
Conversion Practices Prohibition Legislation Bill

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Submission on the Conversion Practices Prohibition Legislation Bill

Introduction

1. Family Planning welcomes the opportunity to provide comment on the Conversion Practices Prohibition Legislation Bill.
2. Family Planning is New Zealand's only national provider of sexual and reproductive health services for primary health and sexual health promotion. We are a non-governmental organisation (NGO) operating 29 clinics throughout Aotearoa New Zealand as well as services in schools and through community partnerships. We offer accredited clinical courses and workshops for doctors, nurses, midwives and other clinicians working in sexual and reproductive health, and health promotion courses for teachers, parents and the community.
3. Family Planning strongly supports banning conversion practices, which seek to change a person's sexual orientation, gender identity or gender expression. These practices are proven harmful to the health and wellbeing of individuals and are an infringement on human rights.

Harm caused by conversion practices

4. Numerous expert health and social organisations in New Zealand and overseas have denounced conversion practices, determined they are harmful and called for bans including the Royal Australian and New Zealand College of Psychiatrists,¹ the American Psychological Association^{2,3} and the World Health Organisation.⁴ The 2019 Report of the Justice Select Committee on a petition to ban conversion practices also includes a list of some of the organisation that support a ban on conversion practices.⁵
5. Research has found that conversion practices are associated with a range of harms including suicide, depression, anxiety and other mental health problems, physical harm and substance abuse.⁶ These harms are particularly concerning given the clear evidence of

¹ Royal Australian and New Zealand College of Psychiatrists (2019) Sexual orientation change efforts: position statement. <https://www.ranzcp.org/news-policy/policy-and-advocacy/position-statements/sexual-orientation-change-efforts>

² American Psychological Association (2021) APA Resolution on Gender Identity Change Efforts. <https://www.apa.org/about/policy/resolution-gender-identity-change-efforts.pdf>

³ American Psychological Association (2021) APA Resolution on Sexual Orientation Change Efforts. <https://www.apa.org/about/policy/resolution-sexual-orientation-change-efforts.pdf>

⁴ https://www3.paho.org/hq/index.php?option=com_content&view=article&id=6803:2012-therapies-change-sexual-orientation-lack-medical-justification-threaten-health&Itemid=1926&lang=en

⁵ Justice Select Committee (2019) Petition of Max Tweedie for Young Labour and the Young Greens: Ban Gay Conversion Therapy Petition of Amanda Ashley: Ban Conversion Therapy in New Zealand. https://www.parliament.nz/resource/en-NZ/SCR_92751/c6e6e71725e1e313965f8cf736f3813fd9bf9f06

⁶ American Psychological Association (2021) APA Resolution on Sexual Orientation Change Efforts. <https://www.apa.org/about/policy/resolution-sexual-orientation-change-efforts.pdf>

disparities in the health and wellbeing of LBTQI+ communities. For example, the Youth19 survey of secondary school students found that “just over half (53%) of same- or multiple-sex attracted students reported significant depressive symptoms and half (50%) of this group reported that they had self harmed in the past year.”⁷ The *Counting Ourselves* report on the health and wellbeing of trans and non-binary people in Aotearoa New Zealand found that over 70% of survey participants reported high or very high psychological distress.⁸

6. In addition to causing harm to individuals, conversion practices promote and perpetuate stigma and discrimination in our society. They infringe on a person’s human rights including the right to equality and non-discrimination, the right to health, freedom of expression and rights of the child.⁹ Conversion practices are a substantial threat to creating an inclusive society, where sexuality and gender diversity is accepted, respected and acknowledged as part of the range of human identities and experiences.
7. Many jurisdictions have already banned conversion practices. For example, three states in Australia – Victoria, ACT and Queensland have banned conversion practices. Germany, Brazil, regions of Canada and Spain and 20 U.S. states also have bans. The United Kingdom, and a number of other countries, have plans to ban conversion practices.
8. It is timely for New Zealand to ban conversion practices, particularly in light of the government focus on youth mental health and wellbeing and promoting social cohesion and an inclusive society.

