

## 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<sup>i</sup>. The Society considers these so-called therapeutic practices unethical and contrary to the interests, wellbeing and safety of those individuals. In opposing these therapies we join with many other professional bodies including the 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 diverse sexuality by the New Zealand Psychology Board published best-practice guidelines "*Working with sex, sexuality and gender diverse clients*" published in 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 are not in themselves psychological illnesses, syndromes, or disorders (APA, 1975), and therefore 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)
3. Individuals experiencing same-sex or non-heterosexual orientation, attractions, desires, identities and behaviours are particularly vulnerable, due to experiences of minority stress<sup>ii</sup> 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 sexual orientations and unethically used as a motivation to practice 'conversion therapy'.
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

New Zealand Psychological Society (2002). Code of Ethics for Psychologists working in Aotearoa/New Zealand. New Zealand Psychological Society.

Cheers, H., Rickman, M., Campbell, E.M., & Ewings, S.J. (2020). Proposal of alternative solutions to address children’s rights violation: Conversion therapy.

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.

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<sup>i</sup> Please note that this position statement follows international recommendations in not naming specific sexual orientation identities

<sup>ii</sup> “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