

# GOVERNMENT EQUALITIES OFFICE CONSULTATION: BANNING CONVERSION THERAPY

Response from LGBT Humanists, January 2022



## ABOUT HUMANISTS UK

LGBT Humanists is a volunteer-led section of Humanists UK. For over 40 years LGBT Humanists has promoted humanism as a rational, naturalistic worldview that trusts the scientific method as the most reliable route to truth and encourages a moral and ethical life based on logic, reason, and compassion. We campaign for equality, particularly relating to sexual orientation and identity – both in the UK and internationally.

At Humanists UK, we want a tolerant world where rational thinking and kindness prevail. We work to support lasting change for a better society, championing ideas for the one life we have. Our work helps people be happier and more fulfilled, and by bringing non-religious people together we help them develop their own views and an understanding of the world around them. Founded in 1896, we are trusted to promote humanism by 100,000 members and supporters and over 115 members of the All-Party Parliamentary Humanist Group.

## QUESTIONS ABOUT THE RESPONDENT

**A. Are you providing an individual or personal response or a response on behalf of an organisation?**

An organisation

**B. What is the name of your organisation?**

LGBT Humanists

**C. What type of organisation is it?**

Charity

**D. Does your organisation work on behalf of any of the following people?**

LGBT and non-religious people

**E. Which country does your organisation work in?**

England, Wales and Northern Ireland

**F. Approximately how many people work in your organisation?**

30

## VIEWS ON BANNING CONVERSION THERAPY

**Do you agree or disagree that the Government should intervene to end conversion therapy in principle?**

Strongly agree

**Why do you think this?**

We strongly agree that the Government should intervene to end the abhorrent practice of so called 'conversion therapy'. We applauded the Government's commitment to end this practice back in 2018 under its LGBT Action Plan.<sup>1</sup> That plan stated that 'conversion therapy' activities:

'are wrong, and we are not willing to let them continue. Led by the Government Equalities Office, we will fully consider all legislative and non-legislative options to prohibit promoting,

<sup>1</sup> Government Equalities Office, *LGBT Action Plan*, July 2018. [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/721367/GE0-LGBT-Action-Plan.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/721367/GE0-LGBT-Action-Plan.pdf)



offering or conducting conversion therapy. Our intent is to protect people who are vulnerable to harm or violence, whether that occurs in a medical, commercial or faith-based context.<sup>2</sup>

Although we are deeply concerned the current proposals fall short of the full ban needed to prevent harm to LGBT individuals, we welcome the acknowledgement by the Government of its role and commitment to take action on this issue.

Conversion therapy is harmful pseudoscience and as such it should be banned in full. Such practices have been widely rejected by the medical community as there is no evidence that they are effective and are known to cause significant damage to the mental health of those who are subjected to it.<sup>3</sup> Yet, we know that conversion therapy is still widely practiced, especially within religious settings. The UK Government National LGBT Survey in 2018 reported that 7% of LGBT people had undergone or been offered such practices.<sup>4</sup> Of those who had undergone conversion therapy 51% reported that it had been conducted by a religious group or in a religious setting. Furthermore, such practices continue to legitimise homophobic, biphobic, and transphobic attitudes by falsely equating LGBT identities to a pathology that can be fixed or cured.

## CONSULTATION QUESTIONS

### **Q1. To what extent do you support, or not support, the Government's proposal for addressing physical acts of conversion therapy?**

Strongly agree

#### **Why do you think this?**

We support the Government's proposal to make conversion therapy an aggravated factor with a sentence uplift in cases where it was a motivating factor in violent or sexual crimes. This measure would be simple to implement as it does not require criminalisation, and much like with hate crime legislation, would lead to a normative shift in social attitudes towards conversion therapy. We hope that this measure would lead to the further delegitimising of conversion therapy, as well as offer an additional means of redress through the justice system to victims.

### **Q2. The Government considers that delivering talking conversion therapy with the intention of changing a person's sexual orientation or changing them from being transgender or to being transgender either to someone who is under 18, or to someone who is 18 or over and who has not consented or lacks the capacity to do so should be considered a criminal offence. The consultation document describes proposals to introduce new criminal law that will capture this. How far do you agree or disagree with this?**

Somewhat agree

We strongly disagree with the Government's proposal that this ban should only extend to children and adults who lack capacity to consent or adults who have explicitly not consented. These practices have no medical or scientific efficacy and the harms caused to participants are well known, it is therefore not possible for an adult to give free and informed consent. Therefore, it should not be a defence in law that victims appear to have consented.

