Conversion therapy

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Translated from French by Bianca Wiles

Definition and history

According to the definition given by the Williams Institute, a UCLA School of Law based institute which conducts research on issues of public policy relating to sexual orientation and gender identity, conversion therapy is a practice lead by health practitioners or members of religious communities. Its aim is to change the sexual orientation of those attracted to same-sex individuals. Also referred to as sexual reorientation therapy, this practice is based on the belief that homosexuality does not conform to the socially accepted norm and that, consequently, homosexual people can and must be cured. These therapies can take varying forms: group or individual therapy sessions, exorcism sessions, healing masses, summer camps, conversion camps, etc.

Conversion therapy is in no way a new phenomenon, especially in the United States. Their practice evolved in time, simultaneously to the conception of homosexuality. The 19th century represented a turning point regarding issues of homosexuality. At that time, Foucault speaks of homosexuality’s “loud entrance” into medical discussions where issues of same-sex sexuality became increasingly studied by doctors and scientists. Conversion therapy originally anchors itself in the fact that homosexuality was considered a mental illness and, in most European countries, as a crime before its gradual depenalisation.

This understanding of homosexuality was strongly influenced by religion that considered it as an unnatural phenomenon which goes against God’s will. In this sense, the pathologisation of homosexuality paved the way for the use of radical medical methods aiming to cure patients suffering from this so-called ‘illness’. These cures included lobotomies, electroconvulsive therapy, and even castration. Some psychotherapists insist on the importance of the family’s role in the development of homosexuality through sexual abuse, the father’s absence, etc., while others attribute it to physical and mental degeneration.

In the early 1970s, conversion therapy can be divided into two broad groups: the use of aversion techniques on the one hand, using electroconvulsive therapy which consists in sending electroshocks to the patient while showing pictures provoking an erection in order to make them

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2 Frédéric Martel, « Homosexualité », Encyclopédia universalis, available at: https://www.universals.fr/encyclopedie/encyclopedie/
3 Bernard Nicolas, Homothérapies, conversion forcée, documentary, 2019, Arte, available at: https://www.youtube.com/watch?v=2k_SUT4ZM8
associate those images to a feeling of anxiety and discomfort. On the other hand, the use of nonaversive techniques using conversation and hypnosis in order to fight and suppress their sexual desire. The psychiatric and psychological pathologisation of homosexuality was the most common between the 1960s and the end of the 1970s.  

In 1973, an important change occurred when, following a debate of the American Psychiatric Association, the following question was asked: “is homosexuality a psychiatric disorder?”. The latter in fact decided to remove homosexuality from the list of mental illnesses with 10,000 psychiatrists voting on the matter (58% to 39%, with a 3% abstention).

This however, did not mark the end of conversion therapy as it underwent a revival at the end of the 1970s under the impulse of certain religious movements which took hold of the issue in response to the psychiatric field moving away from considering homosexuality a mental illness. These religious groups therefore took over, as did the religious association Exodus (an American Interfaith association created in 1976) which claims to cure homosexuality. The latter preaches, through its community called “ex-gays”, a miraculous healing to incite homosexuals to join them and follow their conversion therapy.

In the United States, these movements anchor themselves in a context of sexual revolution where LGBT+ communities are increasingly present on the public stage and protest against discrimination and to assert their rights (a right to safety, a right to same-sex marriage, equal civil and social rights). In response, radical religious movements fight against homosexuality which, to them, represents a danger to society.

It was only in 1992 that the World Health Organisation (WHO) removed homosexuality from the list of mental illnesses. Despite this evolution, groups - both religious and secular - asserting the possibility to convert homosexuality into heterosexuality managed to expand and export.

The way in which homosexuality has been perceived through time still strongly influences the way societies understand homosexuals today. Psychiatrist Malick Briki, a specialist on the matter, reminds us in his book that the classification of homosexuality as a mental illness has resulted in the strengthening of homophobia: “homosexuality never should have been classified as an illness, to consider it as such caused the stigmatisation of homosexuals. This diagnosis reinforced homophobia. Homophobia can be social, domestic or internalised by homosexuals which brings them to reject themselves and can lead to self-depression, and suicide attempts.”

