Testimony to BHEC r.e. the Rule Change to the Social Work Code of Conduct
October 27, 2020

Good morning/afternoon Chair Canseco and members of the Council. My name is Dr. Megan Mooney. My pronouns are she/her/hers. I am a Licensed Psychologist in Houston and I am the current President for the Texas Psychological Association.

As you all know, 2020 has been an extraordinary year with unprecedented challenges. We have been battling the COVID-19 pandemic in Texas since March and have been more actively recognizing and responding to the long-standing pandemic of racism in our country since early summer. These two sets of events have resulted in deaths of our fellow Texans and have necessarily been at the forefront of everyone’s minds.

However, here in Texas, we have had another battle waging for quite a long time and it has come to the forefront of our legislature in recent sessions. There is a battle to decide the role of the government in regulating professional conduct and protection of the public. The change that was made to the code of conduct for my colleagues who are licensed by the Texas State Board of Social Work Examiners is just the latest act in this battle. Please do not mistake this as a simple rule-change to bring wording in line with statute. It is not. It is discriminatory in its intent and in its enactment.

The manner in which this rule-change was accomplished was outside of the required practice and procedures. I believe that this was done intentionally so as to restrict public comment and the type of outcry which has occurred nonetheless. The reason this outcry is so loud and has attracted national attention is because of the discriminatory intent of this change. People most certainly are and should be protected based on their sex, gender identity and expression, sexual orientation, and disability status but can now be refused mental health care from Texas social workers.

This issue has been brought before the legislature already and has failed. That is because our legislators represent their constituents who overwhelmingly agree that these statuses should be protected and that mental health professionals should not be allowed to discriminate against people on these bases. The actions taken by TSBSWE to remove language protecting some of our most vulnerable Texans from discrimination contradict those of the legislature, and more importantly the ethics code for social workers.

Although psychologists do not have comparable language in our Texas Board rules, we have our code of ethics from the American Psychological Association (2017) which asserts that “In their work-related activities, psychologists do not engage in unfair discrimination based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, socioeconomic status, or any basis proscribed by law.” Thus, the exact categories of protection that are to be removed from the code of conduct for Texas social workers are also to be protected by our psychology ethics code. In fact, the American Psychological Association asserts that “there exists essential incompatibility between APA’s existing policies and discriminatory laws, policies and practices that seek to limit the rights of individuals, including but not limited to sexual and gender minorities” (APA, 2020).
In the profession of psychology, we are charged with using science and data to drive our decisions regarding providing appropriate care, treatment planning, and public statements. Thus, I would like to share with you all that we have ample evidence to suggest that perceived discrimination based on factors such as race, gender, and sexual orientation is linked to a variety of negative physical and mental health outcomes (e.g., Pascoe & Richman, 2009). In fact, one study (Bostwick et al., 2014) found that about 2/3 of lesbian, gay, and bisexual adults have experienced discrimination based on their sexual orientation, racial/ethnic identity, or gender in the past year and that combinations of these forms of discrimination are associated with higher rates of mental health disorders.

It is not just that discrimination in our communities and daily lives is of concern. There is evidence that there are negative impacts of state-level policies, such as the ones being discussed today, on the mental health and well-being of citizens. For example, one study (Hatzenbuehler et al., 2009) found that LGBTQ people living in states with social policies that did not extend protection to lesbian, gay, and bisexual individuals, have significantly higher rates of multiple psychiatric disorders including depression, anxiety, and PTSD. Additionally, individuals living in states with policies that did not extend protection to lesbian, gay, and bisexual individuals had significantly higher chances of having two or more psychiatric disorders. Further, data continues to emerge that “the stress of being targeted by public bigotry and exclusionary policies may be amplified when individuals are threatened across multiple identity domains” such as race, ethnicity, and sexual orientation (Albright & Hurd, 2019).

The American Psychological Association advises, that psychologists seek not just to “do no harm” but also to do good. In that vein, APA (2020) has provided that “there is an emerging body of research suggesting that nondiscriminatory or equalizing legislation has significant positive implications for LGBTQ+ people. That is, the absence of discriminatory policies is not enough; rather, policies must be put in place which codify protections for LGBTQ+ people into law.” Earlier this year, APA issued a formal resolution stating that “APA reaffirms its opposition to discrimination against LGBTQ+ people and will take a leadership role in actively opposing the adoption of discriminatory laws, policies, and practices as well as advancing equalizing laws, policies, and practices… APA will continue to partner with other national health and mental health organizations to encourage active opposition to legislation and initiatives that discriminate on the basis of sexual orientation or gender identity; … APA shall take reasonable steps to publicly oppose discriminatory laws, policies, and practices … APA encourages psychologists to act to oppose public policy that discriminates on the basis of sexual orientation and gender identity; APA opposes the enactment of laws, policies, and procedures that exempt any group from following antidiscrimination laws designed to protect any group.”

In the past three years, I have had increasing conversations with my young clients about politics and the changes to laws and policies that specifically negatively impact LGBTQ+ people in the United States and Texas. I have been a licensed psychologist in Texas for over a decade and have treated children and families for almost 20 years. I have never had the kinds of conversations related to just fear of being alive as I have in the past three years. The majority of my clients are LGBTQ+ youth, many of whom are fearful for their safety and their ability to access affirming medical and mental health care in Texas. They are acutely aware of how decisions such as yours
impact their own well-being and they are scared and angry. Just this past Friday, one of my clients who is a 17-year-old transgender Honors student in high school said, “Our lives have become a ballpark for politics.”

I am therefore here today as a member of APA, the President of TPA, and a licensed psychologist who fights every day to help young LGBTQ+ people to stay alive and hold onto hope for a better world and a safer environment in which they can live. I am registering my opposition to any changes to rules guiding the conduct of mental health professionals in Texas that promote discrimination against people on the basis of their gender identity and expression, sexual orientation, and/or disability status.

Citations:


