Conversion therapy

House of Commons, e-petition debate
13 June 2022

About the BMA
The BMA is a professional association and trade union representing and negotiating on behalf of all doctors and medical students in the UK. It is a leading voice advocating for outstanding health care and a healthy population. It is an association providing members with excellent individual services and support throughout their lives.

Overview

- The BMA has long opposed so-called ‘conversion therapy’¹ and believes it must be banned in its entirety.
- While the Government has announced its intention to ban conversion therapy for lesbian, gay and bisexual people, the BMA is extremely concerned that this intention has not been extended to transgender and non-binary people.
- The Government’s own analysis found that conversion therapies can result in negative mental health effects like depression and feeling suicidal. Given that transgender people are already most vulnerable to being subjected to conversion therapy, with nearly one in seven reporting that they had been offered or had conversion therapy, it is vital that any ban extends to gender identity.
- The Government has cited legal complexities as justification for its decision to exclude gender identity from any legislation. However, conversion therapy for sexual orientation and gender identity can be intrinsically linked, meaning that excluding conversion therapy targeting gender identity from the ban could weaken attempts to implement any ban in practice.
- Banning conversion therapy for both sexual orientation and gender identity is not unprecedented and there are successful examples from other countries that the Government should learn from in drawing up any legislation.

Impact of conversion therapy on transgender people

There is no robust evidence that conversion therapy can achieve its stated therapeutic aim of changing sexual orientation or gender identity, instead, ‘conversion therapy’ has been debunked countless times as unethical and damaging practice that preys on victims of homophobia, transphobia, discrimination and bullying.

The types of practices tend to be similar for conversion therapy for sexual orientation and for gender identity – for example, talking therapies delivered by faith groups (50%, National LGBT Survey 2017) or healthcare providers (19%).

¹ The practice of emotional or physical therapy used to change or suppress a person’s sexuality or their gender identity and expression.
Research participants who had experienced conversion therapy for sexual orientation and for gender identity have reported harms including psychological harm, substance abuse and suicidal feelings.

There is indicative evidence from surveys that transgender respondents were as likely or more likely to be offered and receive conversion therapy than non-transgender lesbian, gay or bisexual (LGB) respondents, with nearly one in seven\(^2\) transgender people reporting that they had been offered or had conversion therapy.

Leaving aside any ideological views on gender identity, it is the nature of the practices being described that is problematic and harmful. Given that the Government has recognised these practices, methods and activities as ‘abhorrent’, damaging and cruel for LGB people, it cannot be right that these harmful practices continue to be allowed for transgender people.

**Practicalities of excluding gender identity therapy**

Notwithstanding the many ethical reasons for banning conversion therapy in its entirety, there are additional practical obstacles to excluding gender identity from the ban.

In seeking to justify its decision to exclude conversion therapy for gender identity the UK Government said:

> “The Government has a proud record on LGBT rights, and the Prime Minister is committed to bringing forward legislation to ban conversion therapy. Recognising the complexity of the issues and the need for further careful thought, we will carry out separate work to consider the issue of transgender conversion therapy further. This is a legally complex area, and we have a responsibility to ensure unintended consequences are not written into legislation, particularly in the case of under 18s”

However, the conversion therapy for sexual orientation and conversion therapy for gender identity can be intrinsically interlinked, as the Government’s own evidence review indicated:

> “[therapies] targeted at changing sexual orientation also included changing people’s social identities, which could affect their gender identity. As a result, a number of studies have suggested that practitioners of conversion therapy can conflate sexual orientation and gender identity in practice.”

Because of the potential conflation of sexual orientation and gender identity therapies as set out above, excluding therapy targeting gender identity may in effect weaken attempts to implement any sort of ban in practice.

The UK Government should look at the experiences of other jurisdictions\(^3\), including Brazil, Malta, and Uruguay that have introduced bans for both sexual orientation and gender identity. For example, Brazil in 2018 extended its ban on conversion therapy to specific definitions of gender expression and gender identity, stating that “gender expressions and identities are possibilities of human existence, which should not be understood as psychopathologies, mental disorders, deviations or inadequacies”.

The Welsh government has said it will explore legal options to outlaw transgender conversion therapy in Wales, branding the UK Government’s move to exclude it as “unacceptable”, and the Scottish government has indicated it will look to move forward with a complete ban, meaning the UK Governments’ position also leaves it out of step with the devolved nations.

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\(^2\) Government Equalities Office (July 2018) National LGBT Survey 2017

\(^3\) ILGA World (2020) Curbing deception – A world survey of legal restrictions of so-called ‘conversion therapies’
Questions for Government

The BMA encourages MPs to use the e-petition debate to ask the Government:

➢ What further work it considers is needed in order to move forward when it comes to tackling the harmful impacts of ‘conversion therapy’ for transgender people given extensive research has already been used in the Government’s own analysis of the issues?
➢ What the timescales are for any further work to be carried out?
➢ For clarification over what ‘unintended consequences’ the Government is seeking to avoid by excluding gender identity from the proposed ban