they hold the sense of a particular identity; they all look to the possibility of that change which would move them into a different lifestyle. That would be a problem for anyone in a religious sense. Fixed orientation rules out what the world's religions have always held is possible for a person.

**Chairman Sprinkle:**

Is there anyone wishing to come forward under neutral in either southern or northern Nevada? [There was no one.] Senator Parks, would you like to come back up?

**Senator Parks:**

Thank you for taking the time to give this bill a thorough hearing. I would like to make a couple of comments to, hopefully, clarify some of what we heard from the opposition on this bill. This bill makes clear that the law regulates conduct only within the confines of a counselor-client relationship, and does not apply to clergy, even if they also happen to hold a state mental health practitioner license when carrying out their clerical function.

The amendment was only given to me yesterday. Much of the testimony you have heard centers around talk. This bill does not even touch on talk. This bill deals with specific issues related to conversion therapy—an unwanted practice. Cutting people off from having conversations, as was said by one of my colleagues from the Senate, is far from what this bill seeks to do. All I can say is the opposition put up a good smokescreen, and I congratulate them for it.

**Chairman Sprinkle:**

With that, I will close the hearing on S.B. 201 (R1).

[[\(Exhibit O\)](#), [\(Exhibit P\)](#), [\(Exhibit Q\)](#), and [\(Exhibit R\)](#) were submitted but not discussed and are included as exhibits for the meeting.]

I will open up for any public comment. Does anyone wish to come forward under public comment?

**Karen England:**

I want to share my concern as a Nevadan about what I see as discrimination against certain points of view when it comes to testifying before committee hearings. We had numerous experts to testify—numerous psychologists who actually treat same-sex attraction throughout the nation. They were given instructions when they submitted their information to the Committee as to how they could testify via telephone. At 9:24 a.m. yesterday morning, they were under the impression that they were able to testify via teleconference. After the Committee received their testimony from the National Task Force for Therapy Equality at 5:24 p.m., they were told that they were no longer able to testify as experts—as psychotherapists who deal with patients on a daily basis.

It leads me to wonder if it was their testimony that caused them to suddenly, at 5:24 p.m., be denied. I have attended numerous committee meetings. I have commended Assemblyman Thompson on his genuine fairness. I realize I am on the opposite side of the majority here, and that my views are not very popular, but I also know that everyone on this Committee wants to have all the information before they make decisions about any bill. I know you are passionate, even though we are going to disagree about what the solutions are to some of the problems; you are passionate about that.

As a Nevadan, I am very concerned about what happened—denying these experts' testimonies. It was not really a fair hearing, and it is disappointing because they wanted to testify. They are experts who followed the procedure that we laid out for them, and only at 5:24 p.m., too late to get a flight from Texas or Washington, D.C., were they informed that they no longer had the ability to testify via telephone.

**Chairman Sprinkle:**

Thank you for your comments. Is there anyone else here wishing to come forward under public comment? [There was no one.] Committee, thank you, and this meeting is adjourned [at 3:05 p.m.].

RESPECTFULLY SUBMITTED:

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Terry Horgan  
Committee Secretary

APPROVED BY:

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Assemblyman Michael C. Sprinkle, Chairman

DATE: \_\_\_\_\_

## EXHIBITS

[Exhibit A](#) is the Agenda.

[Exhibit B](#) is the Attendance Roster.

[Exhibit C](#) is written testimony, dated April 19, 2017, submitted and presented by Senator David R. Parks, Senate District No. 7, in support of Senate Bill 201 (1st Reprint).

[Exhibit D](#) is written testimony, dated April 19, 2017, authored by Jane Heenan, Director, Gender Justice Nevada, Las Vegas, Nevada, and submitted by Mark H. Fiorentino, representing Gender Justice Nevada, in support of Senate Bill 201 (1st Reprint).

[Exhibit E](#) is written testimony dated April 19, 2017, presented by Brooke Maylath, President and Advocate, Transgender Allies Group, Reno, Nevada, in support of Senate Bill 201 (1st Reprint).

[Exhibit F](#) is written testimony presented by Diana Loring, Private Citizen, Reno, Nevada, in support of Senate Bill 201 (1st Reprint).

[Exhibit G](#) is written testimony dated April 19, 2017, presented by Wendy Stolyarov, Legislative Director, Libertarian Party of Nevada, in support of Senate Bill 201 (1st Reprint).

[Exhibit H](#) is written testimony dated April 19, 2017, presented by Ronald W. Lawrence, Private Citizen, Las Vegas, Nevada, in support of Senate Bill 201 (1st Reprint).

[Exhibit I](#) is a letter dated April 18, 2017, to Chairman Sprinkle and members of the Assembly Committee on Health and Human Services, signed by Lisa M. Linning, Ph.D., and Melanie Crawford, Ph.D., Legislative Co-chairs, Nevada Psychological Association, and submitted by Sarah Collins, representing Nevada Psychological Association, in support of Senate Bill 201 (1st Reprint).

[Exhibit J](#) is written testimony dated April 18, 2017, regarding his proposed amendment, presented by Senator Joseph (Joe) P. Hardy, Senate District No. 12, in opposition to Senate Bill 201 (1st Reprint).

[Exhibit K](#) is a mock-up of a proposed amendment to Senate Bill 201 (1st Reprint), dated April 17, 2017, submitted by Senator Joseph (Joe) P. Hardy, Senate District No. 12.

[Exhibit L](#) is copy of Senator Hardy's remarks from the Senate floor from the April 4, 2017, *Senate Daily Journal*, submitted by Senator Joseph (Joe) P. Hardy, Senate District No. 12, regarding Senate Bill 201 (1st Reprint).

[Exhibit M](#) is a copy of a letter dated April 18, 2017, to the Assembly Committee on Health and Human Services, by Christopher J. Doyle, Co-Coordinator, National Task Force for

Therapy Equality, submitted by Karen England, Executive Director, Nevada Family Alliance, in opposition to Senate Bill 201 (1st Reprint).

[Exhibit N](#) is written testimony presented by William P. Tarbell, Private Citizen, Sparks, Nevada, in opposition to Senate Bill 201 (1st Reprint).

[Exhibit O](#) is a copy of a letter to Chairman Sprinkle and members of the Assembly Committee on Health and Human Services, dated April 15, 2017, from Tanya Charbury, Private Citizen, Fallon, Nevada, in support of Senate Bill 201 (1st Reprint).

[Exhibit P](#) is a copy of a letter dated April 18, 2017, authored and submitted by David H. Pickup, Private Citizen, Dallas, Texas, in opposition to Senate Bill 201 (1st Reprint).

[Exhibit Q](#) is a copy of a letter to Chairman Sprinkle and members of the Assembly Committee on Health and Human Services, dated April 18, 2017, authored and submitted by Robert L. Vazzo, Private Citizen, Las Vegas, Nevada, in opposition to Senate Bill 201 (1st Reprint).

[Exhibit R](#) is a copy of a letter addressed to Chairman Sprinkle, Assemblywoman Joiner, and Assemblywoman Benitez-Thompson, authored and submitted by Kent Ervin, Private Citizen, Reno, Nevada, in support of Senate Bill 201 (1st Reprint).