



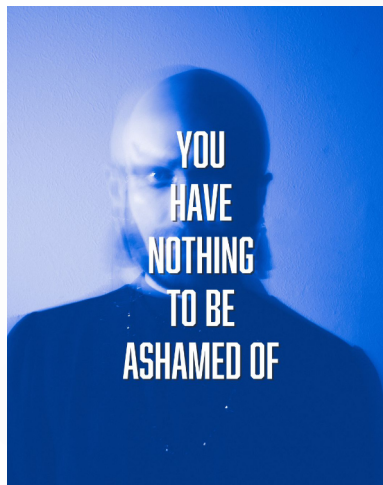
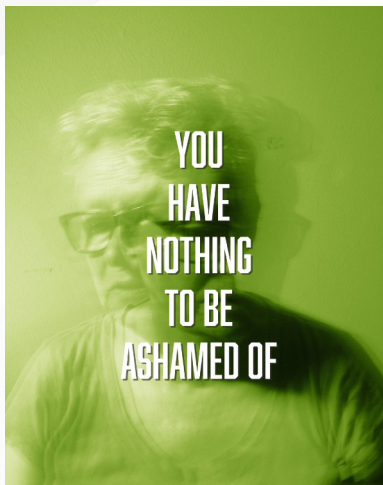
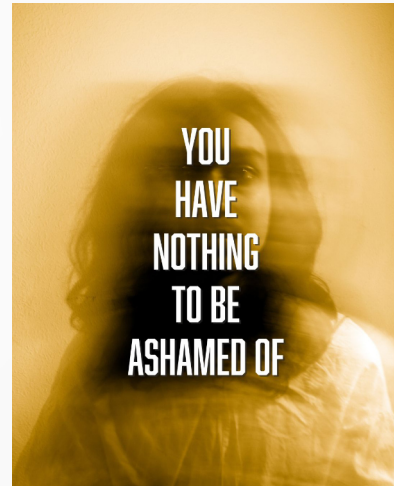
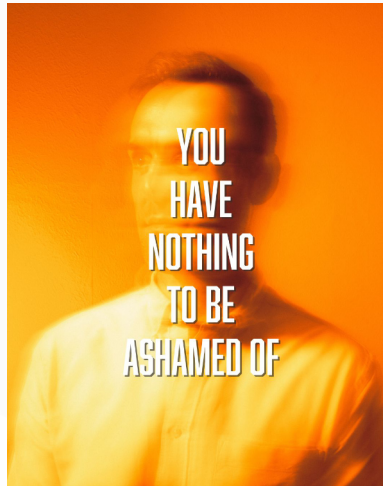
Conversion Practices

An informative guide for anyone concerned about or supporting those affected by conversion practices

Introduction

This resource aims to help inform anyone that is supporting, or may come into contact with someone undergoing or having experienced conversion practices.

The resource was put together by [LGBT Health and Wellbeing](#), and draws on the experiences that many people affected by conversion practices generously shared.



You will find:

- A definition of the term 'conversion practices'.
- Read about how and in what settings those affected by conversion practices experience this.
- The legal status and protection for those impacted.
- How people are affected.
- What steps **you** can take to support the person
- The support provided by LGBT Health and Wellbeing
- Suggestions for further reading on the topic of conversation practices.

What are Conversion Practices?

“Conversion practices” refers to any approach that aims to change, cure, or suppress someone’s sexual orientation or gender identity. Sadly, people are still subject to conversion practices today, and many people who experienced it in the past have lasting effects.

