

No. 24-539

IN THE
Supreme Court of the United States

KALEY CHILES,

Petitioner,

v.

PATTY SALAZAR, in her official capacity as Executive
Director of the Department of Regulatory Agencies,
et al.,

Respondents.

**On Writ of Certiorari to the
United States Court of Appeals for the Tenth
Circuit**

**BRIEF FOR *AMICI CURIAE* PFLAG, ONE
COLORADO, AND OTHER ORGANIZATIONS
SERVING YOUTH AND ADULTS IN SUPPORT
OF RESPONDENTS**

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Other Authorities

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Children’s Rights, <i>LGBTQ+ Youth in Foster Care</i> (Jan. 2023), https://www.childrensrights.org/wp-content/uploads/2023/01/CR-LGBTQ-Youth-in-Foster-Care-2023-Fact-Sheet.pdf	12
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Ryan, Caitlin, et al., <i>Parent-Initiated Sexual Orientation Change Efforts with LGBT Adolescents: Implications for Young Adult Mental Health and Adjustment</i> , 67(2) J. of Homosexuality 159 (2020), https://pmc.ncbi.nlm.nih.gov/articles/PMC10371222	6, 10, 14
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INTEREST OF AMICI CURIAE¹

Founded in 1973, **PFLAG, Inc.** (“PFLAG”) is the first and largest organization dedicated to supporting, educating, and advocating for lesbian, gay, bisexual, transgender, and queer (“LGBTQ+”) people, their parents and families, and non-family allies. With over 360 chapters—including seven in the State of Colorado—and more than 550,000 members and supporters nationwide, PFLAG envisions an equitable and inclusive world where every LGBTQ+ person is safe, celebrated, empowered, and loved. PFLAG supports and educates parents and families on the harms and ineffectiveness of non-secular conversion efforts, and encourages families and youth to seek legitimate and qualified behavioral and medical health providers to support them through a process of acceptance, affirmation, and celebration of their sexual orientation, gender identity, and gender expression.

One Colorado is the largest civil rights organization in the State of Colorado advocating for the state’s lesbian, gay, bisexual, transgender and queer (“LGBTQ”) residents. One Colorado was the lead organizational supporter of the Colorado statute at issue in this case. One Colorado has more than 105,000 members, including LGBTQ children and youth who are at risk of being subjected to conversion

¹ Pursuant to Rule 37.6, *amici curiae* certify that no counsel for a party authored this brief in whole or in part and that no person or entity, other than *amici* or their counsel, has made a monetary contribution to the preparation or submission of this brief. Sup. Ct. R. 37.6.

therapy. One Colorado’s membership also includes adults who were subjected to these practices as minors and who understand through experience the harms that result from efforts by medical and mental health professionals to change a minor’s sexual orientation or gender identity.

The **National Center for Youth Law** (NCYL) advocates for young people, working to center the voices and experiences of youth and help advance their educational, health, and social wellbeing and opportunities. For more than 50 years, NCYL has fought to ensure that youth’s rights, dignity, and autonomy are respected in health, immigration, education, court, and child welfare systems across the United States. NCYL has extensive experience litigating to enforce the rights of young people—including those who identify as lesbian, gay, bisexual, transgender, queer, and other identities across the gender and sexuality identity spectrum—to health care, to connections to their families and communities, and to reduce reliance on traumatic family separation.

The **National Center for LGBTQ Rights** (“NCLR”) is a national non-profit legal organization dedicated to protecting and advancing the civil rights of lesbian, gay, bisexual, transgender, and queer (“LGBTQ”) people and their families through litigation, public policy advocacy, and public education. Since its founding in 1977, NCLR has played a leading role in securing fair and equal treatment for LGBTQ people and their families in cases across the country. For more than two decades, NCLR has worked with youth and adults who have experienced the many harms of conversion therapy,

and it has represented individuals seeking to redress these harms through the courts and state professional licensing boards. As a result of its firsthand experience with youth who have been harmed by these practices, NCLR has long supported the enactment of narrowly tailored laws and regulations that protect minors from the practice of conversion therapy by licensed therapists. NCLR has represented intervenor parties and amici curiae in numerous cases, including the proceedings below in this case, that have upheld these laws against constitutional challenges.