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<sup>2</sup> *Ibid*

<sup>3</sup> Human Rights Campaign, *The Lies and Dangers of Efforts to Change Sexual Orientation or Gender Identity* <https://www.hrc.org/resources/the-lies-and-dangers-of-reparative-therapy>

<sup>4</sup> Government Equalities Office, *National LGBT Survey: Research report*, 3 July 2018. <https://www.gov.uk/government/publications/national-lgbt-survey-summary-report>



That all forms of conversion therapy, whether physical or 'talking', are inherently harmful is not open to dispute. The United Nations Independent Forensic Expert Group concluded that:

*'All practices attempting conversion are inherently humiliating, demeaning and discriminatory. The combined effects of feeling powerless and extreme humiliation generate profound feelings of shame, guilt, self-disgust, and worthlessness, which can result in a damaged self-concept and enduring personality changes. The injury caused by practices of "conversion therapy" begins with the notion that an individual is sick, diseased, and abnormal due to their sexual orientation or gender identity and must therefore be treated. This starts a process of victimization.'*<sup>5</sup> [emphasis added].

The Government's own assessment and qualitative study of conversion therapy found 'the balance of evidence suggests that conversion therapy is unlikely to be effective and is associated with negative health outcomes.'<sup>6</sup> The study stated that several systematic reviews suggest there is no efficacy to practices to change sexuality and no studies published since 2000 were identified that showed any evidence that gender identity could be changed in this way. Given the above, it seems nonsensical that a provider would give the victim an accurate account of the risks and benefits of undergoing such practices, which would be needed for them to truly consent.

By drawing a distinction between physical/violence acts of conversion practices and what it terms 'talking' therapies, the Government has failed to fully take into account the psychological impact that these therapies can, and often, have upon the victim. In *Dhaliwal*, the Court of Appeal established that if a person inflicts treatment on another that leads to the development of a recognised psychological illness or injury then this would amount to bodily harm under the Offences Against the Person Act (OAPA) 1961.<sup>7</sup> The Government's own assessment and qualitative study of conversion therapy concluded that there is evidence that these practices can lead to psychological illnesses such as depression, anxiety disorders, and suicide ideation.<sup>8</sup>

Crucially, it is not possible to consent to bodily harm. Thus, where talking therapies are capable of inflicting these harms, it should not be possible for the perpetrator to use the defence of consent. However, the OAPA is not sufficient to ensure an end to these practices and a specific legislative ban that does not allow an adult to consent is needed. The current proposals make a false distinction between physical and psychological harm and apply different standards of consent which are at odds with our current laws on bodily harm.

This proposal is also at odds with the approach taken by Parliament in banning other harmful practices such as female genital mutilation (FGM), forced marriage, and domestic abuse. In each of

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<sup>5</sup> *Ibid.*

<sup>6</sup> Government Equality Office, *Conversion therapy: an evidence assessment and qualitative study*, 29 October 2021 <https://www.gov.uk/government/publications/conversion-therapy-an-evidence-assessment-and-qualitative-study/conversion-therapy-an-evidence-assessment-and-qualitative-study#what-are-the-outcomes-of-conversion-therapy-1>

<sup>7</sup> [2006] EWCA Crim 1139 Case No: 2006/1170/B5 <https://vlex.co.uk/vid/r-v-dhaliwal-793423829>

<sup>8</sup> Government Equality Office, *Conversion therapy: an evidence assessment and qualitative study*, 29 October 2021 <https://www.gov.uk/government/publications/conversion-therapy-an-evidence-assessment-and-qualitative-study/conversion-therapy-an-evidence-assessment-and-qualitative-study#what-are-the-outcomes-of-conversion-therapy-1>



these areas the Government has recognised that there was an inherent danger in allowing adults to consent to these practices, and that the imbalance of power between those performing the practices and those subjected to them makes the notion of informed consent largely meaningless. The Government's own research into conversion therapy highlights several times that the boundary between consent and coercion is blurred. Below are three examples from that research where the notion of informed consent or 'choice' is challenged.<sup>9</sup>

'Some people report that while they underwent conversion therapy voluntarily, they feel these 'choices' were shaped by powerful influences in their social environment and under guidance from authority figures.'

