

Solace Women's Aid (Solace) submission to the Government Equalities Office consultation on banning conversion therapy

About Solace

Solace was established over 45 years ago and is one of the largest single providers of services for survivors of violence against women and girls (VAWG) in the UK. In 2019/20 we worked with 27,414 women, men and children across our services. Our services are mainly delivered in and across London and include refuge and move-on accommodation; community-based services; therapeutic services; North London Rape Crisis and an Advice line (helpline and casework). In our accommodation and community-based services in 2019/20, around 3% of our service users identified as LGBQ and around 2% identified as trans.

Response to questions

Preliminary question: Do you agree or disagree that the Government should intervene to end conversion therapy in principle? Why do you think this?

Solace agrees that the Government should intervene to end so-called conversion therapy in principle, because of the harm it inflicts on people, including a higher risk of depression, anxiety, suicidal ideation and risk of suicide attempts. ¹ It is a form of abuse which often includes types of abuse linked to domestic abuse, including physical, sexual, verbal, psychological and emotional abuse. Solace has limited experience supporting victims of domestic abuse who have experienced so-called conversion therapies, but has supported individuals who have been subject to domestic abuse because of their sexualities and gender identities, which might have led to being forced to undergo so-called conversion therapies had they not been removed from their situations. Facilitating or carrying out so-called conversion therapies is a way of facilitating abuse and should be recognised as such.

1. To what extent do you support, or not support, the Government's proposal for addressing physical acts of conversion therapy? Why do you think this is?

Solace supports the Government's proposal for addressing physical acts of so-called conversion therapy, but would welcome further detail on the proposals. Clarification on whether such offences will be recorded as aggravated is important, and we would support this move which would result in sentences for conversion therapy offences being uplifted by two years. So-called conversion therapy should be recognised as a form of abuse, and as such, training for statutory services to help recognise and act on conversion therapies and support victims with the specific challenges they face should be developed and provided. Frameworks and training which recognise this as a form of abuse need to exist within a wide range of statutory services which support survivors of abuse, including education, homelessness services, drug and alcohol services, suicide prevention services and health services, as well as for professionals working with victims and survivors of domestic abuse and sexual violence.

2. 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 to capacity to do so should be considered a criminal

¹ https://www.stonewall.org.uk/system/files/2020_conversion_therapy_and_gender_identity_survey.pdf

offence. The consultation document describes proposals to introduce new criminal offences that would capture this. How far do you agree or disagree with this?

Solace does not agree that any individual can consent to so-called conversion therapy, and views so-called conversion therapies as a form of abuse. The UN Independent Expert on sexual orientation and gender identity, Victor Madrigal-Borloz, described so-called conversion therapies as "inherently discriminatory", and said that "they are cruel, inhuman and degrading treatment and that depending on the severity or physical or mental pain and suffering inflicted to the victim, they may amount to torture". ² Solace echoes this view and does not believe it is possible for a person to consent to degrading treatment even if they are over 18 and not defined as vulnerable.

These practices, even when carried out in non-physical forms masked as counselling or talking therapy, can result in significant harm. Victims of so-called conversion therapy are more likely to suffer from mental health conditions like depression, post-traumatic stress disorder or anxiety, with these illnesses falling within the remit of bodily harm under the Offences against the Person Act 1861. By accepting that individuals can consent to such harm and certain forms of non-physical abuse, a dangerous precedent could be set which undermines existing legislation relating to other forms of abuse like domestic abuse, forced marriage and honour-based violence. Proposals to ban so-called conversion therapy should be consistent with other abuse legislation where people cannot consent to any form of abuse.

There is often an imbalanced power dynamic when so-called conversion therapies take place, for example between parent and child, faith leader and congregant or community leader and community member. Therefore people who 'consent' to so-called conversion therapies are often financially and emotionally dependent on the person asking them to do so, and refusal could result in social or familial ostracisation and in some cases the removal of financial support. A person is then not able to truly consent to this.

3. How far do you agree or disagree with the penalties being proposed?

Solace agrees with the penalties being proposed. However, the seriousness of the offence should not depend on the "proven impact of the victim", as the proposals currently outline. We do not believe it is possible to accurately discern the impact on the victim, particularly if the so-called conversion therapy has taken place recently, as the impact is likely to continue throughout their lives. A recognition in the guidance that the "provable impact" in recent cases may appear to be much less severe than the true lifetime impact, and that it may not be possible to ever fully appreciate this, would be welcome.

4. Do you think that these proposals miss anything? If yes, can you tell us what you think we have missed?

Solace believes these proposals miss a number of issues. Firstly, it is not clear in the proposals that so-called "talking" conversion therapy is included alongside "physical" so-called conversion therapy in frameworks and training for statutory services. It is important that statutory services have a coordinated approach to tackling both "talking" and "physical" so-called conversion therapies in order to be effective. "Talking" conversion therapy must be included in these proposals and this needs to be made clear.

² https://www.ohchr.org/EN/NewsEvents/Pages/ConversionTherapy_and_HR.aspx

The support package outlined in the proposals should go much further than the helpline/instant messaging service and online resources. The proposals should set out in-person advocacy services alongside victim support provided by specialist LGBT+ 'by and for' organisations. Signposting to counselling services is not enough. The proposals should include the provision of specialist counselling services and advocacy for those currently at risk.

The proposals should not be limited to so-called conversion therapy which attempts to "change" a person's identity, but should also include when suppression tactics or tactics aimed at stopping individuals from acting on their desires. Without including both aspects of this abuse, the proposals are likely to create a loophole which could be exploited by those perpetrating so-called conversion therapies.

