HARMFUL TREATMENT
The Global Reach of So-Called Conversion Therapy

Executive Summary
In most countries around the world, discrimination, violence, and oppression based on sexual orientation, gender identity and expression and sex characteristics persist within families, faith communities, and societies at large. A manifestation of this ongoing rejection is that LGBTIQ people are considered disordered and therefore need “cure,” “repair,” or counselling to regain their presumed heterosexual, cisgender identities. The term “conversion therapy” is most widely used to describe this process of cis–gender, heteronormative indoctrination—that is, attempting to change, suppress, or divert one’s sexual orientation, gender identity or gender expression. The term, however, suggests that treatment is needed for a disorder and that people can be converted to cisgender heterosexuality through such “treatment.” Neither is true.

Although the practice of so-called “conversion therapy” has been well-documented over the last five decades in North America and Australia, no study has been undertaken to characterize the nature and extent of these damaging, degrading practices globally. Drawing on data from an extensive literature review, the first-ever global survey on the topic, and in-depth interviews with experts and survivors from various countries, this report seeks to provide a global snapshot of what is known about “conversion therapy” around the world, including who is most vulnerable, what factors lead LGBTIQ people to choose or to be subjected to these harmful practices, what are the main forms of “conversion therapy,” and who are the main perpetrators. Our findings suggest that efforts to repress, change, or “cure” diverse sexual orientations and gender identities are occurring nearly everywhere in the world. Religion, broadly, is the reason most frequently cited, although there are some regional variations. In Africa, religion, combined with family and cultural pressures, seem to fuel the practice of “conversion therapy.” In Latin America and the Caribbean, family and religious pressure also appear to be the main drivers of “conversion therapy,” with perpetrators largely being either religious personnel or private mental health providers. By contrast, in Asia, the data suggest that family “honor” and culture, more than religion, drive families and LGBTIQ people themselves to seek out “conversion therapy,” primarily through private and public medical and mental health clinics, where it appears that physically abusive methods such as aversion therapy are predominantly used. An additional important finding is that efforts to either curtail these practices through official policies, or to ban practices altogether, appear to be minimal, or at least minimally known. This is especially striking given the apparent pervasiveness of “conversion therapy.” As found in our literature review, only four countries actually ban sexual orientation and gender identity change practices.

Finally, consistent with all scientific literature to date, our data suggest that, regardless of religious, cultural, or traditional norms and contexts, these harmful practices never work; instead, they often cause deep, lasting trauma that affects every realm of life for decades. Above all, these data paint a picture of prevailing social, cultural, and religious norms that perpetuate myths about LGBTIQ people; inculcate and support stigma, violence, and discrimination targeting LGBTIQ people; and fundamentally reinforce messages that being LGBTIQ is pathological or otherwise unacceptable. More worrying still, providers of “conversion therapy” are hijacking human rights language to promote their services, claiming that those who do not want to be LGBTIQ have the right to choose to undergo “conversion therapy.”

The demand for “conversion therapy” will only diminish when social, family, and religious condemnation of LGBTIQ lives ceases, and LGBTIQ people are free to access and enjoy their full human rights. Indeed, “conversion therapy” is a manifestation of the scourge of both societal and internalized homophobia and transphobia and is fueled by the messages that being LGBTIQ is pathological, disordered, and unacceptable. Such myths converge in a perfect storm of rejection and condemnation, leading to an ongoing demand for “conversion therapy,” both by LGBTIQ people themselves as well as by their families, faith communities, and broader society.

Additional in-depth investigation is needed at national and regional levels to more precisely characterize the nature and impact of heteronormative, cisgender indoctrination efforts and to formulate advocacy strategies to combat them. It is clear, however, that the issue of “conversion therapy” cannot be tackled in isolation.

‘Conversion therapy’ is not a single event—it is a process of continued degradation and assault on the core of who you are. There are often repeated violations in the form of psychological and sometimes physical abuse... It is not one instance—it is a continued sense of rejection. The pressure is enormous.

- George Barasa
  gay gender non-conforming Kenyan living in South Africa, survivor of “conversion therapy”
In most countries around the world, discrimination, violence, and oppression based on sexual orientation, gender identity and expression and sex characteristics persist within families, faith communities, and societies at large. A manifestation of this ongoing rejection is that LGBTQI people are considered disordered and therefore need “cure,” “repair,” or counselling to regain their presumed heterosexual, cisgender identities. The term “conversion therapy” is most widely used to describe this process of cisgender, heteronormative indoctrination—that is, attempting to change, suppress, or divert one’s sexual orientation, gender identity or gender expression. The term, however, suggests that treatment is needed for a disorder and that people can be converted to cisgender heterosexuality through such “treatment.” Neither is true.

What is “Conversion Therapy”?

The term “conversion therapy” is most widely used to describe practices attempting to change, suppress or divert one’s sexual orientation, gender identity or gender expression. Such practices are also called: reorientation therapy, reparative therapy, reintegrative therapy, gay cure therapy, or more recently support for unwanted same-sex attraction or transgender identities.

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- George Barwu, gay gender non-conforming Kenyan living in South Africa, survivor of “conversion therapy”.

The report was written by Amie Bishop, MSW, MPH.
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