'Although interviewees generally reported undergoing sexual orientation change efforts voluntarily, they also frequently reported being led into it under the guidance of people in a position of spiritual authority. Many felt that their 'choice' to undergo conversion therapy was influenced by people in their social environment in powerful positions.'

'Although most people who have conversion therapy appear to do so voluntarily, they also describe being led into conversion therapy by people in a position of authority in their religious institutions or families. In addition, a number of unethical practices by people in positions of authority were documented by UK interviewees.'

Unless the ban is extended to adults who seemingly consent to the practice, the group comprising the majority of those at risk of conversion therapy, the Government's overall aim and commitment to ending this practice will fail.

Canada has recently passed national legislation that does not have a consent loophole,<sup>10</sup> and this is the approach that is being favoured at the regional level. In the regions of Aragon and Valencia in Spain, conversion legislation is banned and practices cannot be validated upon consent.<sup>11</sup> Similarly, a 2021 ban in the Australian state of Victoria, defines conversion therapy as:

'Meaning of change or suppression practice: (1) In this Act, a change or suppression practice means a practice or conduct directed towards a person, whether with or without the person's consent'<sup>12</sup>

Therefore, this can be easily achieved in legislation.

### **Q3. How far do you agree or disagree with the penalties being proposed?**

Somewhat agree

We agree with the proposal that the offence be triable either by the Magistrate or Crown Court depending on the severity of the offence and the level of harm caused to the victim. We agree that

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<sup>9</sup> *Ibid*

<sup>10</sup> Christine Hauser, 'Canada Bans 'Conversion Therapy'', The New York Times, 6 January 2022, <https://www.nytimes.com/2022/01/06/world/canada/canada-conversion-therapy-law.html>

<sup>11</sup> UN Human Rights Council, *Practices of so-called "conversion therapy" Report of the Independent Expert on protection against violence and discrimination based on sexual orientation and gender identity*. 1 May 2020. <https://undocs.org/A/HRC/44/53>

<sup>12</sup> The Change or Suppression (Conversion) Practices Prohibition Act 2021, 5(1). <https://content.legislation.vic.gov.au/sites/default/files/2021-02/591143bs1.pdf>



in indictable offences, a maximum of five years imprisonment is an adequate penalty and in line with wider sentencing guidelines. However, for summary offences where conversion therapy is proven we recommend that the penalty is changed to a fine and/or imprisonment and not only one or the other.

**Q4. Do you think that these proposals miss anything?**

Yes

**If yes, can you tell us what you think we have missed?**

Omission of suppression

There is a major omission in the Government's definition of conversion therapy. The proposals laid out in this consultation only refer to conversion therapy as a means of 'changing' someone's sexuality or gender identity. However, we are aware that these practices also include attempts to 'suppress' these aspects of identity. The inclusion of suppression was one of the key recommendations of the *Cooper Report 2021* into how to legislate to effectively ban conversion therapy. That report stated:

'Including suppression of sexual orientation or gender identity is vital to ensure that no loopholes are exploited. It is the view of the Forum that if suppression is not included, perpetrators will simply shift their focus from trying to change or 'cure' a person's sexual orientation or gender identity to trying to suppress it. They would still rely on the same methods and continue with the same belief that anything other than a heteronormative and non-trans (sometimes referred to as cisgender) identity is wrong. Indeed, the primary aim of many conversion practices is already focused on trying to suppress a person's sexuality or alter their behaviour or gender expression because their sexual orientation or gender identity is deemed to be unacceptable. Such attempts are both harmful and morally wrong.'<sup>13</sup>

Other jurisdictions have included suppression as part of the legal definition of conversion therapy in their legislation outlawing it. For example, the Australian state of Victoria's legislation which came into force last year made suppression one of the main focuses of the legislation appearing in the long-title of the Act: The Change or Suppression (Conversion) Practices Prohibition Bill 2020. Similarly, the state of Queensland's 2020 ban states:

'Conversion therapy is a practice that attempts to change or suppress a person's sexual orientation or gender identity.'<sup>14</sup>

Without the inclusion of suppression, nearly all current providers of conversion therapy, including to those under 18, would simply be able to continue to practice with just a modest reframing of language. Without this amendment to the definition the ban would be ineffective and would not protect those at risk of conversion therapy.

