



Mind response: Banning Conversion Therapy Consultation 4 February 2022

Preliminary question: Do you agree or disagree that the government should intervene to end conversion therapy in principle?

“[Conversion therapy] can completely destroy a person.” – Project Lead at a local Mind

We're Mind, the mental health charity for England and Wales. We provide advice and support to empower anyone experiencing a mental health problem. We campaign to improve services, raise awareness and promote understanding.

Mind welcomes the ban on ‘conversion therapy’ as a means to fulfil the UK Government’s duty to protect people at risk from harm and provide justice for victims and survivors. ‘Conversion therapy’ is a misnomer and doesn’t accurately represent the harm it causes. It is not therapeutic as the name suggests and can cause psychological and physical harm to individuals who are subject to it. Instead of using the term ‘conversion therapy’, Mind prefers ‘conversion practices’ and agrees with the Cooper Report that “an act constitutes as a conversion practice where it is directed against another person or specific groups of persons, and attempts to suppress, “cure” or change that person’s, or those persons gender identity or sexual orientation.”¹ A broad definition of conversion practices should be adopted by the UK Government to ensure that all attempts to suppress, ‘cure’ or change sexual orientation or gender identity are captured in this legislation.

Mind is fundamentally against any concept that believes LGBTQIA+ people need to be ‘cured’ of their sexual orientation and/or gender identity and agree with the Prime Minister that conversion practices have “no place in a civilised society.”² As well as being totally ineffective, the majority of research shows that conversion practices are extremely likely to be associated with negative health outcomes. A study conducted by Blosnich in 2020 found people who had undergone conversion practices:

- Were twice as likely to have had suicidal thoughts
- Had 75% increased odds of planning to attempt suicide
- Had 88% increased odds of attempting suicide resulting in minor injury
- Had 67% increased odds of attempting suicide resulting in moderate or severe injury.³

¹ The Cooper Report, Ozanne Foundation, (October 2021)

www.ozanne.foundation/cooper_report/

² Conversion Therapy, Question for Women and Equalities, UIN 95207, tabled on 24 September 2020: <https://questions-statements.parliament.uk/written-questions/detail/2020-09-24/95207>

³ Blosnich J R, Henderson E R, Coulter R W, Goldbach J T, and Meyer I H (2020) Sexual Orientation Change Efforts, Adverse Childhood Experiences, and Suicide Ideation and Attempts

The psychological harm conversion practices cause requires the UK Government to intervene to end conversion practices with a total ban without exemptions. The proposals within this consultation fall short of protecting everyone at risk of conversion practices. As a signatory of the Memorandum of Understanding on Conversion Therapy in the UK⁴, Mind is calling on the UK Government to change the proposal to:

- Provide a full ban on conversion practices for all adults as well as under 18s
- Clearly include bisexual, asexual, intersex and non-binary people within the proposals
- Ban attempts to suppress as well as change a person's sexual orientation or gender identity.

As part of our research for this response, we carried out several interviews with leads of local Mind services across England and Wales providing mental health support for LGBTQIA+ communities. We heard about the devastating impact of conversion practices on people's mental health and how conversion practices teach people not to care about themselves as they are taught to believe there is something wrong with them. These harmful thoughts can lead to poor mental health and suicidal thoughts.

"Conversion therapy reinforces the feeling like there's something wrong with you, or always feeling like you're the odd one out in a room, or you're not living the way that everyone else is living and therefore certain aspects of society are denied to you or there are barriers in place." – Project Lead at a local Mind

"The results of conversion therapy will lead to serious mental health issues, suicide or suicide attempts with no positive outcomes." – Project Lead at a local Mind

"If you look at survivors' groups for people who have been through conversion and reparative therapy, you see an increase in levels of depression, panic disorders, anxiety, suicidal ideation, increased suicide attempts, increased substance misuse, increased self-harm." – Chief Executive at a local Mind

Mind also spoke with someone who had experienced conversion practices. They spoke of the detrimental impact it had on their mental health. Further adding to the comments above from people working at local Minds, they spoke of the guilt, anxiety and poor mental health they experienced as a result.