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6 Bernard Nicolas, op. Cit.
7 Ibid.
9 Julie Declos, Op cit. [quote translated from French]
Consequently, this classification also allowed for the reinforcement of heterosexism which makes heterosexuality the norm and implies that all people are meant to be heterosexual. In fact, heterosexism argues that homosexuals, considered abnormal and unnatural, have less power and rights than heterosexuals in society.\textsuperscript{10}

**Religion’s role**

After 1992, a decline in the medically lead conversion therapy was observable as it became considered as unethical and inhumane. Nonetheless, this did not entail their complete disappearance as certain health professionals unofficially kept practicing it.

As a result of this decline, religious figures and associations such as Exodus, Courage, or Desert Stream Living Waters emerged to become central actors of this practice. Religion plays an important role in the acceptance – or not – of homosexuality within the family and society in general. Many studies have shown that those with strong religious beliefs are more likely to want to undergo conversion therapy.\textsuperscript{11} While some religions and believers accept same-sex relations, many remain opposed to them. This is explained by the internalisation of homophobic or “homonegative” thoughts and attitudes which play a key role in the acceptance of people’s attraction to same-sex people.\textsuperscript{12}

The most fervent worshipers are those most likely to react negatively in the face of homosexuality, in comparison to those for which religion plays a less important or non-existent role.\textsuperscript{13} Accordingly, those attracted to another person of their gender and who consider religion as a fundamental aspect of their life will be more likely to consider conversion therapy as an effective solution and sign themselves up.\textsuperscript{14}

This issue is also linked to the way in which these religious movements perceive masculinity (which is not specific to religion). This perception relies on ideas of virility and heterosexuality as a man must be capable of procreating and therefore having sexual relations with a woman. Homosexuality is therefore considered a “lack of masculinity” and a sin.\textsuperscript{15} Similarly for lesbians, homosexuality is considered to go against the idea of what a feminine woman is, capable of bearing children and therefore capable of starting a family with a man.

Therefore, the recognition of their homosexuality will cause many believers to take steps in order to be “cured” through conversion therapy often performed by their religious community or Christian or Evangelical associations. Group pressure is a key factor to consider in order to

\textsuperscript{10} Gregory Herek, « Sexual orientation differences as deficits : science and stigma in the history of American psychology », 2010, Perspective on psychological science, p. 693
\textsuperscript{12} Ibid. p.719
\textsuperscript{13} Ibid. p.733
\textsuperscript{14} Ibid. p.733
\textsuperscript{15} Bernard Nicolas, op. Cit.
understand this phenomenon. A person’s religious community and their family are central to the
way in which their sexual orientation is approached.

In Bernard Nicolas’ documentary “Homotherapies, forced conversion”, many testimonies shows
the key role families play in the, sometimes imposed, decision to undergo conversion therapy.
One of the most common situations is illustrated through the example of a young women in San
Francisco who comes from a very religious and openly homophobic family. The discovery of her
homosexuality terrified her and generated a great feeling of shame – a shared feeling to most of
those interviewed in the documentary. Her parents were afflicted. Afraid to be rejected by her
family and her community, and under her parents’ pressure, she turned to conversion therapy.16
During therapy sessions, faith is used to apply pressure and to create a feeling of guilt. The Bible
becomes a weapon. Those undergoing therapy are threatened with this verse of the Bible: “nor
thieves, nor the greedy, not drunkards, nor slanderers, nor swindlers shall inherit the Kingdom of
God”.17

To this day, homosexuality is considered as a sin by the Catholic Church. While, in 2013 and
against all odds, Pope Francis said “if someone is gay and is looking for the Lord, who am I to
judge?”, he then triggered some controversy in August 2018 after saying that homosexuality in
young children should be corrected particularly through psychiatry, which put an end to any
progressive hopes.18

Conversion therapy is not exclusively under the prerogative of religious movements. Some health
professionals continue to claim that “curing” homosexuality is possible. This was the case of a
German doctor, member of the German Association PKA (Pharmazeutisch-kaufmännische
Angestellte). One of the proposed solutions is to advise patients to eat oregano in order to control
their sexual desires.19 It is also important to not minimise the role families may play in pressuring
their children into conversion therapy, especially homophobic families – whether religious or not.
Conclusively, a features all the above-mentioned actors have in common is their struggle to
accept homosexuality as a normal sexual orientation.

What about scientific reliability?

On a scientific level, the debate as to the efficiency of conversion therapy is inexistent, or at least
hardly disputed. No study has been able to prove the efficiency of these this therapy: there are
no arguments to support the idea that homosexuality can be perceived as a mental illness.20
Furthermore, conversion therapy does not rely on any empirical, factual or scientific elements.

