

# Re Conversion Practices Prohibition Legislation Bill

2021

Our involvement of over 30 years with gay people who want to change has exposed us internationally to many people who are same-sex attracted but don't want to be, and to many people who used to be gay and aren't any longer. They are a sizeable minority, and one that gay activism usually dismisses or denies the existence of, not least because gay civil rights protections were often granted on the basis of immutability of sexual orientation. If this bill comes law in its present form thousands of New Zealanders wanting to leave homosexuality will be unable to access professional or informal help to do so in this country. The legislation expressly states its intention is to "deter the performance of conversion practices" and the definition of conversion practices does NOT take account of people *wanting* to change their sexual orientation. In fact the legislation blocks ANY attempt to transition from homosexuality to heterosexuality on the grounds that ANY such attempt is intrinsically harmful and prison sentences of up to 5 years are *intended* to put a stop to them. The MO of the Human Rights Commission is to assume guilt until innocence is proven. Practitioners and good people may be forced to defend themselves against vexatious and repeated complaints of causing serious harm.

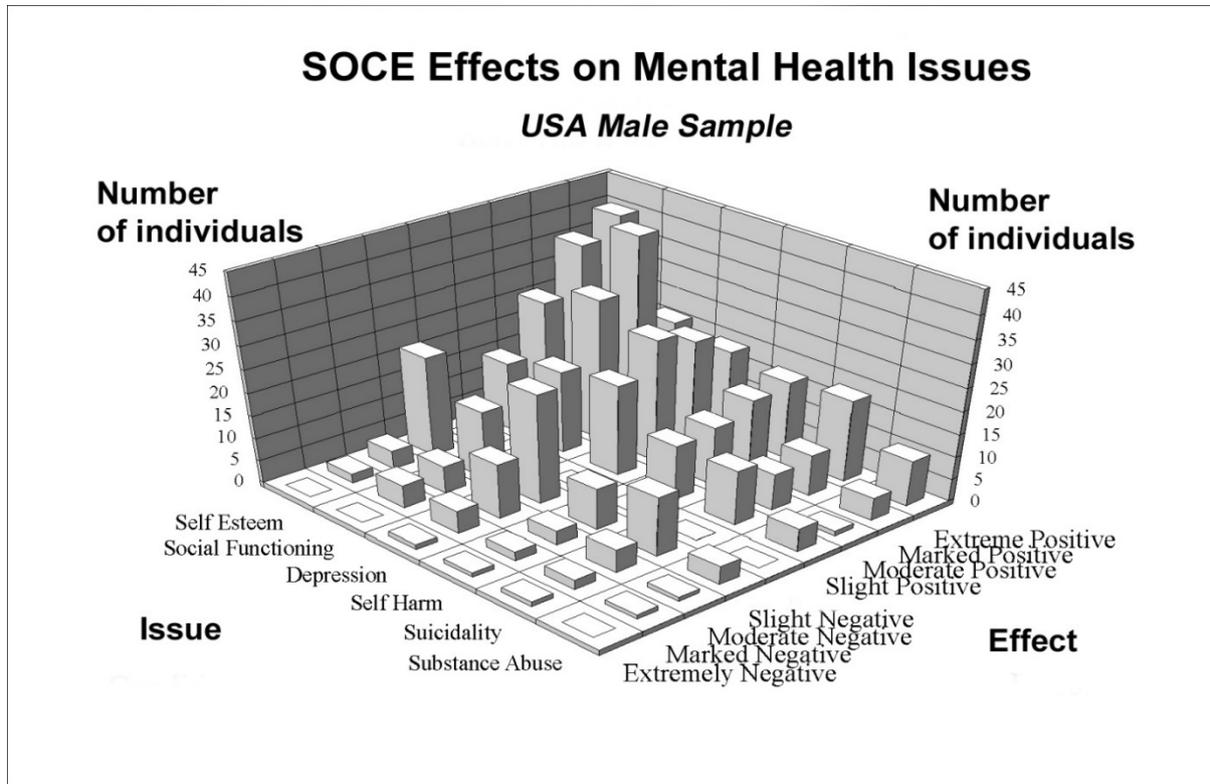
## DISHONEST CLAIMS OF HARM

The claims made in the preamble to the bill of only "harm" and no benefit, as a result of sexual orientation change efforts (SOCE) **are very dishonest**, and made to get MPs and the public on-side and this piece of legislation through the gates. The examples of bad practice that are being used by the bill's proponents as examples of "conversion practices" are absurdly irrelevant and have not been used in NZ by health practitioners for over 60 years. Why do we need legislation to ban what isn't even happening? The Human Rights Commission has received only one informal complaint in 10 years. This bill is ideologically driven, very biased and is copycat legislation.