The Legislation

9. Generally, Family Planning supports the conversion practices legislation. However, we make some recommendation for consideration.
10. The purpose statement, Section 3, should include promoting and protecting human rights as a purpose, explicitly linking the ban on conversion practices to human rights. The law in Victoria, Australia, *Change or Suppression (Conversion) Practices Prohibition Act 2021*¹⁰, states as its objects:

⁷ Youth19 (2021) A Youth19 Brief: Same- and multiple-sex attracted students.

<https://www.youth19.ac.nz/publications/same-and-multiple-sex-attracted-students-brief>

⁸ Veale J, Byrne J, Tan K, Guy S, Yee A, Nopera T & Bentham R (2019) *Counting Ourselves: The health and wellbeing of trans and non-binary people in Aotearoa New Zealand*. Transgender Health Research Lab, University of Waikato: Hamilton NZ.

⁹ United Nations Human Rights Council (2020) Report of the Independent Expert on protection against violence and discrimination based on sexual orientation and gender identity. Practices of so-called “conversion therapy”. <https://undocs.org/A/HRC/44/53>

¹⁰ Change or Suppression (Conversion) Practices Prohibition Act 2021

<https://content.legislation.vic.gov.au/sites/default/files/2021-02/591143bs1.pdf>

(b) to further promote and protect the rights set out in the Charter of Human Rights and Responsibilities; and

(c) to ensure that all people, regardless of sexual orientation or gender identity, feel welcome and valued in Victoria and are able to live authentically and with pride.

11. In Section 5(2), it may be useful to consider adding language to clarify that health services and other assistance, which is exempt from the ban, must be evidence based. For example, while most health care professionals, social workers and counsellors adhere to best practice standards of care, there are some who may hold beliefs, which are counter to best practice standards, are not evidence-based and would be considered conversion practices. While there are avenues for people to complain to regulatory authorities like the Medical Council where someone does not provide a high standard of care and/or is discriminatory, it may also be useful to state explicitly that care and assistance provided to someone, which is related to their sexual orientation, gender identity or gender expression, must be evidence-based.
12. Family Planning recommends removing the age limit in Section 8. While young people under age 18 are particularly vulnerable to harm from conversion practices, it is unacceptable to subject anyone to conversion practices, regardless of age. Laws in other jurisdictions, such as Victoria, Australia, do not have different offences based on age.
13. As the law is currently written, performing conversion practices on someone age 18 or over (Section 9) is only an offence if it causes serious harm to the person. It may be difficult to prove that conversion practices caused serious harm, which the law only vaguely defines, making it difficult for a person over 18 who is subject to conversion therapy to seek any form of justice. It should be an offence to perform conversion practices on anyone, without qualification.
14. The proposed amendment to the Human Rights Act 1993 (new section 63A) does not seem to be aligned with sections 8 and 9 of the Conversion Practices Prohibition Legislation Bill as it states that it is unlawful for anyone to perform conversion practices, or arrange to perform conversion practices, on any other person. It does not note any difference in offences or lawfulness based on age.
15. Family Planning believes that people who have experienced conversion practices should have equitable access to appropriate care and support, particularly mental health support. Family Planning suggests that the Bill ensures all people who have experienced conversion practices have access to timely, free care and support through ACC or another appropriate funding mechanism.

16. Lastly, the explanatory note of the Bill states that the Human Rights Commission will play an important role educating about conversion practices. Family Planning hopes that this work will include educating religious and other groups, who currently discriminate against sexually and gender diverse people, about harm from conversion practices, and also about tolerance, acceptance and the full range of people's human rights.

17. Thank you for the opportunity to provide comment.

Nāku noa, nā

A handwritten signature in dark ink, appearing to read 'Jackie Edmond', written in a cursive style.

Jackie Edmond
Chief Executive