Omission of religious settings

As stated above, the UK Government's National LGBT Survey in 2018 revealed that over 51% of

<sup>13</sup> Ban Conversion Therapy Legal Forum, *The Cooper Report: Recommendations on legislating effectively for a ban on conversion practices*, October 2021, p3. [https://www.ozanne.foundation/cooper\\_report/](https://www.ozanne.foundation/cooper_report/)

<sup>14</sup> Health Legislation Amendment Act 2020, 213F (1) <https://perma.cc/5EQB-WYK9>



respondents who had undergone a form of conversion therapy had done so in a religious setting. Yet this consultation makes no mention of how the most common form of conversion therapy would be banned. This is a fundamental omission which risks allowing the main providers of conversion therapy to continue to do so unaffected by this ban. We know it is within religious settings that some the most damaging types of conversion therapy, such as exorcisms and forced prayer, occur. When people are experiencing such extreme distress over their sexual orientation or gender identity, they should be met with person-centred, therapeutically well-grounded support. They should not face coercive, medically worthless practices that seek to push them in a particular direction.

Humanists are strong advocates for the right to freedom of religion or belief. But it is an established legal and moral principle that this right is not absolute and is subject to legitimate limitation when its manifestation harms another individual or society at large. Such limitations are comprehensively laid out in Article 10 (2) of the European Convention of Human Rights.

‘Freedom to manifest one’s religion or beliefs shall be subject only to such limitations as are prescribed by law and are necessary in a democratic society in the interests of public safety, for the protection of public order, health or morals, or for the protection of the rights and freedoms of others.’<sup>15</sup>

As described above, the harms to the health of LGBT individuals caused by conversion therapy are well established. We would also argue that through spouting unfounded claims that same-sex attraction or gender identity is a pathology that can be remedied, those performing or advocating for conversion therapy are perpetuating homophobic and transphobic views that undermine the human rights of LGBT people and the morals of society.

The Government’s proposal states that ‘the policy approach set out below will not impact everyday religious practice.’ But does not take into account the difference between the absolute right to hold a belief in the efficacy conversion therapy as part of a religious belief, and the manifestation of that belief which can be limited. In fact there is no consideration of the two-fold nature of this right in this proposal. Whilst individual private prayer should be protected from this ban, manifestations of religious conversion therapy that target LGBT individuals with the aim of changing or suppressing their sexuality and gender identity is not protected by article 9. The distinction the Government makes between physical and verbal communication of conversion therapy is irrelevant. It is the intent and the outcome of harm, and not the method of delivery, which is relevant to the right to freedom of religion or belief.

The United Nations Special Rapporteur on Freedom of Religion or Belief, Dr Ahmed Shaheed, made this argument compellingly in his recent call to the UK Government for action.<sup>16</sup>

‘The right [to freedom of religion or belief] is bipartite. An individual’s forum internum – one’s private, mental space where beliefs and thoughts are formed – has absolute legal protection. Conversely, the external dimension of the right – the freedom to manifest one’s

<sup>15</sup> European Court of Human Rights, Guide on Article 9 of the European Convention on Human Rights, [https://www.echr.coe.int/Documents/Guide\\_Art\\_9\\_ENG.pdf](https://www.echr.coe.int/Documents/Guide_Art_9_ENG.pdf)

<sup>16</sup> Dr Ahmed Shaheed, ‘There is no legal defence of LGBT+ conversions’ *The Guardian*, 23 April 2021 <https://www.theguardian.com/commentisfree/2021/apr/23/legal-defence-lgbt-conversions-sexuality-rights-belief>



religion or beliefs – can be restricted by states, but only where it is necessary to protect public safety, order, health or morals, or the fundamental rights and freedoms of others.

‘As such, an individual’s ability to believe whatever they wish about sexuality or gender diversity, including whether it requires treatment, is protected by the right to freedom of religion or belief. However, manifesting that belief by targeting LGBT+ persons with attempts to change or suppress their sexual orientation or gender identity that inflict harm is not a practice protected by international human rights law.’