For more than 55 years, the **National Health Law Program** (“NHeLP”), a public interest law organization, has engaged in education, litigation, and policy analysis to advance access to quality health care and protect the legal rights of low-income and underserved people, including LGBTQI+ youth.

Rocky Mountain Equality is an LGBTQ+ nonprofit based in Boulder, Colorado that supports communities across Colorado through programming, services, and advocacy. Rocky Mountain Equality is proud to have built responsive programs and services that ensure LGBTQ+ people, families, and communities thrive in Colorado, including robust wellness programs addressing the pervasive mental health challenges our communities face. Through these programs, Rocky Mountain Equality has witnessed the harmful effects of treatments purporting to “cure” people by preventing them from living as their authentic selves. Colorado’s statutory protections against conversion therapy are an essential assurance that evidence-based healthcare remains the standard.

Services and Advocacy for Gay, Lesbian, Bisexual, and Transgender Elders (“SAGE”) is the country’s oldest and largest organization dedicated to improving the lives of lesbian, gay, bisexual, transgender, and queer (“LGBTQ+”) older people. Founded in 1978 and headquartered in New York City, SAGE is a national organization that offers supportive services and resources to LGBTQ+ older people and their caregivers, advocates for public policy changes that address the needs of LGBTQ+ older people, and provides training for organizations that serve LGBTQ+ older people. As part of its mission, SAGE builds ties with LGBTQ+ youth and advocates for policies that provide supportive and affirming mental health care for all generations.

SUMMARY OF THE ARGUMENT

This Court has made clear that the conduct of health care professionals in providing treatment is “subject to reasonable licensing and regulation by the State” even when such conduct “incidentally involves speech.” *Nat’l Inst. of Fam. & Life Advocs. v. Becerra*, 585 U.S. 755, 768, 770 (2018) (quoting *Planned Parenthood of Southeastern Pa. v. Casey*, 505 U.S. 833, 884 (1992)). As organizations that have worked with LGBTQ survivors of conversion therapy, amici are well acquainted with the severe, long-term harm that conversion therapy causes for individuals, families, and communities. Colorado’s statute protecting minors from conversion therapy by licensed professionals is not only a reasonable means of addressing these harms, it directly and narrowly

advances important, and indeed compelling, governmental interests.

Conversion therapy divides youth from their families and promotes parental rejection of LGBTQ children. It often falsely portrays LGBTQ identity as resulting from unhealthy family relationships, leading to escalating family conflict and in some cases, separation of children from their parents. Family rejection as a result of conversion therapy contributes to a host of individual and social harms for LGBTQ youth – harms that can persist well into adulthood. Beyond the direct harm to individuals' physical and mental health, family rejection and separation is an important contributing factor to LGBTQ youth becoming and remaining homeless, entering the child welfare and juvenile justice systems, and experiencing adversity in obtaining an education and achieving future economic security. Colorado's law appropriately responds to these serious individual and social harms.

ARGUMENT

I. CONVERSION THERAPY DIVIDES YOUTH FROM THEIR PARENTS AND PROMOTES FAMILY REJECTION AND SEPARATION

Conversion therapy inflicts serious harm not only on young people but also on families. Parents who seek conversion therapy for their children generally do so out of genuine love and a sincere belief that they are acting in their child's best interests. Many believe that being gay or transgender will prevent their children

from having a happy and fulfilling life; for some, being gay or transgender may also conflict with deeply held religious values.² These parents are not motivated by bias or malice but by a desperate desire to help their children navigate what they perceive as a difficult path.

Conversion therapy practitioners exploit this parental vulnerability by offering false hope that sexual orientation and gender identity can be changed through therapeutic intervention. These practitioners often compound family distress by falsely portraying being gay or transgender as the product of unhealthy family dynamics or deficient parenting.³ They may suggest that overprotective mothers, absent fathers, childhood trauma, or other family factors “caused” a child to be gay or transgender—claims that lack scientific support but nevertheless may burden parents with misplaced guilt and shame, and that frequently cause children to blame or mistrust their parents.⁴

² See Caitlin Ryan et al., *Parent-Initiated Sexual Orientation Change Efforts with LGBT Adolescents: Implications for Young Adult Mental Health and Adjustment*, 67(2) J. of Homosexuality 159 (2020), <https://pmc.ncbi.nlm.nih.gov/articles/PMC10371222>, at 3.