Another loophole in the proposals is so-called conversion therapies offered in religious or faith-based settings through non-physical practices, including prayer healing, faith declarations and religious conversion courses. The Minister for Women and Equalities, Liz Truss, confirmed in the House of Commons that the Government will not extend the ban on so-called conversion therapies to religious or faith-based settings. This is despite the Government's own findings through the National LGBT survey in 2018 that 51% of so-called conversion therapy takes place in religious settings. ³ The proposals specify that "private prayer" will not be included in the ban, but the definition of "private prayer" has not been confirmed. If this is to mean individual prayer, then this may not be a problem but prayer with or over someone behind closed doors is evidently a form of so-called conversion therapy and must not be considered "private prayer".

The proposals also refer to protecting LGBT people, preventing "changing a person's sexual orientation or from or to being transgender" and "from being attracted to the same-sex to being attracted to the opposite sex", but this does not explicitly include asexual or aromantic people, intersex people, non-binary people and people with other minority gender identities. Either the proposals need to clarify that this includes people with minority gender identities and list these, or define so-called conversion therapy as "practices that seek to change or suppress a person's sexual orientation or gender identity" to protect the whole LGBT+ community.

The Government should assess the role technology and the internet plays in facilitating or even providing degrees of conversion therapy. This could include websites or pages on social media platforms which host material on this. Proposals to ban so-called conversion therapy should include dealing with harmful online content and publishers.

5. 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? Why do you think this?

Solace holds no particular view on this.

6. Do you know of any examples of broadcasting that you consider to be endorsing or promoting conversion therapy? If yes, can you tell us what these examples are?

N/A

³ https://www.gov.uk/government/publications/national-lgbt-survey-summary-report

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

N/A

8. Do you know of any examples of advertisements that you consider to be endorsing or promoting conversion therapy? If yes, can you tell us what these examples are?

N/A

9. 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?

Solace agrees that there is currently a gap in provision for the victims of so-called conversion therapy and welcomes the inclusion of conversion therapy protection orders as set out in the proposals. Introducing protection orders for conversion therapy would help victims and potential victims be better protected by services that are aware they are in danger of being subject to so-called conversion therapies and/or are at risk of being taken out of the country to undergo so-called conversion therapy.

10. To what extent do you agree or disagree with our proposals for addressing the gap we have identified? Why do you think this?

Solace agrees the proposals are a necessary step. The proposal should go further to better protect children and vulnerable people at risk of leaving the country to undergo so-called conversion therapy. Conversion therapy protection orders should be introduced with powers along the same lines as what is currently in place for female genital mutilation (FGM) protection orders, including surrendering a passport to prevent the person at risk from being taken abroad for so-called conversion therapy. The proposal should also be extended to include a new offence for aiding or abetting the transfer of a person outside the UK for the purpose of so-called conversion therapy, similar to offences for aiding and abetting the removal of a person for the purpose of FGM or forced marriage.

11. 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? Why do you think this is?

Solace agrees with this approach.

12. 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 is?

Solace disagrees that these agencies are providing adequate action against people who might already be carrying out so-called conversion therapy. Galop's frontline services have evidence to show that statutory services on the whole do not recognise when someone is being subjected to so-called conversion therapy, and therefore their response is absent or inadequate in protecting

victims. Statutory agencies must be upskilled in protecting LGBT+ people from so-called conversion therapy.

So-called conversion therapy often takes place in environments like families, that, on the surface, appear to be loving, caring and supportive, so do not flag as a cause for concern within the existing frameworks. In these environments, Galop has founded examples where statutory services have viewed cases as being familial disagreements and therefore not taken any action.

13. 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 is?

Solace disagrees that these agencies are providing adequate support for victims. So-called conversion therapy can largely be invisible to statutory services, but when services do identify cases, it is often the case that they do not know what to do about it so are not able to provide an appropriate response and support. Without statutory frameworks and guidance, taking action or providing support is often at the discretion of the individual professional. Galop has seen cases whereby the professional shares the view of the perpetrator when they are meant to be supporting victims. The views of individuals in statutory services must not determine the support victims receive.

14. Do you think that these services can do more to support victims of conversion therapy? If yes, what more do you think they could do?

Solace believes that statutory services play an important role in supporting victims of so-called therapy, and that there is much more that they can do to provide this.

Being able to identify so-called conversion therapy cases is key to being able to support victims and survivors. Effective frameworks and training to identify cases need to exist within a wide range of statutory services, which should include education, homelessness services, drug and alcohol services, suicide prevention services and health services. The risk assessment of adults and young people subjected to so-called conversion therapies could be appropriately carried out if it is included in the Domestic Abuse, Stalking, Harassment and Honour Based Violence Risk Identification and Assessment and Management Model (DASH) which would then inform the Multi-Agency Risk Assessment Conference (MARAC) process which exists in every local authority.

To protect victims of so-called conversion therapy where this takes place within private homes, emergency housing, advocacy and wraparound support must be provided for those at risk of or being subjected to so-called conversion therapy where appropriate. Victims or potential victims should be assessed as priority need for housing in the same way as victims of domestic abuse. The Government should then provide adequate funding to local authorities to commission specialist 'by and for' support-based accommodation. Such provision should be included within local authorities needs assessments and strategies for support-based accommodation as part of obligations under Part 4 of the Domestic Abuse Act 2021.

15. 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?

Solace does not have any evidence of the financial costs or benefits of the proposals set out in the consultation, but not banning so-called conversion therapy and closing the loopholes identified

will cost both the individual and the state. Galop's frontline services see so-called conversion therapy disrupting young people's education, potentially causing long-term financial repercussions for themselves and society more widely. Furthermore, so-called conversion therapies which contribute to mental health conditions could then contribute to higher homelessness prevalence amongst LGBT+ young people, which places a financial burden on the individual and the state.

16. 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?

Solace does not have any evidence of the equalities impacts of the proposals set out in this consultation.