

PROTECTING TRANS VICTIMS OF GENDER IDENTITY CONVERSION PRACTICES

Summary

- A ban on conversion practices must cover both sexual orientation and gender identity.
- Trans people are twice as likely to be subjected to or offered conversion practices as non-trans (cisgender) lesbian, gay or bi people.
- Government proposals will specifically ensure that the clinical standards for doctors and therapists treating children with gender dysphoria are not affected by a ban.
- Banning conversion practices does not criminalise explorative conversations or therapy.
- Nearly every country that has banned conversion practices has done so for both sexual orientation and gender identity, including in the last 6 months Canada, France and New Zealand.

Proposals for a legislative ban

Conversion practices, colloquially referred to as conversion therapy, are practices or conducts targeted at an individual with the intent to change or suppress that individual's sexual orientation and/or gender identity.

The UK Government published its proposals to ban conversion practices in October 2021, alongside a public consultation on the proposals that ran for 14 weeks.

The main proposals were:

- To create a new criminal offence for talking conversion practices
- To introduce sentence uplifts for already existing criminal offences where the motivation of the offence was conversion
- To explore the possibility of conversion therapy protection orders to prevent under-18s being taken out of the country for the purpose of conversion therapy

The Government's stated intention was to publish the findings of the consultation and proposed draft legislation in Spring 2022. A <u>leaked No 10 document</u> at the end of March detailed an intention to not ban conversion therapy at all. After intense outcry, <u>the Government announced</u> it would move ahead with banning conversion practices for LGB (lesbian, gay and bisexual) people but would not do so for trans people.

What are the stated reasons for removing trans people from the ban?

The <u>Prime Minister</u> referred to "complexities and sensitivities" when "you move from the area of sexuality to the question of gender". The Prime Minister added "I don't think that it's reasonable for kids to be deemed so-called Gillick-competent to take decisions about their gender or irreversible treatments that they may have. I think there should be parental involvement at the very least."

No Government member or representative has given any reason for why trans adults should not be covered by a ban on conversion practices.



Children and young people's gender identity services were already proposed to be exempt

However, the Government's proposals stated any legislation would specifically not affect these services and protections for children experiencing gender dysphoria. The Ministerial Forward by the Foreign Secretary and Minister for Women and Equalities reads: "It is vitally important… that young people are supported in exploring their identity without being encouraged towards one particular path. This is especially the case for those who are under 18 and where this might result in an irreversible decision. These proposals therefore do not alter the existing clinical regulatory framework or the independence of regulated clinicians working within their professional obligations."

This point was reiterated <u>Equalities Minister Mike Freer to the Women and Equalities Select Committee</u>: "The consultation with clinicians and professionals is that their professional and clinical judgment remains protected."

Why must trans people be protected in a ban?

Conversion practices are abuse. There is no excuse for abuse, and no LGBTQ+ person should be left at risk of these abhorrent practices. Trans people are almost twice as likely to have been offered or subjected to conversion practices than cisgender (not trans) LGB people in the UK.

- <u>The Government's assessment of the prevalence of conversion therapy</u> found that 2% of respondents had been subjected to conversion therapy and a further 5% offered it, while 4% of trans respondents had been subjected and a further 8% offered.
- The <u>2020 Gender Identity and Conversion Therapy Survey</u> was responded to by 450 trans and non-binary people over 16 years old. 64 had been offered gender identity conversion therapy, and 39 had undergone it.
- The <u>LGBT+ People and Sexual Violence Report 2022</u> by anti-LGBT+ violence charity Galop found that 24% of respondents "were subjected to sexual violence which they believe was intended to convert them to heterosexuality, their assigned gender at birth, or to punish them for their gender or sexual identity." This was higher for trans men (35%) and non-binary people (32%).

All leading medical, psychological and therapy organisations back an inclusive ban

The Memorandum of Understanding on conversion therapy in the UK is a joint document signed by over 25 health, counselling and psychotherapy organisations which aims to end the practice of conversion therapy for sexual orientation and gender identity in the UK, including NHS England, NHS Scotland, and the Royal Colleges of GPs and Psychiatrists. The following members released statements following the Government's announcement of dropping trans protection from its proposals to ban conversion practices: BPS, BACP, the BMA, RCPsych, UK Council for Psychotherapy, British Psychoanalytic Council, College of Sexual and Relationship Therapists, Place2Be, Anna Freud, Mind, Rethink Mental Illness, Relate and Pink Therapy.

Will a ban on gender identity conversion practices criminalise parents, therapists or doctors exploring the causes of gender dysphoria in children and young people?

No. Conversion practices are a form of abuse that have the intent to change, cure or suppress a person's sexual orientation or gender identity. Conversion practices by definition work on the intent that only one outcome is acceptable. Exploration of gender dysphoria, gender identity or sexual orientation is not a conversion practice, because it accepts that a person may end up through the process of exploration coming to terms with being either cisgender or trans, LGB or heterosexual – no outcome is treated as inherently better or preferable to any other. The <u>Government's proposals</u> clearly state that the independence of clinical professionals will not be affected by a ban.