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16 Ibid.
17 Ibid.
18 Eric Jozef, « Sur l'homosexualité, le pape fait scandale, l'Église rétropédale », August 28, 2018, Libération, available at:
19 Bernard Nicolas, op. Cit.
20 Douglas Haldeman, « Gay rights, patients rights : the implications of sexual orientation conversion therapy », 2002,
Professional psychology : research and practice, vol. 33, n°3, pp. 263
Such elements would be essential and necessary in order to judge the efficiency and reliability of a therapeutic treatment, neither of which has been demonstrated in this case.\textsuperscript{21}

Accordingly, in 2009, the American Psychological Association published a paper titled “Appropriate therapeutic responses to sexual orientation” which put forward the lack of any elements able to prove that conversion therapy has yielded the intended results.\textsuperscript{22} While those who practice and defend conversion therapy praise its efficiency, the above-mentioned paper, relying on rigorous scientific studies, demonstrates that the methods used are inadequate to determine the efficiency of this therapy. Such methods and practices also fail at giving concrete answers on the duration of the results, and they do not warn people as to the negative effects that may result from this practice, such as trauma, depression, suicidal tendencies.\textsuperscript{23}

Members of this research committee therefore call for great caution and ask health professionals to be honest towards their patients as to the likelihood of their sexual orientation being changed. A leading figure in this field, Exodus International ceased to exist in 2013 following a declaration of its president, Alan Chambers, stating that conversion therapy has no effect on people’s sexual orientation and that homosexuality could not be cured. The latter apologised and has since then been touring the United States trying to mend the damages Exodus caused over the years.\textsuperscript{24}

Additionally to this issue we must consider the other major challenge that is the risk of damage caused to those undergoing conversion therapy. This practice causes and can also aggravate a patient’s emotional distress and mental fragility.\textsuperscript{25} Most of the stories told by those having been subjected to this practice highlight the psychological and sometimes physical violence they met during these traumatic experiences.\textsuperscript{26} They expose the psychological manipulation and humiliation that lead them to hate and be ashamed of themselves. Some were also forced or encouraged to abstain from any sexual relations if they did not manage to become heterosexual.

Practices such as exorcism – commonly lead by a French association named Torrents de vie\textsuperscript{27} – resemble torture. ‘Patients’ are tied up, held down to the ground, or aggressively held, all while being shouted at, asking the demon of homosexuality to leave their bodies.\textsuperscript{28} The refusal of some to submit to these practices sometimes result in their rejection from the community. This shift the blame onto them, making them feel guilty about their desires. Consequently, a common trait to all these victims is depression. Many have and still to this day, suffer from suicidal thoughts and have come close to death.\textsuperscript{29}

\textsuperscript{23} Ibid.
\textsuperscript{25} Ibid.
\textsuperscript{26} Judith M. Glassgold, Lee Beckstead, Jack Drescher, Beverly Greene, Robin Lin Miller, Roger L. Worthington, op. Cit.
\textsuperscript{27} Ibid.
\textsuperscript{28} Evangelical association that offers spiritual guidance for homosexuals and practices conversion therapy.
\textsuperscript{29} Ibid.
A global state of affairs

**The United States**

Commonly used in the United States, the Williams institute estimated that, in 2019, 698,000 LGBT+ adults (18-59 years old) underwent conversion therapy, 350,000 of which had already endured it during their adolescence. During the same year, the institute estimated that 16,000 teenagers (13-17 years old) would start conversion therapy provided by health professionals before their 18th birthday, while for 57,000 teenagers, therapy would be provided by a religious figure of a spiritual councillor.30

These numbers highlight the implications of this issue in the United States where teenagers are particularly affected and remain the most vulnerable in the face of conversion therapy. In 2019, with support from awareness campaign lead by activists, LGBT+ associations in particular, 18 States adopted legislation limiting or banning the use of conversion therapy. This was the case of California – the first state to do so in 2012 – which was then followed by Connecticut, Hawai, Illinois, Massachusetts, Nevada and New York.31

In 2015, the Supreme Court rejected an anti-gay activist’s complaint against the ban of the practice of conversion therapy on children in New-Jersey.32 The same year, president Barack Obama also condemned this practice after receiving a letter from a young transgender person who had committed suicide after being subjected to conversion therapy.33 Nonetheless, the ban on conversion therapy does not target therapy practiced by religious figures or spiritual councillors. The latter are protected by the first amendment of the constitution which ensures that all are free to exercise their religion how they see fit, and that parents are free to take responsibility of their children’s health. These rights are supported by powerful organisations such as the Family Research Council (a Christian Evangelical organisation) which is also backed by Mike Pence.34 This issue is an inherently political one; those in favour of conversion therapy in the United States, can count on the important and powerful influence of a religious right-wing.