"[It] makes you feel guilty and it's very vicious. I think it affects your mental health because if you believe in religion and they're saying the person who created you thinks you're wrong basically, that obviously affects your mental health quite severely like anxiety around having thoughts about the person of the same sex or even depression as well. Just feeling like you're wrong as a person because you feel like you're not welcome." – Person with lived experience

among Sexual Minority Adults, United States, 2016–2018. American journal of public health, (0), e1-e7.

⁴ Memorandum of Understanding on Conversion Therapy in the UK:

www.bacp.co.uk/media/14172/memorandum-of-understanding-on-conversion-therapy-in-the-uk-december-2021.pdf.

If the UK Government is truly committed to improving the outcomes of LGBTQIA+ people, it must intervene and ban all conversion practices, following other countries worldwide who have already done so, such as Ecuador, Germany and Canada who have introduced an outright ban of the practice.

In order for the ban on conversion practices to protect trans people, it is crucial that the UK Government's proposed legislation does not cover gender identity clinics. We would not like to see the unintended consequence of further barriers being created to access gender identity clinics, which already have long waiting times which impact on the mental health of trans people.

Likewise, we want to ensure that the legislation does not affect the availability of therapy which seeks to assist individuals who are questioning their sexual orientation or gender identity, regardless of the end result. Our conversations with local Minds highlighted that they were not concerned the ban would hinder them in supporting people exploring their sexual orientation or gender identity. However, we suggest that careful consideration is given to the legal definitions around this issue, to make sure these possible unintended consequences are avoided.

"I think [the ban] would hopefully be the opposite, it would signal from government that actually, we want to create safe spaces. [Conversion practices] are unsafe spaces to talk about your sexuality or gender expression because there's a bias within the therapist from the beginning... this ban is sending out a message that we want to create safe spaces for people to talk about these things." - Chief Executive at a local Mind

"There is a huge difference between some seeking help because they're having issues around their sexuality, rather than someone's going out to be changed. It's a fine line. Obviously, some people are really not happy being gay or trans, but there needs to be more therapy to help these people." - Project Lead at a local Mind

Alongside the ban on conversion practices, Mind calls on the UK Government to introduce additional measures such as, education, training and awareness of conversion practices so individuals and institutions such as schools and colleges can identify these practices, and victims can access support. The importance of awareness and education was highlighted in our conversation with someone who had experienced conversion practices but did not realise that was what it was at the time.

"I never thought that I had actually experienced conversion therapy because I thought conversion therapy was the stuff you see in the media or in films of shock therapy and the really extreme forms of therapy. Then I read [the] definition of conversion therapy and I think it was a weird moment for me because I realised, I had experienced it but I didn't know that I had." - Person with lived experience

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?

Strongly agree

Mind fully supports the UK Government's proposal to address physical acts of 'conversion therapy'. It's important for these to be identified as a separate aggravating offence with additional penalties to allow prosecutors to show that if an attempt to change a person's sexual orientation or gender identity was a motivating factor in a violent crime, the judge can 'uplift' their sentence – in a similar way to hate crime legislation.

Alongside additional penalties, it is crucial the UK Government also introduces support services for individuals who have experienced physical acts of conversion practices. These services need to provide holistic support and recognise that physical 'conversion therapy' will not only cause physical harm but also psychological harm. It is extremely common for people who have experienced conversion practices to experience suicidal ideation. The Cooper Report produced by the Ozanne Foundation found that 68.7% of people who experienced conversion practices experienced suicide feelings after.⁵

Conversion practices are a violation of article 3 of the European Convention on Human Rights – it is the duty of government to provide protection to individuals from serious harm amounting to torture, or inhuman or degrading treatment. This means it's the UK Government's responsibility to ban conversion practices to protect individuals from harm.

Mind also welcomes the introduction of Conversion Therapy Protection Orders for victims of physical acts of conversion practices. However, this should be extended to all forms of conversion practices and include all those over 18. These protection orders should be widened to protect victims who have suffered conversion practices outside of the UK, for example, granting Conversion Therapy Protection Orders to be included as a basis for an asylum claim.

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 the capacity to do so should be considered a criminal offence. The consultation document describes proposals to introduce new criminal law that will capture this. How far do you agree or disagree with this?

Somewhat agree.

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

Somewhat disagree.