## BENEFITS OF SEXUAL ORIENTATION THERAPY

The true picture is what is going on in therapy to assist sexual orientation change is seen in the graph below. It is from a **survey of 125 gay men in the USA undergoing sexual orientation change and shows the positive effects on mental health. Almost all the men were in professional therapy – all to informed consent standards - and half were in support groups. The men were asked for both positive and negative responses. 70% reported only beneficial results (Data from Sullins and Rosik, submitted 2021 Linacre Quarterly). Jones & Yarhouse 2007 found very similar results after**

following 98 gays and lesbians over seven years who attended support groups offering help to change sexual orientation.



In their determination to link conversion therapy to harm, the advocates of this legislation<sup>1</sup> have selectively sampled only from the “negative” band and entirely ignored the strong clustering towards the positive end of the spectrum. The same study also showed strong movement towards heterosexual attraction and less homosexual sex.

A former lesbian who describes the benefits is Leah: <https://youtu.be/spBztIXLd0Y> and there are many others, eg., Becket Cook in his book, *A Change of Affection*.

No therapy of any kind is ever 100% successful. Therapists talk of a “rule of thirds”, whatever the presenting condition. One third make huge progress, one third moderate progress, one third do not change. In the study above, the level of “harm” experienced was about average for any therapy.

#### HUGE AMOUNTS OF CHANGE FROM GLB TO HETEROSEXUAL

*My Genes Made Me Do It*, by Dr NE Whitehead, draws on over 10,000 peer-reviewed scientific and sociological publications and papers. Conclusions drawn from the evidence allow these following statements to be made.

- a. Sexual orientation is not caused by genes (few or many), hormones or differences in brain structure at any level. This statement is backed up by solid research data. Homosexuality

<sup>1</sup> Including the authors of the 80-page document, *Preventing Harm Promoting Justice (PHPJ)*, La Trobe University, Australia.

(and transsexuality) are **overwhelmingly environmental in essence (Ganna et al. 2019), (Whitehead, 2011), and support and therapy identifying and working with those environmental factors shows up in lessening of homosexual orientation and behaviour, depression, self-harm, anxiety, suicidality, and in increases in self-esteem.**

- b. 5-6 large studies (Kinsey et al. 1948), (Bell et al. 1981), (Laumann et al. 1994), (Rosario et al. 1996), (Rosario et al. 2006) make it clear that **roughly half the exclusively gay and bisexual population moves substantially towards heterosexuality over time.** The role of counselling in this is not known. It appears to be a naturally occurring phenomenon reflecting environmental changes.
- c. **There are more people in the West today who at one time self-identified as “LGB” than there are currently practising gays, lesbians and bisexuals. (Kinnish et al. 2005)**
- d. 16 and 17 year olds in a large US study of 20,000 students (ADD-Health), (Savin-Williams & Ream 2007) showed **98% of those who thought they were gay or bi at the age of 16 believed they were heterosexual at the age of 17.** i.e., acquiring gender identity is a wobbly process and it is irresponsible to affirm same-sex feelings in an adolescent on the grounds that they are intrinsic and unchangeable.
- e. **Sexual identity and sexual expression are not fixed but fluid (Diamond & J Rosky 2016), and voluntary transition towards heterosexuality is happening all the time with no apparent harm to the individuals involved. This is a naturally occurring process, and people come to it in their own time. At this point they will often seek assistance.**

**IF SO MANY PEOPLE ARE CONTINUALLY CHANGING FROM GLB TO HETEROSEXUAL WHY IS THIS LEGISLATION INTENDING TO BAN POSITIVE INPUT INTO THIS PROCESS FROM PROFESSIONALS AND SUPPORT GROUPS?**

