On 23 November 2013, the CPME Board adopted the CPME Statement on Natural, Non-pathological Variations of Human Sexuality.

**CPME Statement on Natural, Non-pathological Variations of Human Sexuality**

**Preamble**

In recent years, issues related to sexual orientation have become a matter of public debate in many European countries and studies have shown that attitudes towards people with a homosexual or bisexual orientation vary considerably across the European Union. Healthcare professionals encounter many aspects of human diversity when providing care, including different variations of human sexuality. It is therefore essential for the physicians of Europe to clearly set out the medical perspective on this topic.

A large body of scientific research indicates that homosexuality is a natural, non-pathological variation of human sexuality without any intrinsically harmful health effects.

Direct and indirect discrimination, stigmatisation, peer rejection, and bullying continue to have a serious impact upon the psychological and physical health of people with a homosexual or bisexual orientation.

Laws and regulations which discriminate against people with a homosexual or bisexual orientation, or fail to adequately protect their civil rights, have a negative impact upon such individuals and their families and leave them particularly vulnerable.

These negative experiences lead to higher prevalence rates of depression, anxiety disorders, substance misuse, and suicidal ideations and attempts. The suicide rate among adolescents and young adults with a homosexual or bisexual orientation is, consequently, significantly higher than that of their peers.

**Therefore:**

CPME welcomes and endorses the World Medical Association’s Statement on Natural Variations of Human Sexuality, adopted at its General Assembly in Fortaleza in October 2013.

CPME strongly asserts that homosexuality does not represent a disease, but rather a natural, non-pathological variation within the range of human sexuality.
CPME affirms that it is not possible to medically determine an individual’s sexual orientation by means of a physical examination. It is unethical for physicians to participate in any kind of procedure aimed at determining an individual’s sexual orientation against the will of that individual.

CPME condemns all forms of stigmatisation, criminalisation and discrimination of people based on their sexual orientation, including those which are incorporated into national laws. Such practises may have a negative impact upon the mental health of those affected by them.

CPME calls upon all physicians to classify physical and psychological diseases on the basis of clinically relevant symptoms regardless of sexual orientation, and to provide therapy in accordance with internationally recognised treatments and protocols.

CPME demands the deletion of all disease classification codes which pathologise homosexuality or suggest the possibility of treatment or therapy as a viable option (F66.1 of ICD 10). Such codes must not be developed or reinserted during revisions of diagnostic criteria in the future.

CPME asserts that psychiatric or psychotherapeutic approaches to treatment must not focus upon homosexuality itself, but rather upon conflicts which arise between homosexuality, and religious, social, cultural and internalised norms and prejudices.

CPME condemns so-called “conversion” or “reparative” procedures which claim to be able to convert homosexuality into asexual or heterosexual behaviour and give the impression that homosexuality is a disease. These methods have no medical indication. In addition, these practices represent a serious threat to health and constitute violations of human rights that should be denounced and subject to sanctions and penalties. It is unethical for physicians to participate during any step of such procedures.

Physicians who act in accordance with the above principles must be protected against attempts to undermine their duty of medical confidentiality and safeguarded from any possible negative consequences. Physicians’ organisations should actively promote these principles among their members and work to raise awareness of them in the wider society.