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

Yes

The proposed commitments fall short in protecting all LGBTQIA+ individuals, especially those who have been identified in the UK Government's own research to be at risk of

⁵ Ban Conversion Therapy Legal Forum (2021) The Cooper Report: Recommendations on legislating effectively for a ban on conversion practices: www.ozanne.foundation/cooper_report.

conversion practices, i.e., individuals in religious communities, and those who identify as intersex or asexual.⁶

In order to fully protect all LGBTQIA+ people, the proposal needs to include a duty on statutory services to inform regulators and professional bodies about accusations or charges of ‘conversion therapy’. Mind does not believe a fine is enough and recommends the UK Government enforces punishments that act as a stronger deterrent.

However, Mind is also aware that the enforcement of criminal sanctions could lead to a number of inadvertent and unwelcome consequences in the health sector, including:

- An unwillingness by clinicians to undertake legitimate exploratory conversations with patients because they fear the law might be used against them because of the lack of understanding of the complexities that might exist in an individual case;
- And, linked to these complexities, a lack of understanding in the judicial system of what is often a grey area when it comes to psychiatric care.

Legitimate talking therapies are important for society, and especially for LGBTQIA+ people who have worse mental health outcomes compared to the general population. Banning conversion practices must not interfere with professionals who provide legitimate support for those who may be questioning their gender identity or sexual orientation. To ensure that there are no unintended consequences from this legislation, the UK Government must have a strong, well defined legal definition to safeguard all LGBTQIA+ people and those who seek to provide them with legitimate support.

As well as criminal sanctions, Mind also advises that professional bodies should continue to have an important responsibility and role in providing education and training to their members and the public on the ethical harm of ‘conversion therapy’.

Mind, along with the signatories of the Memorandum of Understanding on Conversion Therapy in the UK⁷, consider conversion practices to be unethical and harmful. There must be an outright ban. The UK Government’s proposal, as it stands, has five major flaws:

I. Informed consent

It is not possible to achieve informed consent for conversion practices. The UK Government’s own research into conversion practices show that adults who ‘consented’ to conversion practices were not given full and unbiased information about the practice, were not informed of the risks it involved, and were not offered any alternative.⁸

⁶ Government Equalities Office (October 2021) Conversion therapy: an evidence assessment and qualitative study: www.gov.uk/government/publications/conversion-therapy-an-evidence-assessment-and-qualitative-study/conversion-therapy-an-evidence-assessment-and-qualitative-study#who-undergoes-conversion-therapy-and-why.

⁷ Memorandum of Understanding on Conversion Therapy in the UK: www.bacp.co.uk/media/14172/memorandum-of-understanding-on-conversion-therapy-in-the-uk-december-2021.pdf.

⁸ Government Equalities Office (October 2021) Conversion therapy: an evidence assessment and qualitative study: www.gov.uk/government/publications/conversion-therapy-an-evidence-assessment-and-qualitative-study/conversion-therapy-an-evidence-assessment-and-qualitative-study#who-undergoes-conversion-therapy-and-why.

The consultation states that consent should be voluntary and informed, given while having capacity, however, the UK Government's own research understands that information is often held back for people undergoing conversion practices and therefore it can neither be voluntary or informed.⁹

Conversion practices lead to psychological harm and constitute torture and inhuman or degrading treatment or punishment and therefore are protected under Article 3 of the European Commission on Human Rights (ECHR). The real risk of severe psychological harm caused by conversion practices can only exacerbate existing mental health problems. Harm in the form of recognised psychiatric illnesses such as depression, PTSD and anxiety are covered within bodily harm under the Offences Against the Person Act 1861. This means that although under the Mental Capacity Act 2005 a person is presumed to have capacity and therefore the ability to consent unless proven otherwise, it is not possible for someone to legally consent to conversion practices as they are considered torture and so protected under the ECHR.

It's also important to understand that by its nature, conversion practices occur in an environment where people feel pressurised and there is a power imbalance, further removing the possibility for informed consent. The pressure which LGBTQIA+ people face to resist their sexual orientation or gender identity in order to feel included in a cis-gender, heteronormative society will most likely impair someone's ability to consent.