³ See Amy Przeworski et al., *A Systematic Review of the Efficacy, Harmful Effects, and Ethical Issues Related to Sexual Orientation Change Efforts*, 28(1) Clinic Psych.: Sci. and Prac. 81, 82 (2011).

⁴ See *id.* at 90-92.

Rather than strengthening family bonds, conversion therapy fractures them, creating an adversarial dynamic that pits parents against their children. The therapy’s fundamental premise—that core aspects of a child’s self are wrong and must be changed—sends a message of conditional love.⁵ Children subjected to these interventions understand that parental acceptance depends on abandoning aspects of themselves that are not subject to voluntary change. This creates an impossible choice: suppress fundamental aspects of who they are to maintain family relationships, or risk family rejection.

The failure of conversion therapy to change sexual orientation or gender identity often leads to escalating family conflict. When the therapy fails to produce the promised results, families may blame the child for not trying hard enough or conclude that more extreme measures are necessary. Unable to alter their fundamental identity and facing continued family pressure, many LGBTQ youth come to believe that

⁵ John Blosnich et al., *Sexual Orientation Change Efforts, Adverse Childhood Experiences, and Suicide Ideation and Attempt Among Sexual Minority Adults, United States, 2016-2018*, 110(7) *Am. J. of Public Health* 1024, 1024 (2020) (noting that conversion efforts portray heterosexuality as “the only acceptable way of life and reinforce individual, family, and community rejection of LGB sexual orientation”).

physical separation from their families is their only option for psychological survival.⁶

This dynamic fractures parent-child bonds that both parents and children desperately want to preserve. Family support is essential for all young people to develop into healthy, self-sufficient adults. Instead of fostering family unity, conversion therapy drives wedges between parents and children that can persist long into adulthood, depriving both of the loving relationships they sought to protect. The prospect of any child separated from family and community support is profoundly distressing. Yet this separation remains a reality for many LGBTQ youth, with many negative and broader social impacts.

⁶ See Adam P. Romer et al., *LGBT People and Housing Affordability, Discrimination, and Homelessness* 16, UCLA Sch. of Law Williams Institute (Apr. 2020), <https://williamsinstitute.law.ucla.edu/wp-content/uploads/LGBT-Housing-Apr-2020.pdf>.

**II. FAMILY REJECTION AND SEPARATION
RESULTING FROM CONVERSION
THERAPY CAUSES INDIVIDUAL AND
SOCIETAL HARMS, INCLUDING
INCREASED RATES OF HOMELESSNESS,
PLACEMENT IN FOSTER CARE AND
JUVENILE JUSTICE FACILITIES, AND
NEED FOR FUTURE MEDICAL AND
MENTAL HEALTH CARE**

Family rejection and separation resulting from conversion therapy not only directly harms the youth who undergo it but also leads to numerous direct and indirect social harms. As organizations that frequently work with LGBTQ youth and adults, amici have witnessed these harms in the populations they serve.

For individuals, conversion therapy compounds or creates mental health challenges such as suicidality, depression, anxiety, severe psychological distress, and substance use issues. These individual harms are thoroughly documented in peer-reviewed research and reflected in the consensus statements of dozens of major medical and mental health professional associations. *See, e.g.,* Brief of Amici Curiae Am. Psychological Ass'n et al.; Brief of Amici Curiae The Trevor Project et al.

Beyond these direct and well-established harms to individual mental health, conversion therapy also leads to other adverse consequences for individuals and communities.

A major factor in LGBTQ youth becoming and remaining homeless is their family rejecting their

LGBTQ identity.⁷ Those who undergo conversion therapy experience more family rejecting behavior and sometimes undergo conversion therapy due to the fear of being rejected by their families.⁸ In 2022, 40% of LGBTQ youth experiencing homelessness reported that they had been kicked out by their families, and 55% said they had run away or been abandoned due to mistreatment or fear of mistreatment because of their LGBTQ identities.⁹ Overall, LGBTQ youth are overrepresented amongst youth experiencing homelessness.¹⁰ While LGB youth make up 7 to 9% of the general population, they make up 29% of youth experiencing homelessness.¹¹ And 23% of transgender young adults between the ages 18 to 25 reported experiencing homelessness at some point in their lives, compared to only 12.5% of the overall population of young adults in the same age group.¹² LGBTQ youth

⁷ *Ibid.*

⁸ See Ryan, *supra* note 2, at 3; Am. Psychol. Ass'n, *APA Resolution on Sexual Orientation Change Efforts* 2, (Feb. 2021), <https://www.apa.org/about/policy/resolution-sexual-orientation-change-efforts.pdf>.

