

UNFINISHED BUSINESS

Bill No: SB 934
Author: Wiener (D), et al.
Amended: 8/13/26
Vote: 21

SENATE JUDICIARY COMMITTEE: 10-2, 4/7/26

AYES: Umberg, Allen, Ashby, Caballero, Durazo, Reyes, Stern, Wahab, Weber
Pierson, Wiener

NOES: Niello, Valladares

NO VOTE RECORDED: Laird

SENATE APPROPRIATIONS COMMITTEE: 5-2, 5/14/26

AYES: Cervantes, Cabaldon, Grayson, Richardson, Wahab

NOES: Seyarto, Dahle

SENATE FLOOR: 30-9, 5/19/26

AYES: Allen, Archuleta, Arreguín, Ashby, Becker, Blakespear, Cabaldon,
Caballero, Cervantes, Cortese, Durazo, Gonzalez, Grayson, Hurtado, Laird,
Limón, McGuire, McNerney, Menjivar, Padilla, Pérez, Reyes, Richardson,
Rubio, Smallwood-Cuevas, Stern, Umberg, Wahab, Weber Pierson, Wiener

NOES: Alvarado-Gil, Choi, Dahle, Grove, Jones, Ochoa Bogh, Seyarto,
Strickland, Valladares

NO VOTE RECORDED: Niello

ASSEMBLY FLOOR: 58-18, 8/19/26 - See last page for vote

SUBJECT: Sexual orientation or gender identity change efforts

SOURCE: Alliance for TransYouth Rights
California Legislative LGBTQ Caucus
Equality California
Lambda Legal
National Center for LGBTQ Rights
Trevor Project

DIGEST: This bill defines “sexual orientation or gender identity change efforts” (SOGICE) within the Business and Professions Code and prohibits a mental health provider from engaging in SOCICE with a patient under 18 years of age under any circumstances.

Assembly Amendments modified the State’s existing prohibition on sexual orientation change efforts (SOCE) to comport with recent United States Supreme Court caselaw and removed the extended statute limitations for harms arising from the provision of SOGICE or SOCE to a minor.

ANALYSIS:

Existing law:

- 1) Defines SOCE as any practices by mental health providers that seek to change an individual’s sexual orientation, including efforts to change behaviors or gender expressions, or to eliminate or reduce sexual or romantic attractions or feelings toward individuals of the same sex; but does not include psychotherapies that (1) provide acceptance, support, and understandings of clients or the facilitation of clients’ coping, social support, and identity exploration and development, including sexual-orientation-neutral interventions to prevent or address unlawful conduct or unsafe sexual practices; and (2) do not seek to change sexual orientation. (Business & Professions (Bus. & Prof.) Code, § 865.)
- 2) Provides that under no circumstances shall a mental health provider engage in SOCE with a patient under 18 years of age. (Bus. & Prof. Code, § 865.1.)
- 3) Provides that any SOCE attempted on a patient under 18 years of age by a mental health provider shall be considered unprofessional conduct and shall subject a mental health provider to discipline by the licensing entity for that mental health provider. (Bus. & Prof. Code, § 865.2.)
- 4) Provides that the statute of limitations in an action arising from an injury caused by a health care provider’s professional negligence is three years after the date of the injury or one year after the plaintiff discovers, or should have discovered, the injury, whichever occurs first; however, if the plaintiff was a minor at the time of the injury, the statute of limitations is three years from the date of the alleged wrongful act, unless the minor was under six years of age, in which case the action shall be commenced within three years or prior to their eighth birthday, whichever is longer. (Code of Civil (Civ.) Procedure (Proc.), § 340.5)

- 5) Provides that the statute of limitations in 4) shall be tolled upon proof of fraud, intentional concealment, or, for a minor, any period in which the parties' insurance companies committed fraud or collusion in the failure to bring an action on behalf of the injured minor for professional negligence. (Code of Civil Procedure (Code Civ. Proc.), § 340.5.)

This bill:

- 1) Makes Legislative findings and declarations relating to the scientific and clinical consensus regarding the ineffectiveness and harmfulness of SOGICE.
- 2) Defines "sexual orientation or gender identity change efforts" as any practices of a licensed mental health provider that seek, during the provision of mental health services, to direct a patient toward a predetermined sexual orientation or gender identity outcome; such efforts include, regardless of the direction of the intended change, all of the following:
 - a) Efforts to direct a patient toward a particular sexual orientation by reducing, or increasing sexual or romantic attractions or feelings toward individuals of a particular sex.
 - b) Efforts to direct a patient toward a particular gender identity by suppressing or constraining the patient's gender identity or expression.
- 3) Provides that the definition of "sexual orientation or gender identity change efforts" in 2) does not include any of the following practices:
 - a) Nondirective psychotherapies that facilitate a patient's coping, identity exploration, and self-understanding without seeking to achieve a particular outcome regarding sexual orientation or gender identity.
 - b) Age-appropriate interventions to address unlawful conduct or unsafe practices that do not seek to direct the patient toward any particular sexual orientation or gender identity.
 - c) Counseling, psychotherapy, or other supportive services, provided in a manner consistent with the applicable standards of care, that respects the gender identity of the patient, as experienced and defined by the patient.
- 4) Modifies the State's existing prohibition on SOCE for patients under the age of 18 years to do the following:

- a) Prohibit a mental health provider from engaging in SOGICE with a patient under 18 years of age under any circumstances.
 - b) Provide that any SOGICE attempted on a patient under 18 years of age by a mental health provider shall be considered unprofessional conduct and shall subject the mental health provider to discipline by the licensing entity for that mental health provider.
- 5) Includes a severability clause.

Comments

Sexual orientation or gender identity change efforts (SOGICE) date back to the nineteenth century when homosexuality was considered a mental illness that needed to be “cured.” SOGICE encompass a range of techniques and are offered by medical professionals and non-professionals alike. According to the American Psychological Association and 13 other mental health organizations, SOGICE “do not meet the criteria of a legitimate therapeutic treatment. SOGICE are potentially harmful, discredited practices, and are not supported by credible scientific evidence.”¹ In light of the medical consensus surrounding the risks of SOGICE, California banned sexual orientation change efforts for minors in 2012.²

In March 2026, the United States Supreme Court held in *Chiles v. Salazar* that a Colorado law prohibiting SOGICE for minors should be analyzed under the “strict scrutiny” standard, to the extent it prohibits speech-based SOGICE.³ The district court and the Tenth Circuit had held that SOGICE prohibitions should be reviewed under the “rational basis” test because they regulate, first and foremost, medical conduct. The Court remanded the case so that the district court can determine whether Colorado’s law is narrowly tailored to achieve a compelling government purpose.

This bill is intended to respond to the Supreme Court’s ruling in *Chiles* case by modifying California’s existing prohibition on the provision of SOCE to minors. First, this bill expands the definition of SOCE to include gender identity change efforts. Additionally, this bill defines SOGICE to include efforts to direct a patient toward a particular sexual orientation or gender identity through specified means, but expressly exempts nondirective therapies that facilitate a patient’s coping,

¹ Brief of the American Psychological Association, the American Psychiatric Association, and Twelve Other Mental Health and Medical Professional Organizations as Amici Curiae in Support of Respondents, *Chiles v. Salazar* (Nov. 8, 2024) United States Supreme Court Case No. 24-539, p. 3.

² See St. Louis University School of Law, Conversion Therapy Laws, <https://www.slu.edu/law/health/lgbtq-policy-research/conversion-therapy-data.php> (link current as of August 19, 2026).

³ *Chiles v. Salazar* (Mar. 31, 2026) 607 U.S. ___, — S.Ct. — 2026 WL 872307.

identity exploration, and self-understanding without seeking a specific outcome. Finally, this bill specifies that SOGICE provided to a patient under the age of 18 years is considered unprofessional conduct by a mental health provider and subjects a licensed provider to discipline by the relevant licensing entity.

FISCAL EFFECT: Appropriation: No Fiscal Com.: Yes Local: No

According to the Assembly Committee on Appropriations:

- 1) Ongoing cost pressures of an unknown, but potentially significant amount (Trial Court Trust Fund, General Fund) on the trial courts to adjudicate additional civil actions, arising both from the prospective extension of the limitations period and from the window to revive claims reaching back to conduct on or after January 1, 2009. Although courts are not funded on a workload basis, increased workload creates pressure on the General Fund, which provides a backfill of \$117.3 million in 2025-26 to support trial court operations.
- 2) Costs of up to \$1 million annually (General Fund and Legal Services Revolving Fund (LSRF)) to the Department of Justice (DOJ) for four positions — one deputy attorney general and one legal secretary in each of the Health, Education and Welfare Section and the Tort and Condemnation Section of the Civil Law Division, beginning January 1, 2027, and ongoing, to represent state agencies in anticipated litigation. DOJ anticipates claims against state entities that employ, supervise, or regulate licensed mental health providers, arising from allegations related to hiring, training, supervision, or other oversight, as well as potential defense of constitutional challenges to the bill. LSRF costs are reimbursable through direct billings to client agencies. DOJ reports the department cannot absorb these costs within existing resources and that implementation is dependent upon an appropriation by the Legislature.
- 3) Potential liability exposure of an unknown, but potentially significant amount (General Fund) to state entities that employed, supervised, or retained licensed mental health providers, to the extent the revival window and extended limitations periods result in judgments or settlements against the state. Actual exposure will depend on claim volume, judicial construction of the causation provisions, and whether existing statutory damages limits are held to apply.