In the conversations Mind has had with local Minds services who support LGBTQIA+ communities, serious concerns with the issue of consent were raised:

"If you're in such a state where you're [thinking] I don't want to be me anymore, you're already in a vulnerable state. I think that if anybody is already experiencing those kind of negative things about themselves, I wouldn't consider them to necessarily be thinking right or be able to make those decisions. And often the groups that people will approach for reassurance in that way are very powerful institutions that have roots in homophobia, transphobia, and have an investment in keeping things at a normative line and have people fall in line with that. So I think it should actually be banned for everyone." - Project Lead at a local Mind

"[Allowing people to consent] is a massive loophole... you're going to say yes to pressure from families or from the church to be involved in something like this, even though somewhere deep down you know it's not going to be good for you, it's not going to be a positive experience." - Chief Executive at a local Mind

"How do you say who's vulnerable and not vulnerable? Because being part of a minority, especially in a rural area, that in itself makes you a vulnerable person" - Project Lead at a local Mind

"There are all sorts of forms of coercion and pressure that people can find themselves under. If you're part of a religious organisation, you want to feel part of that family, you're going to go along with whatever people tell you to do to pray the gay away... look at all the subtleties that are involved in microaggressions and

[assessment-and-qualitative-study/conversion-therapy-an-evidence-assessment-and-qualitative-study#who-undergoes-conversion-therapy-and-why.](#)

⁹ Ibid.

how we internalise that homophobia as well. So I think it's really short sighted to say that people aren't being coerced and they can consent.”- Chief Executive at a local Mind

The issue of consent was also highlighted in Mind's conversation with someone who had experienced conversion practices:

“I think a lot of the time consent is very blurred, like I would never say that I have consent to have that talk. I was in the room, I knew it was going to be about relationships but I didn't know that they were going to be praying for me and when you're in the room it's a very intense setting. You can't just really walk out.” – Person with lived experience

II. Defining 'Conversion Therapy'

'Conversion therapy' is misleading and does not encompass all the practices which take place under this definition. The Cooper Report recommended that the term conversion practices should be used in prospective legislation. This term encompasses not only medical practices, but also religious and cultural practices.

Mind agrees with the definition given by the Cooper Report: *“an act constitutes as a conversion practice where it is directed against another person or specific groups of persons, and attempts to suppress, “cure” or change that person's or those persons gender identity or sexual orientation.”¹⁰*

The UK Government must adopt this broad definition of conversion practices by explicitly stating that it is an offence to attempt to suppress, as well as change, a person's gender identity or sexual orientation. It is worrying that this has been excluded in the current proposal as it is clearly harmful and can have a severe impact on someone's mental health. Mind interviewed someone who had experienced conversion practices. They spoke of how damaging it was to be told to suppress their sexual orientation:

“I had the women on the church as well came talking to me saying how they're not homophobic, that I can be gay but I can't be with anyone for the whole of my life and that I have to suppress my desires and that my love for God should be enough... Basically, it made me feel very guilty and I feel like they use the guilt against you because they say 'if you feel guilty that means that it is wrong'”. – Person with lived experience

III. Those most at risk of conversion practices might not be protected under this legislation

It is worrying that the UK Government's proposal doesn't explicitly include people who identify as non-binary, asexual, or intersex, when its own research found that asexual people are at higher risk of being offered or undergoing 'conversion practices' (10%).¹¹

¹⁰ Ban Conversion Therapy Legal Forum (2021) The Cooper Report: Recommendations on legislating effectively for a ban on conversion practices: www.ozanne.foundation/cooper_report.

¹¹ Government Equalities Office (October 2021) Conversion therapy: an evidence assessment and qualitative study: www.gov.uk/government/publications/conversion-therapy-an-evidence-

The ban must consider all minority gender identities and sexual orientations to ensure that all people in LGBTQIA+ communities are protected under this law.

IV. Religious settings

The UK Government's own research found that over half of people who experienced conversion practices did so in a religious setting.¹² However, the proposed ban would still allow for people to attend private prayer and scripture readings around their sexual orientation and gender identity. We know that this form of conversion practice is detrimental to a person's self-worth and mental health and so leaves a significant loophole for conversion practices to continue in private.

Conversations with local Minds show that those who had experienced religious forms of conversion practice were often unaware it was happening, and therefore were unable to consent.