⁹ See Jonah DeChants et al., *Homelessness and Housing Instability Among LGBTQ Youth* 10, The Trevor Project (2021), <https://www.thetrevorproject.org/wp-content/uploads/2022/02/Trevor-Project-Homelessness-Report.pdf>.

¹⁰ *See id.* at 6.

¹¹ *Ibid.*

¹² *Ibid.*

accessing homelessness services were typically homeless longer and had more mental and physical health problems than non-LGBTQ youth.¹³

Additionally, LGBTQ adults experience an increased lifetime risk of homelessness if their families are unsupportive.¹⁴ Those who lack family acceptance may be prevented from accessing family financial safety nets, which creates barriers to achieving housing stability or homeownership. Family division and separation can result in isolation later in life as well. LGBTQ seniors are more likely to be single and live alone.¹⁵ When LGBTQ seniors lack family support networks, they are more likely than others to rely on service providers for care and assistance as they age.¹⁶

Family rejection is also a major factor causing LGBTQ youth to enter the foster care and juvenile justice systems. LGBTQ youth are disproportionately represented in both systems.

¹³ Soon Kyu Choi et al., *Serving Our Youth 2015: The Needs and Experiences of Lesbian, Gay, Bisexual, Transgender, and Questioning Youth Experiencing Homelessness* 4, UCLA Sch. of Law Williams Institute (June 2015), <https://williamsinstitute.law.ucla.edu/publications/serving-our-youth-lgbtq/>.

¹⁴ Romer et al., *supra* note 6, at 17.

¹⁵ *Ibid.*

¹⁶ *Ibid.*

As with youth homelessness, family rejection and separation are among the most cited reasons for LGBTQ youth entering out-of-home care.¹⁷ When youth exit foster care, they are again at elevated risk of becoming homeless, in part because of a lack of social and economic support after they leave the child welfare system.¹⁸ Though many LGBTQ youth enter the child welfare system for the same reasons as non-LGBTQ youth, some 44% of LGBTQ youth in state custody reported they were removed, ran away, or were kicked out for reasons directly related to their identity.¹⁹ Further, LGBTQ youth who were in foster care reported higher rates of past conversion therapy pressures (18.3%) and conversion therapy experiences (12.1%) compared to their peers who had never been in foster care (9.1% and 4.4% respectively).²⁰ Once in

¹⁷ See Bianca D.M. Wilson et al., *Sexual and Gender Minority Youth in Foster Care: Assessing Disproportionality and Disparities in Los Angeles* 11, The Williams Institute (Aug. 2014), <https://williamsinstitute.law.ucla.edu/publications/sgm-youth-la-foster-care/>.

¹⁸ See DeChants et al., *supra* note 9, at 20.

¹⁹ Children's Rights, *LGBTQ+ Youth in Foster Care* 1 (Jan. 2023), <https://www.childrensrights.org/wp-content/uploads/2023/01/CR-LGBTQ-Youth-in-Foster-Care-2023-Fact-Sheet.pdf>.

²⁰ The Trevor Project, *Press Release: HHS Proposed Rule Offers Much-Needed Protections for LGBTQ+ Young People in Foster Care* (Sept. 27, 2023), <https://www.thetrevorproject.org/blog/hhs-proposed-rule-offers-much-needed-protections-for-lgbtq-young-people-in-foster-care>.

foster care, LGBTQ youth continue to face adversity. They are more likely to be deemed “unadoptable,” housed in isolation “for their own safety” or to avoid their “preying on other youth,” or are kicked out or run away from placements because of perceptions that they are LGBTQ.²¹ Many LGBTQ youth have reported that they preferred to spend time on the streets because they felt safer there than in group or foster homes.²²

LGBTQ youth experiencing rejection and family separation are also at a higher risk of entry into the juvenile justice system. LGBTQ youth are more likely than their non-LGBTQ peers to be detained for non-violent offenses with direct links to out-of-home placement and homelessness.²³ LGBTQ youth are overrepresented in juvenile detention and correctional facilities in the juvenile system: they make up 7 to 9% of youth nationwide, while making up 20% of all youth in juvenile justice facilities.²⁴ Once in the system, LGBTQ youth are more likely to be held in pre-trial detention for reasons such as

²¹ See Wilson et al., *supra* note 17, at 11–12.