‘Claims that a proposed ban on conversion practices would result in priests and other faith leaders being prosecuted if they preach against homosexuality or express their disapproval of gender diversity are unfounded. Some [jurisdictions] have proposed safeguards for both freedom of religion or belief, and freedom of expression, by including a definition of conversion practices that requires that (i) a specific person or class of persons is targeted; (ii) on the basis of their sexual orientation or gender identity; and (iii) for the purpose of changing or suppressing their sexual orientation or gender identity. Individuals would not be prohibited from discussing or exploring their sexuality or gender identity with their faith leaders (or a therapist) in a non-judgmental manner, where there is an explicit exclusion under the ban. Moreover, this threshold would exclude ordinary religious teaching and appropriate pastoral care.

Other jurisdictions provide a model for how a ban in religious settings could be achieved in legislation. For example, the ban in the state of Victoria makes a clear distinction in its definition of conversion therapy regarding those religious practices that are not protected.

‘For the purposes of subsection (1), a practice includes, but is not limited to the following—  
(b) carrying out a religious practice, including but not limited to, a prayer based practice, a deliverance practice or an exorcism’<sup>17</sup>

With this in mind, we believe this ban should include verbal communications where the above intent is established such as confessions/repentances, non-violent exorcisms, faith declarations, fasting, pilgrimages, and attendance on religious courses.

**Q5. The Government considers that Ofcom’s Broadcasting Code already provides measures against the broadcast and promotion of conversion therapy. How far do you agree or disagree with this?**

Somewhat disagree

**Why do you think this?**

It is unclear whether the current Broadcasting Code is sufficient to end the promotion of conversion therapy practices as we are not aware of any examples of TV or radio broadcasts that have been brought to the attention of the regulator. Broadly speaking, the Code protects vulnerable individuals and strikes a fair balance with the competing rights of freedom of religion or belief and freedom of expression. There have been several cases where Ofcom has enforced these rules in relation to programmes on faith healing. This includes complaints lodged against the UK World

<sup>17</sup> The Change or Suppression (Conversion) Practises Prohibition Act 2021, 5(3)(b). <https://content.legislation.vic.gov.au/sites/default/files/2021-02/591143bs1.pdf>



Evangelical Trust (UKWET) about their programme *Miracle Hour* on Faith World TV, after an episode aired in which the host, Bishop Simon Iheanacho, claimed he had healed callers from various ailments, including diabetes and cancer.<sup>18</sup> It is possible that claims made in support of the efficacy of conversion therapy could be similarly regulated, and in some cases – such as demonstrations of exorcisms – are already explicitly banned.

Nonetheless, given that the Government is proposing a new criminal ban on the practice, it would be appropriate to include a specific reference to conversion therapy as an example of a practice that would fall under the prohibitions against harmful and/or misleading claims. We suggest that a reference to conversion therapy be added to the code and treated in the same way as portrayals of exorcisms, the occult, and the paranormal. This would mean that any promotion of such practices must be treated with objectivity, with opposing views represented, and must not contain life-changing advice directed at individuals.<sup>19</sup>

**Q6. Do you know of any examples of broadcasting that you consider to be endorsing or promoting conversion therapy?**

No

**If yes, can you tell us what these examples are?**

N/A

**Q7. The Government considers that the existing codes set out by the Advertising Standards Authority and the Committee of Advertising Practice already prohibits the advertisement of conversion therapy. How far do you agree or disagree with this?**

Somewhat disagree

As above, there are very few cases of non-broadcast adverts on conversion therapy coming to the attention of the ASA. We are aware of one example, see below, where the non-broadcast code was used to ban a conversion therapy advert under the rules surrounding offence and harm. However, this case suggests that the ASA rules could only be used for large very prominent advertising campaigns on a case by case basis and could not be relied upon to implement a blanket ban. We are not aware of any conversion therapy adverts that have been brought to the regulator's attention on the grounds of being misleading.