"I don't think they were [aware] because when I was talking to the chap who had everyone praying for him he was saying it as if it was so normal." – Project Lead at a local Mind

"[Religious conversion] is more subtle coercion, I guess, in the sense that people want to feel like they fit in to part of a religious family, and then were told that they couldn't and didn't unless they underwent some sort of 'conversion or reparative therapy', or questioned their sexuality or gender expression being seen as a sin, rather than being the natural expression of human identity." – Chief Executive at a Local Mind

Even if individuals are unaware that they are experiencing conversion practices through religious settings, they are still likely to experience a negative impact on their mental health as a result. In Mind's conversation with someone who had experienced religious conversion practices, they told us how the practices carried out by their church to suppress their sexual orientation has impacted how they feel about themselves:

"I always used to think, 'no, my church would never do conversion therapy... but knowing that it can literally just be like, praying for you to be straight or telling you to suppress your sexuality. Something as simple as that... it's really easily done, but still has major impacts on people's self-identity, their view of themselves, and their mental health." – Person with lived experience

The UK Government should ban all forms of religious conversion practices, including prayer healing, deliverance healing, scripture reading directed at an individual person and/or private prayer. This is absolutely vital to protect all LGBTQIA+ people from harm.

V. Gender transition services must be protected

[assessment-and-qualitative-study/conversion-therapy-an-evidence-assessment-and-qualitative-study#who-undergoes-conversion-therapy-and-why.](#)

¹² Government Equalities Office (October 2021) Conversion therapy: an evidence assessment and qualitative study: www.gov.uk/government/publications/conversion-therapy-an-evidence-assessment-and-qualitative-study/conversion-therapy-an-evidence-assessment-and-qualitative-study#what-forms-does-conversion-therapy-take-1.

Trans people in the UK experience higher rates of mental health problems (including depression and anxiety), self-harm and suicidal ideation. As an already marginalised and vulnerable community, the UK Government needs to make clear that gender transition services, gender transition healthcare and legitimate and explorative gender identity therapy are not forms of conversion practices and therefore will not be an offence under this proposal. It is vital that the proposed legislation has clear, tight definitions and within this, explicitly excludes gender identity clinics to protect from any unintended consequences.

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?

Neither agree or disagree – additional work will be needed when the ban is in place and prior to introducing new regulations for online platforms and the internet.

6. Do you know of any examples of broadcasting that you consider to be endorsing or promoting conversion therapy?

Yes

There are examples of material on YouTube and other social media platforms. These platforms should have instant complaints mechanisms in place to report material related to promoting, advertising and broadcasting conversion practices and procedures for removing this type of harmful content from the platform. UK Government should consider how this overlaps with its plans around online safety through upcoming online safety legislation.

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

Neither agree or disagree.

8. Do you know of any examples of advertisements that you consider to be endorsing or promoting conversion therapy?

Yes

Additional work will need to be done around advertising once the ban is in place as we are concerned about the potential for ongoing online advertisement of ‘conversion therapy’. Significant work will be required to prevent online promotion and well-recognised mechanisms will need to be in place for lone advertisements to be reported.

Local Minds who specialise in LGBTQIA+ support told us they are aware of conversion practices being promoted online, highlighting that this is a current issue that needs to be better addressed:

“Mostly church-related organisations. I’ve seen a few UK organisations that have hosted talks around ‘conversion therapy’, buying into the research around ‘conversion therapy’, the positive slanted research on ‘conversion therapy’, and hosted talks by

people from the US coming over and talking about their work and new studies they've been involved in.”- Chief Executive at a Local Mind

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?

Strongly agree

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

Somewhat disagree.

Why do you think this is?

While we welcome the Protection Orders to individuals under 18, they should be extended to all adults. This should also include people who have been victims or are at risk of conversion practices in their country of origin, and if a Conversion Therapy Protection Order has been granted, this should be a basis for an asylum claim.

As with informed consent within the UK, protection from having conversion practices overseas should be extended to all ages. Due to the harm conversion practices inflicts on individuals, combined with the vulnerability of marginalised communities, it is not possible for someone to consent to conversion practices, in the UK or abroad.

The UK Government should properly address the gap in provision for victims of the practice, by also investigating how to ban conversion practices that are being offered virtually by providers outside the UK to LGBTQIA+ people inside the UK, via Zoom or similar platforms.

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? Strongly agree, why do you think this is?

Mind agrees that anyone found guilty of carrying out conversion practices should have the case against them for being disqualified from serving as a trustee at any charity strengthened. All charities should have a duty to report accusations and charges of conversion practices to regulators and professional bodies, and the Charity Commission should have a duty to investigate whether conversion practices are being offered or promoted by charities. This is particularly important as the UK Government's own research has found that the majority of conversion practices in the UK are conducted in religious settings, many which have charitable status.