Being an issue of public opinion, surveys have revealed that a large portion of Americans favour a ban on conversion therapy, as shown in the following tables:35

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31 For the complete list of States having limited or banned conversion therapy, refer to the Williams Institute’s website.


### Europe

In Europe, the situation is fairly different. Conversion therapy is much more discrete than it is in the United States and it is therefore harder to have an overall picture of the reality surrounding the practice. However, the European Parliament ruled for the first time, in 2018, in favour of a ban of conversion therapy through the adoption of a text on “the Situation of Fundamental rights in the EU in 2016” on the 1st of March. This text asking member states to act according to the findings of this text did not meet much success as only few states followed this directive. Malta was the first European country to ban conversion therapy in 2016, followed by Germany and the cities of Madrid and Valencia.

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36 Available at: https://www.europarl.europa.eu/doceo/document/TA-8-2018-0056_EN.html
In France, the activities lead by religious groups or Church ministries such as Courage and Torrents de vie (branches of American associations) are well known but remain untouchable and uncondemned. However, Laurence Vanceuneborck, member of parliament for La Republique en Marche party, tabled a legislative proposal on June 3rd 2020 to ban conversion therapy in order to protect its victims. Today, it is impossible to file a complaint against this practice as they remain authorised under the French Penal Code. This legislative proposal therefore aims to create “a specific offence to ban this practice and provides aggravating factors to account for minor’s situations, as they are disproportionately affected by this “therapy””. This proposition will also allow access to currently non-existing statistics.

Other examples

Conversion therapy is practiced worldwide and isn’t limited to the United States or Europe. In fact, this practice is present in Asia, Africa, and Latin America. The justifications behind it are similar to that used in Western countries: the reasons are mainly religious, domestic, and/or cultural.

Latin America is a region where very progressive legislation has been passed banning conversion therapy but where it is nonetheless widely practiced, with one of the highest rates of homophobic and transphobic violence in the world. In Brazil, Peru, or Paraguay, where conversion therapy has been banned, this legislation is constantly threatened by conservative activists who consider that LGBT+ people destroy the traditional ideal of family. While Brazil was one of the first countries to ban conversion therapy following the 1999 decision of the Federal Council of Psychology, in 2016, federal judge Waldemar de Carvalho lifted this ban as he ruled in favour of a Christian psychologist who had had his licence revoked for practicing this therapy. Although this decision was overturned in 2018, this comes to show the fragility of the laws aiming to protect minorities.

In contrast, in Asia, very little legislation has been adopted on the matter. In China, conversion therapy remains legal despite various groups such as “Queer comrades”, the Beijing LGBT+ Centre

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38 AFP, « Une députée LREM dépose une proposition de loi pour interdire les "thérapies de conversion" », June 3, 2020, France info, available at: https://www.francetvinfo.fr/societe/homophobie/une-deputee-lrem-depose-une-proposition-de-loi-pour-interdire-les-therapies-de-conversion_3993461.html
39 Ibid.
40 Report by OutRight international: « Harmful treatment. The global reach of so-called conversion therapy. », available at: https://outrightinternational.org/sites/default/files/ConversionFINAL_Web_0.pdf
41 Ibid.
42 Ibid.
and Human Rights Watch leading studies as to the nefarious effects of the practice or on the prohibition of discrimination, by health professionals, based on sexual orientation. In Indonesia, having recourse to exorcists is frequent, sessions are even held in certain hospitals in Jakarta. Furthermore, in May 2020, a group of conservative members of parliament tabled a proposal aiming at imposing conversion therapy for all transgender people. Due to the current sanitary context, this proposal has not yet been addressed.

*The United Nations*

On the international stage, independent expert on sexual orientation and gender identity for the United Nations, Victor Madrigal-Borloz warned against the danger of conversion therapy and calls all states to ban the practice. The latter, in addition to highlighting the ineffectiveness of conversion therapy, describes this therapy as “intrinsically discriminatory, cruel, inhumane, and degrading; and depending on the severity of these practices, or on the physical and mental suffering or pain inflicted on the victims, conversion therapy can be assimilated to acts of torture”.

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43 Ibid.
44 Ibid.


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