In 2013, the High Court ruled that Transport for London (TfL) was acting lawfully in banning a proposed bus advert by the Core Issues Trust because it would 'cause grave offence' to those who were gay.<sup>20</sup> The advert in question carried the slogan 'Not gay! Post-gay, ex-gay and proud. Get over it!' TfL's advertising rules mirrored those of the ASA. The ruling dismissed the appeal against TfL's decision to remove these adverts because:

'a) advertisements on the side of London buses are highly intrusive;

<sup>18</sup> Andy Dangerfield, 'Religious satellite TV show *Miracle Hour* 'risking lives'' *BBC News*, February 2013. <https://www.bbc.co.uk/news/uk-england-london-21505191>

<sup>19</sup> Ofcom, *The Ofcom Broadcasting Code (With The Cross-Promotion Code And The On Demand Programme Service Rules)* [https://www.ofcom.org.uk/\\_data/assets/pdf\\_file/0005/100103/broadcast-code-april-2017.pdf](https://www.ofcom.org.uk/_data/assets/pdf_file/0005/100103/broadcast-code-april-2017.pdf)

<sup>20</sup> Core Issues Trust vs Transport For London [2013] EWHC 651 <https://www.bailii.org/cgi-bin/markup.cgi?doc=/ew/cases/EWHC/Admin/2013/651.html&query=%22public+sector+equality+duty%22&method=boolean>



- b) the advertisement would cause grave offence to a significant section of the many inhabitants of London; and, for those who are gay, it was liable to interfere with the right to respect for their private and family life under Article 8(1);
- c) it was perceived as homophobic and thus increasing the risk of prejudice and homophobic attacks;
- d) it was not a contribution to a reasoned debate;
- e) leaflets, articles, meetings and the internet all provide an alternative vehicle for the expression of the Trust's message.

This would suggest that less prominent or subtler conversion therapy adverts are unlikely to be banned under these rules and will not meet the threshold for causing harm or serious or widespread offence. As with broadcasting, given that the Government is proposing introducing a new criminal ban on the practice, it would be appropriate to include a specific reference to conversion therapy as an example of a practice that would fall under the prohibitions against harmful and offensive content. Chapter 4 of the Code already contains a series of prohibitions harmful content such as portrayal of gender stereotypes in adverts (point 4.9) to avoid the harm and offence these cause.<sup>21</sup> We recommend that an additional point is added to this chapter (point 4.10) which states that 'marketing communications must not include depictions or portrayals of goods or services designed to change or suppress a viewer's sexuality or gender identity.' The Government also needs to put forward concrete proposals on how online advertising can be banned and this is similarly updated across all corresponding CAP and ASA codes.

**Q8. Do you know of any examples of advertisements that you consider to be endorsing or promoting conversion therapy?**

Yes

**If yes, can you tell us what these examples are?**

As described above, we are aware of the example of adverts that were briefly accepted to be run by TfL by the Core Issues Trust in 2012 advocating for conversion therapy with the slogan 'Not gay! Post-gay, ex-gay and proud. Get over it!'. The campaign was an explicit attempt to hit back at the gay rights group Stonewall, which as part of its campaign for same-sex marriage ran its own bus adverts saying: 'Some people are gay. Get over it.' Core Issues Trust used the same black, red and white colour scheme as Stonewall and in a statement announcing the campaign accused it of promoting the 'false idea that there is indisputable scientific evidence that people are born gay'.<sup>22</sup> The adverts were pulled by the then Mayor of London under his authority as Chair of TfL and his decision to do so was upheld by the High Court the following year.

**Q9. The consultation document describes proposals to introduce conversion therapy protection orders to tackle a gap in provision for victims of the practice. To what extent do you agree or disagree that there is a gap in the provision for victims of conversion therapy?**

Somewhat agree.

<sup>21</sup>CAP Code, 'Chapter 4: Harm and Offence' <https://www.asa.org.uk/uploads/assets/1837e736-9a2c-4aa4-8139d17d38a74ab4/Cap-Code-Harm-Offence.pdf>

<sup>22</sup>Robert Booth, Hélène Mulholland and Patrick Strudwick, 'Anti-gay adverts pulled from bus campaign by Boris Johnson' *The Guardian*, 12 April 2012. <https://www.theguardian.com/world/2012/apr/12/anti-gay-adverts-boris-johnson>



We welcome the introduction of a conversion therapy specific protection order, which we believe will offer additional protection to children and vulnerable adults from being taken abroad to receive these practices. Such measures have already been shown to be effective in protecting vulnerable children and young people from FGM and forced marriages. As described above, we have concerns around the non-application of these measures to over 18s who 'seemingly' consent to these practices. So we would urge the Government to explore further how these protection orders could work in conjunction with other mechanisms under domestic abuse, coercion and harassment legislation to protect adults who are vulnerable to conversion therapy or are pressured into consenting to travel abroad.