**People seeking help come because they want it and there are no coercive “cures” or treatments offered by professionals or support groups.**

#### **WHAT’S GOING ON WITH MENTAL HEALTH PROFESSIONALS?**

After the American Psychiatric Association (APA) declassified homosexuality as a disorder in 1973, research on treatment stopped and political activism moved to prevent transition entirely, arguing that homosexuality was inborn and fixed. (Numerous attempts were made over decades from the eighties on to prove such a biological imperative but they never succeeded.) The pressure the APA was put under, and the tactics used are not in dispute. It gradually became politically incorrect to offer assistance to people wanting to change their sexual orientation and the policy became one of affirmation only. The American Psychological Association began rubber-stamping the recommendations of its Gay and Lesbian Task Force (most publicly identified as gay) and making public statements discrediting the change process. Its stance gradually became widely adopted throughout the West simply because of the high profile and international influence of such a body (and the ease of cutting and pasting policy statements from the APA website). Ideology is overriding science and many mental health professionals in most Western countries now accept without question the myths that sexual orientation is biologically intrinsic and unchangeable and that gays are 10% of the population. (In fact, gays and bisexuals number closer to 3% of the population and classic Trans people are closer to one in 30,000. (Association 1980)

So we have a situation in the West in which professional bodies of mental health practitioners are increasingly ideologically opposed to working with a client wanting to transition to heterosexuality and are expecting that stance in the practitioners they supervise and license. We also have

therapists and counsellors who have received no training at all for about 40 years in what homosexuality is and why. People with unwanted same sex attraction are told by many professionals now that they can't change. **Under the legislation even referral to another practitioner will be an offence under the Human Rights Act.**

**Those NZ mental health practitioners who had made an effort to acquaint themselves with ways in which they could assist people with unwanted same-sex attraction, are now so spooked by this legislation that they refuse to be available – (personal communication from a practising therapist of 40 years).**

**NB. The “scope of practice” clause can be over-ridden by professional peer-pressure and is subject to the policy of the registering authority.**

#### **SUPPORT GROUPS:**

Support groups set up by gay people wanting to change their orientation sprang up widely in the USA after the APA decision to declassify homosexuality as a disorder, because people who wanted help to change could no longer get it. Thousands of gays attended them over years. They were set up all through the West (and in NZ), offering support and resources. These have been forced to close at the dictates of Western governments and more recently their activities have also been curtailed by social media de-platforming. The last support group in NZ folded several months ago in anticipation of this legislation, the leader's wife freaking out at the thought that her husband would end up in prison. ***The bill appears to blanket-ban any assistance by support groups. This is tantamount to forcing AA to close its doors because it may cause alcoholics harm by helping them. Support includes books, DVDs, workbooks, videos produced and written by former gays, therapists and researchers; group meetings and discussions, mutual encouragement, workshops, seminars, social support, mentoring weekends, professional counselling where possible – and other “harm”-less input.)*** People who attend such groups – unless they are “plants” – **WILL** be there seeking a change in their sexual orientation.

#### **CONSENT NO DEFENCE: THE BILL EXPRESSLY STATES CONSENT IS NO DEFENCE**

Most MPs probably believe that an LGB person wanting to change his/her orientation is being coerced, but plenty of research now shows this has nothing to do with “homophobia.” It happens because these gays find “being gay” **is not emotionally satisfying or fulfilling even in accepting and tolerant societies.** (Relationships are generally short term and unstable: 50 different studies put the length of gay and lesbian relationships at 4.7 years, plus or minus 2 years (N. Whitehead 2017), and gay relationships are rarely faithful.) **The legislation says “consent” is no defence but written consent given by an LGB person with unwanted same-sex attraction to an informed counsellor or support group of his/her choosing should constitute sufficient protection for the counsellor or support group to provide resources and proceed with the process of change free from the threat of criminal charges.**