SUPPORT: (Verified 8/19/26)

Alliance for TransYouth Rights (co-source)
California Legislative LGBTQ Caucus (co-source)
Equality California (co-source)

Lambda Legal (co-source)
National Center for LGBTQ Rights (co-source)
Trevor Project (co-source)
Access Reproductive Justice
Alliance for Children's Rights
Asian Americans Advancing Justice Southern California
Board of Behavioral Sciences
California LGBTQ Health and Human Services Network
Casita Feliz
CFT – A Union of Educators & Classified Professionals, AFT, AFL-CIO
Community Health Project Los Angeles
Courage California
El/La Para TransLatinas
Gender Affirming Professionals
LGBTQ+ Inclusivity, Visibility, and Empowerment
Los Angeles LGBT Center
Los Angeles LGBTQ Chamber of Commerce
Lyon-Martin Community Health Services
One Institute
Outlet
PFLAG National
PFLAG Sacramento
Rainbow Families Action
San Diego LGBT Community Center
San Diego Pride
Somos Familia Valle
TransFamily Support Services
TransLatin@ Coalition
One individual

OPPOSITION: (Verified 8/19/26)

Cali Baptist Capitol Ministry
California Baptists for Biblical Values
California Family Council
California Teachers Supporting Gender Non-Conforming Youth
CAUSE
Changed Movement
Civil Justice Association of California
Democrats for an Informed Approach to Gender
Genspect

Lesbian, Gay, and Bisexual Alliance USA
Lesbians Advocating for a Resilient Future
Our Duty
PERK
SFV Alliance
Women Are Real
Women's Liberation Front
Four individuals

ARGUMENTS IN SUPPORT: According to Lambda Legal:

Decades of psychological and mental health research have firmly established that LGBTQ+ identities are not mental disorders that need or *can* be “cured,” and moreover that conversion practices under the guise of mental health care are ineffective and overwhelmingly risk the health and well-being of patients. Given these stark truths, nearly every major medical and psychological association in the country condemns these practices, including the American Psychological Association, the American Psychiatric Association, the American Academy of Pediatrics, the American Medical Association, the American Counseling Association, the American Academy of Child and Adolescent Psychiatry, the American School Counselor Association, and the National Association of Social Workers.

Recognizing the dangers of “conversion therapy,” the California Legislature passed S.B. 1172 in 2012 to protect vulnerable young people by prohibiting certain state-licensed mental health practitioners from engaging in sexual orientation change efforts with minors. Following the U.S. Supreme Court’s recent ruling in *Chiles v. Salazar*, S.B. 934 updates existing law to integrate the Court’s guidance on viewpoint neutrality and ensure that California will continue to protect minors from harmful conversion practices.

ARGUMENTS IN OPPOSITION: According to CAUSE:

SB 934 establishes extraordinary liability that will penalize out of existence any therapeutic approaches to gender dysphoria diagnosis or treatment which embrace the reality of biological sex. At the same time, SB 934 insulates from all scrutiny the “affirmation only” approach to mental distress over a person’s concern they may have a “gender identity” that is incongruent with their physical body. SB 934 will act to cement into California law the increasingly shaky philosophical concepts around belief in “gender identity” into policy and law, at a moment when other states and countries are pulling back from this,

due to the mounting evidence against this concept *especially* as a therapeutic model.

ASSEMBLY FLOOR: 58-18, 8/19/26

AYES: Addis, Aguiar-Curry, Ahrens, Alvarez, Arambula, Ávila Farías, Bains, Bauer-Kahan, Bennett, Berman, Boerner, Bonta, Bryan, Calderon, Caloza, Connolly, Elhawary, Fong, Gabriel, Garcia, Gipson, Mark González, Haney, Harabedian, Hart, Irwin, Jackson, Kalra, Krell, Lee, Lowenthal, McKinnor, Muratsuchi, Nguyen, Ortega, Pacheco, Papan, Patel, Pellerin, Petrie-Norris, Quirk-Silva, Ramos, Ransom, Celeste Rodriguez, Michelle Rodriguez, Rogers, Schiavo, Schultz, Sharp-Collins, Solache, Soria, Stefani, Wallis, Ward, Wicks, Wilson, Zbur, Rivas

NOES: Alanis, Castillo, Chen, Davies, DeMaio, Dixon, Ellis, Flora, Jeff Gonzalez, Hadwick, Hoover, Johnson, Lackey, Macedo, Patterson, Sanchez, Ta, Tangipa

NO VOTE RECORDED: Carrillo, Blanca Rubio, Valencia

Prepared by: Allison Whitt Meredith / JUD. / (916) 651-4113
8/19/26 16:42:17

**** END ****