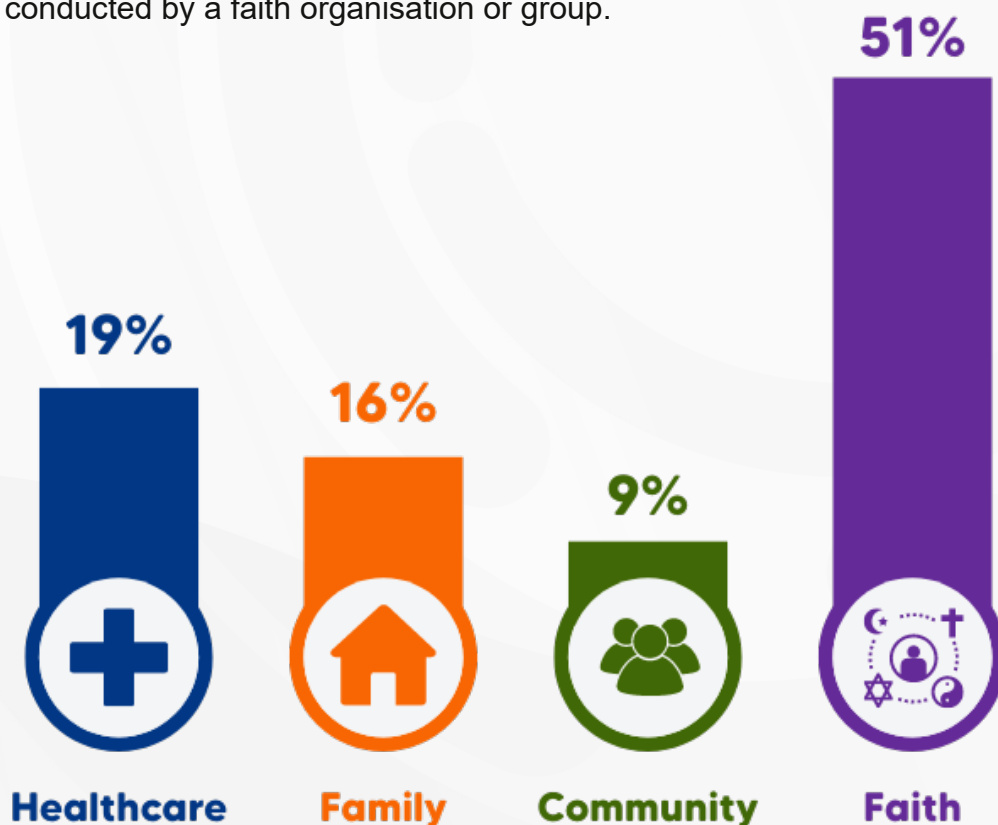
Terminology

Many prefer not to use the term ‘Conversion Therapy’ as it implies a therapeutic process or outcome. These practices are harmful and should not be referred to as ‘therapy’. The term ‘Conversion Practices’ encompasses a wide range of ways that people may be subject to efforts to change their gender/sexuality, or expression thereof. Other terms you may come across include: Aversion Therapy, Sexual Orientation/Gender Identity Change Efforts (SOCE/GICE), Reparative Therapy, and ‘ex-gay’ therapy/ministries.

What sorts of Conversion Practices might people in Scotland have experienced?

Often people are surprised at how close a victim of conversion therapy is to the person or organisation who conducted it. [The Government’s National LGBT Survey](#) (2018) found that one in five (19%) of those who had conversion therapy were offered it through healthcare and medical settings, 16% were subjected to it by a parent, guardian or family member, and a further one in ten (9%) from a member of their community.

But by a large margin, most victims of conversion practices went through it in a faith setting. Over half (51%) of those subjected to a form of conversion practices reported it was conducted by a faith organisation or group.





Conversion practices can be carried out by family members, partners, local communities, religious leaders, therapists, organisations, health workers, or other practitioners. And can take many forms, including:

Spiritual/Religious

- Being prayed over, publicly shamed or having exorcisms performed. Pastoral counselling that targets the individual's identity.
- This can also be linked to Forced Marriage and honour-based violence.

Psychological

- Attending so-called 'therapeutic' or counselling sessions with the intent to change a person's sexuality, gender identity or expression.

Medical

- 'Aversion therapy' and the use of electro-shock and drugs were approved treatments to 'cure homosexuality' in the UK in the 1950s, 60s and 70s, often offered as an alternative to imprisonment. Though we hope these practices do not continue in the UK, we still see the impacts on survivors to this day, especially when the topic is receiving media coverage surrounding legislation on conversion.

Conversion Practices can and do also happen within domestic and community settings with constant, sustained denial of a person's identity, persuasion to ignore or suppress who they know they are and other abusive interventions. This can overlap with other forms of harm, including sexual violence and 'corrective' rape. Whilst some of the examples provided here are quite extreme, conversion practices can happen in much more hidden and insidious ways and become normalised within a family or community.

It's important to note that some Scottish residents may also have experienced conversion practices in other countries either before coming to the UK or as young people having been sent abroad to 'conversion camps'.

Legal Status and Protections

- Currently these practices are legal throughout the UK and Ireland (though some would contravene existing laws) and so there are not any specific statutory protections in place for those subject to conversion practices. In line with the United Nations Independent Expert on Sexual Orientation and Gender Identity, the Scottish Government have committed to legislation to end conversion practices.
- The 'memorandum of understanding' is a joint document signed by over 25 health, counselling and psychotherapy organisations which states that conversion therapy is unethical, potentially harmful and not supported with evidence. This includes the NHS, the British Association of Counselling and Psychotherapy, and other regulatory bodies.

The impacts of Conversion Practices

"The experience of conversion therapy can leave deep psychological wounds as the individual is made to feel that the very core of their existence is wrong."

"Change efforts are inherently disaffirming and devaluing and, in most cases, do not lead ultimately to actual change in sexual orientation and gender identity but rather to behaviours that are tantamount to retreating into the closet or returning to the stress-causing process of concealing a stigmatised identity."

There's no evidence to show that conversion practices work to change people's sexuality or gender identity or have any positive outcomes. There is however a growing body of evidence showing their harms. We know that the health and societal outcomes for LGBT+ people are already reduced due to prejudice and the impacts of minority stress. Conversion Practices go further by reinforcing discriminatory beliefs that LGBT+ people are inferior, pathological, or sinful; they can lead to further abuse and isolate people from their communities. Some of the impacts from research and survivor testimonies include:

- Long term, traumatic impacts on mental health including increased rates of anxiety, depression, self-harm and suicide
- Shame, guilt and internalised stigma
- Struggles with identity and sense of self, including low confidence and self esteem
- Loss of/questioning faith
- Isolation, loneliness and lack of community that can lead to separation from family/community and inhibit connection to LGBT+ community.
- Lack of trust for support services
- Impact on studies, jobs and finances

1 - p215 *The Queer Mental Health Workbook, A Creative Self-help Guide Using CBT, CFT and DBT* by Dr Brendan J Dunlop

2 - p86 *The Case Against conversion therapy* by Michael L Hendricks

3 - [Health needs assessment of lesbian, gay, bisexual, transgender and nonbinary people](#) by Traci Leven

What can we do to better support people affected by conversion practices?

Remember this: Being LGBTQ+ is not something that needs to be changed or suppressed, it is not a disorder and is not linked to traumatic childhood experiences. No one should be told they need to change or hide who they are to be accepted. Challenge any assumptions or prejudices that you might hold.

Increase your understanding: Just being aware and informed about these practices can make a big difference to somebody that you're supporting – so reading this document is a great start. Check out the [Resources section](#) for more reading on conversion practices.

Understand Asexuality: An asexual person does not experience sexual attraction. Asexuality can often be misunderstood as a disorder or something to be fixed. The government's 2018 National LGBT Survey showed that asexual respondents were most likely to have been offered conversion practices directed at their sexual orientation. See [resources](#) to learn more about asexuality.

Don't assume: Try not to make assumptions about the 'sort of people' that might be affected – conversion practices can happen to people of any age, background, race, identity, personality, or faith.

Affirmation: If somebody opens up to you about their gender or sexuality or their experiences of conversion, your reaction is important. Be sure to make it as positive and validating an experience as you can. Thank them for sharing this important information with you and treat them with dignity and respect. This is especially necessary for trans people. The National LGBT Survey 2018 showed that trans people were almost twice as likely to have undergone or been offered conversion practices than cisgender respondents.

Hold space for uncertainty: Experiencing conversion practices could likely result in a crisis of identity – *what label fits my gender and sexuality? Is it compatible with my faith?* It's okay not to have all the answers. People need time and support to better understand themselves and their needs.



Take a Trauma Informed approach: Undergoing conversion practices will likely result in trauma. Talking about traumatic memories might be unhelpful and de-stabilising. How can you support stabilisation and emotional regulation? How can you promote a sense of safety for the person? In the [Resources section](#) we've included some links on how to be trauma informed.

Empower: Be led by the language that survivors use to describe their experiences and themselves. It is not for you to put labels on them or to decide whether they have been subject to conversion practices or not. However, it can be useful to share the term and show that it is something you are aware of. Remember, you can't force somebody to access support or to take action until they are ready.