#### **FALSE DISTINCTION BETWEEN “GENDER TRANSITION” AND “CONVERSION PRACTICES”.**

**Both these definitions are loaded with agenda. One is called transition and gets the big tick, the other is called a “conversion” practice and results in criminal charges. But both groups are “transitioning.”** The LGB person wants to re-orient from a gay identity to a heterosexual one, the trans person wants to change their sex entirely. **Why is girl-to-boy just encouraging gender expression, and gay-to-straight “harmful”?**

### Scenarios under this legislation:

- Two people enter a therapist's clinic. One is a chromosomally "normal" girl who wants to transition to being a boy. The other is a man with unwanted same-sex attraction. The affirming therapist tells the girl that funded counselling, hormonal and sex-reassignment surgery are available to help her. The man is told he cannot change, that change attempts will only harm him, and that the therapist may be criminalised or disbarred if such services are offered.
- Someone wanting to set up a support group for young people changing their sex will be able to access all sorts of services– and probably financial assistance - without fear of breaking the law - but a former gay man wanting to set up a support group for other gays wanting to pursue heterosexuality, will, under this legislation be defined as person offering conversion services prohibited by legislation, and be subject to complaint procedures and the threat of incarceration for causing harm.
- If a man who used to be a practising gay for years is invited to NZ to talk publicly about the change in orientation he experienced 7 years ago, will those who invited him be criminalised as "conversion" advocates? Will advertising the visit be subject to a complaints procedure? Will he be considered a "change" advocate promoting harm, and not be permitted to speak. Will the media muzzle him, will people be too intimidated to organise speaking events?
- If someone wants to run seminars or fireside chats about causes of homosexuality and what is involved in the process of change, will this constitute "respectful and open discussions" as (hopefully) intended in the preliminary provisions, or be open to complaint by an offended party?
- If an LGBT person approaches an individual who is knowledgeable about causes of same-sex attraction and *WANTS to explore what's involved in the process of change (over a long coffee)*, is that knowledgeable person going to be breaking the law?

The preamble to the bill expressly says the new criminal offences have been introduced to "deter the performance of conversion practices" on grounds that they do not work. **This is not just misinformation, but propaganda.** We know from personal experience that many in the gay lifestyle want to get out, but don't know how! The honeymoon is great but is soon over for the great majority. Many who have transitioned to heterosexual - or are in process - say they would not have been able to get the help they received if legislation like this had been in place at the time. Some say they would have committed suicide.

This bill gives carte blanche to trans-affirming therapists to offer a full range of treatments to aid transition to another sex (with considerable long-term attendant risks) yet makes it a potential crime to help a gay person merely change sexual orientation. This is a nonsense.

**This bill is the outcome of a long propaganda drive. Not only are the alleged abuses NOT happening, but the bill is an attempt to curtail legitimate therapeutic assistance and support to LGBT people wanting out of the gay orientation and lifestyle, and there are many of them. In an ideal world this legislation would be withdrawn and an apology made to those people who want to change. It is actually abusive.**

## RECOMMENDATIONS:

### AN EXEMPTION

An exemption be made in the bill for GBL people who want to explore the process of assisted change of sexual orientation

AND

### CHANGE TO CONSENT:

The <Consent not defence> clause needs to be amended so that LGB people who WANT to change their sexual orientation can take advantage of an approved consent procedure that not only states that their desire to leave the lifestyle is voluntary and uncoerced but also protects the practitioner, or support group or support person from any legal penalties, the client being free to leave the process at any time.

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### NOTE ON TRANS

The rise of the current trans phenomenon in insecure young people (particularly girls) fairly closely tracks the rise of social media and the amount of time these adolescents have spent watching trans-celebrities on social media, some of whom have followers numbering more than a million.

**This current preoccupation in genetically and hormonally “normal” adolescents NEEDS TO BE HANDLED VERY DIFFERENTLY FROM GENUINE PHYSICAL INTER-SEX CONDITIONS (IN WHICH GENITALIA ARE AMBIGUOUS) that require hormonal and surgical intervention to help clarify and stabilise gender identity.**

Also on social media – but probably not viewed by nearly as many adolescents – are an increasing number of accounts from individuals who are now de-transitioning, because “transitioning” didn’t “solve the problem.” This population will take time to reveal itself and will increase as time goes by. Large percentages of people who have transitioned are simply lost to followup.

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