**Q10. To what extent do you agree or disagree with our proposals for addressing the gap we have identified?**

Somewhat agree

**Why do you think this?**

We disagree that the proposal for protection orders fully addresses the gap in protection identified. It does not create a new offence against aiding and abetting the removal of a person from the UK for the purpose of receiving conversion therapy. Unlike the approach taken in FGM and forced marriage legislation, the Government is not proposing to create a criminal offence to prevent a person from taking part in removing someone from the country. Where the victim is a child and there has been sufficient and timely information given to a court to intervene and issue a protection order, this might to an extent make it harder for that person to be removed. But this is unlikely to be the majority of cases. Without aiding and abetting removal to other countries becoming a crime, families and religious communities would simply be able to send victims to countries that do not have bans without any legal consequences. We recommend that the Government look to extend extra-territorial jurisdiction to cases of conversion therapy so that a perpetrator can be held accountable in the UK for performing these practices abroad and that a new offence is created for aiding or abetting sending a person abroad for this purpose.

**Q11. Charity trustees are the people who are responsible for governing a charity and directing how it is managed and run. The consultation document describes proposals whereby anyone found guilty of carrying out conversion therapy will have the case against them for being disqualified from serving as a trustee at any charity strengthened. To what extent do you agree or disagree with this approach?**

Strongly Agree

**Why do you think this?**

We agree with this proposal. We believe that it will be an effective measure to reduce the influence of individuals who are perpetrators or connected to charitable organisations that have either promoted or performed conversion therapies.

**Q12. To what extent do you agree or disagree that the following organisations are providing adequate action against people who might already be carrying out conversion therapy? (Police; Crown Prosecution Service; OTHER statutory service)? Why do you think this?**

No comment. This falls outside of our areas of expertise.



**Q13. To what extent do you agree or disagree that the following organisations are providing adequate support for victims of conversion therapy? (Police; Crown Prosecution Service; OTHER statutory service)? Why do you think this?**

No comment. This falls outside of our areas of expertise.

**Q14. Do you think that these services can do more to support victims of conversion therapy?**

Yes

**If yes, what more do you think they could do?**

In line with the legislative changes proposed, regulatory standards need to be developed/updated to ensure that professional practice in medical settings and in pastoral, and spiritual care reflect these changes and recognise the vulnerabilities and harms of conversion therapies to LGBT individuals. The Government should also consider introducing statutory support services for victims of conversion therapy and safeguarding guidelines for social, medical, and education workers as there is for FGM. The Government has also not addressed the link between conversion therapy and homelessness. We would recommend the introduction of a LGBT homelessness strategy and creating a statutory duty of housing to LGBT youth made homeless through issues relating to conversion therapy.

**Q15. Do you have any evidence on the economic or financial costs or benefits of any of the proposals set out in the consultation? If yes, please can you provide us with details of this evidence, including where possible, any references to publications?**

No comment. This falls outside of our areas of expertise.

**Q16. There is a duty on public authorities to consider or think about how their policies or decisions affect people who are protected under the Equality Act 2010. Do you have any evidence of the equalities impacts of any proposals set out in the consultation?**

Overall, these measures will have a positive impact upon individuals under the protected characteristics of sexuality and gender identity. As described in our answer to question 4, the majority of conversion therapy occurs in religious settings and engages protected characteristics of religion or belief. However, we believe that the ban proposed by the Government to restrict religious based conversion therapy carried out on the under 18s and non-consenting adults is a proportional means of achieving the legitimate aim of protecting LGBT persons from direct harm to their health and wellbeing. Therefore the interference with the right to religion or belief is justified.

**Q17. Would you like your response to be treated as confidential?**

No

**Q18. What is your email address? If you enter your email address then you will automatically receive an acknowledgement email when you submit your response.**

**For more details, information, and evidence, contact LGBT Humanists:**

Chris Lynch, Coordinator  
[campaigns@humanists.uk](mailto:campaigns@humanists.uk)  
[humanists.uk](http://humanists.uk)