Will a ban on gender identity conversion practices force an affirmative approach onto therapists?

There is widespread misunderstanding of what affirmative therapy means. Affirmative therapy is an approach to care that was developed to counter the negative experiences of homophobia and transphobia that LGBTQ+ people often experienced in therapeutic and healthcare settings. Affirmative therapy affirms that there is nothing wrong with being LGBTQ+, rather that being LGBTQ+ is a natural and welcome part of human diversity. Affirmative therapy creates a safe space where LGBTQ+ clients can talk about – and explore - their sexuality or gender identity without fear of being judged.[1] Affirmative therapy is explorative and non-assuming.

The British Psychological Society recommends affirmative approach practices in its guidelines for psychologists working with gender, sexuality and relationship diversity.

Senior Christian leaders have also called for churches to be affirming spaces for LGBTQ+ congregants.

Should we wait for the Cass Review to be published before banning gender identity conversion practices?

There is no reason to wait for the publication of the Cass Review to legislate because it is not looking at an area that will be covered by proposed legislation. The Cass Review is an independent review of gender identity services for children and young people. Its work is vital for ensuring children and young people experiencing gender incongruence or who are trans receive the appropriate care with the highest clinical standards.

But as a healthcare pathway with nationally set clinical frameworks, the work of gender identity services for children and young people will not be affected by a ban on conversion practices.

Is gender transition itself a form of gay conversion therapy?

No. Gender identity is not the same as sexual orientation. Providing gender identity healthcare has nothing to do with, nor impact upon, a person's sexual orientation.

Gender transition services are an internationally recognised form of healthcare for trans people. Conversion practices are an internationally recognised form of abuse. It is irresponsible and dangerous to conflate the two.

The concept of gender transition as gay conversion therapy (or "trans the gay away") does not stand up to scrutiny. There is no evidence of people who are motivated by a preference for trans heterosexual people over gay cisgender people. And not all trans people are heterosexual. Among the 108,000 respondents to the National LGBT Survey 2018, only 16% of trans men and trans women identified as heterosexual, so having a trans identity does not equate with heterosexuality.

[1] See https://psychcentral.com/blog/sex/2014/04/understanding-lgbtg-affirmative-psychotherapy#1 https://pubmed.ncbi.nlm.nih.gov/28561257/#:~:text=Affirmative%20therapy%20is%20a%20type.and%20transgender%20(LGBT)%20clients. https://www.pacificoaks.edu/voices/psychology/how-does-affirmative-therapy-work/ https://www.ndsu.edu/fileadmin/hdfs/documents/misc/Affirmative_therapy_handout.pdf



Do we need legislation when conversion practices are already illegal?

Conversion practices cover a broad spectrum of activities. While some (physical and sexual abuse, rape) are currently illegal, others (pseudo talking therapies, targeted 'healing' prayer) are not. The latter cause psychological harm and are forms of abuse that are currently legal across the UK. The former are types of criminal abuse that occur most often within familial, community and religious or cultural settings, and so like domestic abuse, FGM and honour-based violence require specific legislation to ensure that these crimes that often go unreported or unrecognised by statutory authorities can be prosecuted.

Where has legislation been passed elsewhere?

Bans on conversion practices for sexual orientation and gender identity have been enacted in several countries including <u>Canada</u>, <u>New Zealand</u>, <u>France</u>, <u>Malta</u>, <u>Brazil</u>, <u>Uruguay</u>, and <u>Germany</u>, as well as subnational states and territories, including those in Australia – <u>Victoria</u>, <u>Queensland</u> and the <u>Australian Capital Territory</u>.

Is it possible to define conversion practices?

Yes. Multiple countries and territories have defined and banned conversion practices, several with similar legislative and judicial systems to the UK. The New Zealand <u>Conversion Practices Prohibition Act 2022</u> provides the following definition:

Conversion practice means any practice, sustained effort, or treatment that-

- (a) is directed towards an individual because of the individual's sexual orientation, gender identity, or gender expression; and
- (b) is done with the intention of changing or suppressing the individual's sexual orientation, gender identity, or gender expression.

Also see <u>Canada Act to amend the criminal code (conversion therapy)</u> and the Australian State of Victoria <u>Change or Suppression (Conversion) Practices Prohibition Act 2021.</u>

Other areas of concern

While much of the Government's proposals were welcome to banning conversion practices, there are a number of areas that need to be strengthened in order for a legislative ban to be effective.

We point to <u>the Cooper Report</u> that was developed by leading Human Rights Lawyers, which concludes that the notion of informed consent for adults within the context of the ban on conversion practices is 'flawed'.

The law is clear that personal autonomy must be restricted when there is an imbalance of power or where there is a real risk of a large number of vulnerable people giving "consent" through coercion or manipulation, which is not true consent.

The ban must apply generally and not differentiate between secular, religious, or cultural contexts.

The majority of conversion practices are conducted by individuals who are not professionally trained in therapeutic practices, such as religious leaders or members of an individual's community.

Therefore, limiting a ban and allowing for religious exemptions such as private prayer and 'casual conversations' will, in practice, allow conversion practices to continue.