There is a gap in the UK Government's current proposal whereby it is envisaged that different criteria will apply to the charity sector than statutory sector. This would conflict with existing professional codes or ethics and practice for talking therapies. To close this gap, the UK Government needs to conduct further work into how to align the

regulatory framework so that it is applied consistently to all talking therapy provision in the UK.

12. 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?

Somewhat disagree.

Why do you think that is?

The current services are unable to effectively deal with the issues of conversion practices without any sanctions available. The conversations Mind have had with local Mind staff supporting LGBTQIA+ communities suggest that they are not providing adequate support.

“I don’t think that the police, CPS or criminal justice system do any kind of adequate work in supporting LGBTQIA+ people in general.” – Project Lead at a local Mind

There is also a lack of awareness among statutory services of what conversion practices are and which groups are at risk from it. This means that frontline services, such as the police, health services and education systems are not recognising when someone is being subjected to conversion practices. This indicates a clear need for more education and training for frontline services, so they are able to identify who is at risk and respond to it.

There is a vital need for engagement and multi-disciplinary work with some faith and cultural communities where conversion practices are more prevalent, in order to create a safe climate and environment for LGBTQIA+ people. In one of Mind’s interviews with a local Mind counsellor, they said they thought some statutory services overlook risks of conversion practices, including physical or sexual abuse, because they perceive them as disagreements over religious or cultural beliefs in families or communities.

“My understanding of it was that there was an element of cultural sensitivity at play, in the fact that some really abhorrent stuff has happened within some religious communities... and the police are quite light touch because you know, you don’t want to be seen that way, but I got the sense that where I’ve heard it’s happening, the police probably weren’t very involved at all.” – Project Lead at a local Mind

The UK Government must also bring in sanctions to provide statutory authorities more opportunities to take action and support victims of conversion practices to escape abusive situations.

13. To what extent do you agree or disagree that the following organisations are providing adequate support for victims of conversion therapy?

Somewhat disagree.

Why do you think this is?

There is a lack of awareness of the potential harm of conversion practices, and it is widely unrecognised by most statutory services, and those who do recognise it often don’t know what to do about it, or do not have the capability to do anything about it.

This means the response of all statutory services to victims of conversion practices are inadequate.

Conversion practices have a detrimental effect on an individual's mental health, yet there is a lack of funded services and opportunities for victims and survivors to seek recovery and support. There needs to be a holistic approach, offering therapy and support as well as providing housing and shelter for people who are at risk or have experienced conversion practices.

In Mind's interview with someone who had experienced of conversion practices, they told us how important it would be to have dedicated spaces where people from LGBTQIA+ communities with experience of conversion practices, could receive support from those with an understanding of these practices and their impact.

"I think more people struggle with [sexuality and religion] than I definitely first thought and I think having a space especially designated for people like us is nice and it kind of shows that we are recognised... although support services like Nightline, Samaritans and Shout and all the other ones are lovely, they're obviously not specialised in what we have to deal with and although they can support us they wouldn't know enough to be able to fully support us... it would also be nice to be able to signposted to because I wouldn't even be able to tell you where I was meant to be going because I wouldn't know." – Person with lived experience

Mind also strongly recommends that all statutory services undergo training to fully understand the complexities and harm of conversion practices. The training should then require all statutory professionals to follow a protocol to ensure that victims of conversion practices have the support they need and that perpetrators are held responsible for their actions.

14. Do you think that services can do more to support victims of conversion therapy?

Yes

What more do you think they could do?

Mind, along with the other signatories of the Memorandum of Understanding on Conversion Therapy in the UK, believe there are three main ways statutory services can better support victims of conversion practices.

1. Fully fund support services for victims and survivors of conversion practices, this includes access to psychological support, access to housing to prevent homelessness as a result of conversion practices, and research into outcomes and improved mental health, resilience and wellbeing support.
2. Provide opportunities for regulators to work together to have a consistent approach to conversion practices, amongst the professional they regulate.
3. Continue research into the prevalence and harm of conversion practices for people of all age ranges, as well as research into improved practice of talking therapists in the area of dealing with sexual orientation and gender identity to create a safer climate and better knowledge and understanding.