²² See *id.* at 12.

²³ Angela Irvine, “We’ve Had Three of Them”: Addressing the Invisibility of Lesbian, Gay, Bisexual and Gender Non-Conforming Youths in the Juvenile Justice System, 19 Colum. J. Gender & L. 675, 693 (2010).

²⁴ Center for American Progress et al., *Unjust: LGBTQ Youth Incarcerated in the Juvenile Justice System* 2 (June 2017), <https://www.lgbtmap.org/file/lgbtq-incarcerated-youth.pdf>.

truancy, warrants, probation violations, and running away.²⁵ After LGBTQ youth leave criminal and juvenile justice systems, they lack supportive services which often forces them back into negative interactions with law enforcement.²⁶

Conversion therapy also harms young people's educational opportunities and jeopardizes their future economic prospects. Youth who undergo conversion therapy are less likely to have educational attainment, more likely to drop out of school, and more likely to have a lower weekly income than those who do not.²⁷

A 2023 survey found that 59.4% of LGBTQ youth were teased, bullied, or treated badly at school in the prior year.²⁸ Students who are regularly harassed or assaulted at school are more likely to miss school than students who are not, thus restricting LGBTQ students' access to education.²⁹ Youth who undergo conversion therapy experience a sharp decrease in self-esteem and a sharp increase in suicidality and

²⁵ Irvine, *supra* note 23, at 689.

²⁶ Center for American Progress et al., *supra* note 24, at 1.

²⁷ Ryan et al., *supra* note 3, at 7.

²⁸ Human Rights Campaign Foundation, *2023 LGBTQ+ Youth Report* (Aug. 2023), <https://reports.hrc.org/2023-lgbtq-youth-report>.

²⁹ Joseph G. Kosciw et al., *The 2021 National School Climate Survey: The Experience of LGBTQ+ Youth in Our Nation's Schools* 36, GLSEN (2022), <https://www.glsen.org/sites/default/files/2022-10/NSCS-2021-Full-Report.pdf>.

depressive tendencies.³⁰ These emotional and mental health challenges, coupled with bias-based bullying, can lead to youth dropping out of school, impairing their future interpersonal relationships and negatively impacting their potential for future careers and economic success.³¹

Collectively, these harms to individuals and society are not only concrete but quantifiable. One study estimated that with 508,892 LGBTQ youth at risk of undergoing conversion therapy in 2021, the costs of downstream harm in the United States amounted to \$8.58 billion annually.³² Conversely, mental health therapy that supports youth without seeking to change LGBTQ identity was estimated to save the United States nearly \$6.19 billion.³³ The documented negative mental health consequences of conversion therapy are severe for individuals, but they also result in measurable aggregate social costs. In addition to the resources spent directly on conversion therapy, the downstream consequences for an individual's

³⁰ Am. Psychol. Ass'n, *supra* note 8, at 5.

³¹ See Kosciw et al., *supra* note 29, at 34.

³² Anna Forsythe et al., *Humanistic and Economic Burden of Conversion Therapy Among LGBTQ Youths in the United States*, 176(5) JAMA Pediatrics 493, 497 (2022), https://jamanetwork.com/journals/jamapediatrics/fullarticle/2789415?utm_campaign=articlePDF&utm_medium=articlePDFlink&utm_source=articlePDF&utm_content=jamapediatrics.2022.0042.

³³ *See id.* at 498.

lifetime are estimated to exceed \$83,366.³⁴ This estimate includes costs to society, such as therapy, hospitalizations and rehabilitation, mortality, and indirect costs such as productivity loss.³⁵

These harms to individuals and communities are preventable. By prohibiting licensed therapists from engaging in conversion therapy with minors, Colorado's law promotes supportive parent-child relationships. By encouraging strong family relationships, the law reduces the likelihood that youth will leave their homes and require services to address the multiple harms resulting from family rejection and separation. These are state interests of the highest order, and Colorado's law is narrowly tailored to advance them.

³⁴ *Ibid.*

³⁵ *See id.* at 495.

CONCLUSION

For the foregoing reasons, the Court should affirm the judgment of the United States Court of Appeals for the Tenth Circuit.

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