

New Zealand Psychological Society

Rōpū Mātai Hinengaro o Aotearoa



Position Statement on “Conversion Therapy”

Summary

The New Zealand Psychological Society opposes the use of so-called ‘reparative’ or ‘conversion’ therapies. These so-called therapies include any psychological approach or intervention that seeks to convert, repress and/or eliminate any person’s same-sex or non-heterosexual orientation, attractions, desires, identities and behaviours, or any person’s gender identity or gender expression that does not meet expectations based on their sex assigned at birth. The Society considers these so-called therapeutic practices unethical and contrary to the interests, wellbeing and safety of takatāpui and LGBTQI+ peopleⁱ. In opposing these practices, we join with many other professional bodies including the New Zealand Psychologists Board, Australian Psychological Society, Psychotherapy and Counselling Federation of Australia, The Royal Australian and New Zealand College of Psychiatrists, New Zealand Association of Counsellors, British Psychological Society and the American Psychological Association. We are also a signatory to the international IPsyNet Statement on LGBTQI+ concerns - <https://www.apa.org/ipsynet/advocacy/policy/statement-commitment>

Accordingly, the New Zealand Psychological Society requires that Psychologists in Aotearoa/New Zealand, must abstain from being involved in any ‘reparative’ or ‘conversion therapies’, and adhere to and be directed in their work with people with diverse genders, sexualities, and sex characteristics by the New Zealand Psychologists Board published best-practice guidelines *Working With Sex, Sexuality and Gender Diverse Clients* (2019) and the *Code of Ethics for Psychologists Working in Aotearoa/New Zealand* (2002).

Position Statement

1. Same-sex or non-heterosexual orientation, attractions, desires, identities and behaviours, non-cisgenderⁱ gender identities and expressions, and diverse sex characteristics are normal and healthy variations of human functioning, relationships and bodies; these are not psychological illnesses, syndromes, or disorders (American Psychological Association, 1975; Coleman et al., 2011; New Zealand Psychologists Board, 2019), and therefore they do not require therapeutic interventions to change them.
2. There is no research-based evidence to suggest that so-called ‘reparative’ or ‘conversion therapies and interventions’ are effective or successful. To the contrary, there is research-based

evidence to suggest that such so called 'reparative' and 'conversion therapies' can be and are frequently harmful, distressing and indeed dangerous (Cheers et al., 2020; Fish & Russell, 2020; Green et al, 2020; Turban et al, 2020)

3. People with diverse genders, sexualities and sex characteristics are particularly vulnerable, due to experiences of minority stressⁱⁱⁱ and might be under considerable influence to comply with the normative expectations of others. The presence of minority stress is often misconstrued by advocates and supporters of so-called 'conversion therapies' to be part of the psychopathology inherent to diverse genders and sexual orientations and unethically used as a motivation to practice 'conversion therapy' (Mental Health Foundation NZ, 2018; Rosik, 2001).
4. Psychologists in Aotearoa New Zealand are subject to and must operate within their Code of Ethics. The NZ Psychological Society argues that registered psychologists who are involved with the production, offering, delivery, or support of so-called 'reparative' or 'conversion therapies and interventions' are doing so in violation of the NZ Psychologists Code of Ethics.
5. For best practice guidelines, psychologists in Aotearoa/New Zealand should refer to The New Zealand Psychologists Board Best Practice Guidelines *Working With Sex, Sexuality and Gender Diverse clients*, published in 2019. This is available on their [website](#).

References

- American Psychological Association (1975). Policy statement on discrimination against homosexuals. *American Psychologist*, 30, 633
- Coleman, E., Bockting, W. O., Botzer, M., Cohen-Kettenis, P. T., DeCuypere, G., Feldman, J., Fraser, L., Green, J., Knudson, G., Meyer, W. J., Monstrey, S., Adler, R. K., Brown, G. R., Devor, A. H., Ehrbar, R., Ettner, R., Eyler, E., Garofalo, R., Karasic, D. H., ... Zucker, K. (2012). Standards of care for the health of transsexual, transgender, and gender-nonconforming people, version 7. *International Journal of Transgenderism*, 13(4), 165–232. <https://doi.org/10.1080/15532739.2011.700873>
- Cheers, H., Rickman, M., Campbell, E.M., & Ewings, S.J. (2020). Proposal of alternative solutions to address children's rights violation: Conversion therapy. *Social Work & Policy Studies: Social Justice, Practice and Theory*, 2(2). <https://openjournals.library.sydney.edu.au/index.php/SWPS/article/view/14075>
- Fish, J. N., & Russell, S. T. (2020). Sexual orientation and gender identity change efforts are unethical and harmful. *American Journal of Public Health*, 110(8), 1113–1114.
- Green, A. E., Price-Feeney, M., Dorison, S. H., & Pick, C. J. (2020). Self-Reported Conversion Efforts and Suicidality Among US LGBTQ Youths and Young Adults, 2018. *American Journal of Public Health*, 110(8), 1221–1227.
- Mental Health Foundation New Zealand (2018) *Rainbow communities, mental health and addictions – a submission to the Government Inquiry into Mental Health and Addiction – Oranga Tāngata, Oranga Whānau* <https://www.mentalhealth.org.nz/assets/Our-Work/policy-advocacy/Rainbow-communities-and-mental-health-submission-to-the-inquiry-into-mental-health-and-addiction-08062018.pdf>

New Zealand Psychological Society (2002). *Code of ethics for psychologists working in Aotearoa/New Zealand*. New Zealand Psychological Society.

New Zealand Psychologists Board. (2019). *Best practice guideline: Working with sex, sexuality, and gender diverse clients*. http://www.psychologistsboard.org.nz/cms_show_download.php?id=594

Rosik, C. H. (2001). Conversion Therapy Revisited: Parameters and Rationale for Ethical Care. *Journal of Pastoral Care*, 55(1), 47–67. <https://doi.org/10.1177/002234090105500107>

Turban, J. L., Beckwith, N., Reisner, S. L., & Keuroghlian, A. S. (2020). Association between recalled exposure to gender identity conversion efforts and psychological distress and suicide attempts among transgender adults. *JAMA Psychiatry*, 77(1), 68–76. <https://doi.org/10.1001/jamapsychiatry.2019.2285>

ⁱ **Takatāpui:** Takatāpui refers to Māori who are not heterosexual and/or not cisgender. It is used both as a gender identity (similar to transgender), as an attraction or sexual orientation (similar to lesbian, gay, bi or pansexual). It is also used as an umbrella term for all non-heterosexual and/or non-cisgender Māori people (similar to rainbow community). Note that not all Māori who are not heterosexual and/or non-cisgender will identify with the term Takatāpui. (Trans 101: Glossary of trans words and how to use them, Gender Minorities Aotearoa, Wellington New Zealand, 2020, <https://genderminorities.com/database/glossary-transgender/>)

LGBTQI+: Lesbian, Gay, Bisexual, Transgender, Queer or Questioning, Intersex, + other non-heterosexual and/or non-cisgender people. Often used as an umbrella term.

ⁱⁱ **Cisgender:** Cisgender (cis) is a term for people whose gender is the same as their assigned sex at birth.

ⁱⁱⁱ “Minority stress refers to the stress associated with being marginalised, discriminated against, or having different cultural and/or social frameworks to the majority of the population.” NZ Psychologists Board (2019) Best Practice Guidelines on Working with sex, sexuality and gender diverse clients, 7