Building trust: Establishing trust with new people or support services may be difficult for a survivor of conversion practices. After all, some of these abhorrent practices are conducted by people that are loved and trusted, and believe that they're acting in the person's best interest. When trying to change a person's gender or sexuality, that trust is broken and can leave the person fearful of others. Sometimes, the person may have been coerced in to 'consenting' to the practice, believing that it will help them become accepted and loved. Go carefully and be honest about what you can offer.

Tackling shame: As well as the shame that many LGBTQ+ people feel, survivors of conversion practices may also feel shame for having undergone these efforts to change. It's never too late to get support and a person is never to blame for their abuse.

Remain culturally sensitive: Consider the impact of intersecting identities and experiences: LGBTQ+ people of colour, black people, or those from minority faith communities will likely face further barriers and risks to accessing support. LGBTQ+ Black people and people of colour and those with religious beliefs are more likely to have undergone or been offered conversion practices. (See more details in the National LGBT Survey, linked below).

LGBTQ+ people of faith exist: Many live happy and fulfilling lives with their LGBTQ+ identity and their faith existing in harmony. There are resources out there for people struggling to reconcile their faith and their sexuality or gender identity.

No quick-fixes: The impact of conversion practices can be long-lasting. Some may have buried their experiences for years or been stuck in a trauma response. It may take a lot of consistent work to heal. However there may be issues that require immediate supportive action such as help escaping abuse, access to safe housing, or financial support.

Look after yourself: Pay attention to what comes up for you and whether you might need some support and space to process.



What support is available?

YOU HAVE NOTHING TO BE ASHAMED OF



If you think you are experiencing conversion practices now, have done in the past, or are worried you might and want to talk about it, **we're here to listen**

0800 464 7000
lgbthealth.org.uk

LGBT+ Helpline
Scotland



LGBT+ Helpline Scotland

Our helpline is supported by experienced, trained, friendly, non-judgemental staff and volunteers who are happy to listen.

Our support services are completely confidential, open and inclusive of all LGBT+ people and faiths. We are non-directive and won't tell callers what to do.

The Helpline team can make a referral to LGBT Health and Wellbeing's specialist counselling services and connect callers to other groups and supports including LGBT+ affirming faith groups. We can also support concerned professionals, family and friends.

We're open:

- Tuesdays 12-9pm
- Wednesdays 12-9pm
- Thursdays 12-9pm
- Sundays 1-6pm

Phone, email or livechat to us:

- Freephone 0800 464 7000
- Email helpline@lgbthealth.org.uk
- Livechat lgbthealth.org.uk

Further Resources

Learn more about conversion practices:

- Read [Individuals Stories](#) from Ban Conversion Therapy campaign
- [Myths about Conversion therapy](#) – a resource by Galop, the LGBT+ anti-abuse charity
- [‘Thinking Straight’](#) 7 part podcast series on conversion practices in the UK
- [Pray Away](#) is a 2021 American documentary film produced and directed by Kristine Stolakis - it follows survivors of conversion therapy, and former leaders
- [‘Conversion Therapy’ Ban: Legislating to protect the mental health of the LGBTQIA+ Community](#), Mind 2022

Key Research:

- [Conversion Therapy: An Evidence Assessment and Qualitative Study \(October 2021\)](#)
- Book: *The Case Against Conversion “Therapy”: Evidence, Ethics and Alternatives* ed. Douglas C Halderman, 2022
- [National LGBT survey: research report \(publishing.service.gov.uk\)](#)
- [Expert Advisory groups recommendations to Scottish Government on Legislation to End Conversion Practices.](#)

For therapists:

- [The Memorandum of Understanding on Conversion Therapy](#)
- Pink Therapy CPD Module: [Working with Sexuality and Gender Conflicts](#), by Jo Russell.

Trauma Informed Practice:

- [The Work of Stabilization in Trauma Treatment](#), Janina Fisher, Ph.D.
- [What is ‘Window of Tolerance’? Emotional Regulation Model Explained](#), Dr Sarah Davies

Asexuality:

- [Understanding Asexuality](#)
- AVEN – [The Asexual Visibility and Education Network](#)



lgbthealth.org.uk

Scotland's health and wellbeing charity for LGBTQ+ adults (16+)

We welcome the entire diversity of the lesbian, gay, bisexual and transgender (LGBT) community, including non-binary, queer, intersex, asexual people and all identities under the LGBTQIA+ community - this includes those questioning their sexuality or gender identity, or who do not use labels for either.

Follow us on social media @lgbthealthy   

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