



A REFERENCE GUIDE

Supporting survivors of LGBTQA+ Conversion Ideology and Practices

Table of Contents

This publication has been written by a team of researchers and survivors of conversion practices from an Australian conversion ideology and practices research project led by university and community collaborators. It is for mental health professionals, including counsellors and phone counsellors, who may encounter survivors of conversion practices in their work.

This document is authored by:

- Nathan Despott (Brave Network, SOGICE Survivors, La Trobe University)
- Joel Anderson (La Trobe University, Australian Catholic University)
- Jennifer Power (La Trobe University)
- Tiffany Jones (Macquarie University)
- Maria Pallotta-Chiarolli (Australian GLBTIQ Multicultural Council, Deakin University)
- Percy Gurtler (Brave Network, La Trobe University)
- Timothy W. Jones (La Trobe University)

1

Introduction and overview

2

Figures on prevalence

3

Presentation of survivors

4

Impacts on wellbeing

5

Before offering support

6

Offering support

7

Further Resources

1 Introduction

What is conversion ideology?

LGBTQA+ conversion practices are underpinned by a set of beliefs that survivor advocates and researchers call conversion ideology. People who internalise this ideology are often driven, by themselves or others, to participate in conversion practices.

- Conversion ideology makes claims about what 'causes people to become' LGBTQA+ and why and how they should change or suppress their LGBTQA+ identity(s). It also claims that LGBTQA+ individuals live or exist in a way that is incompatible with expectations of their cultural or religious communities.
- It is also grounded in the idea that people can – and should – either change (eg. become straight or cisgender) or suppress (eg. live in celibacy, deny their true gender) their same-sex attraction or gender identity.
- Conversion ideology is almost always comprised of religious or cultural ideas blended with pseudoscientific concepts drawn from outdated psychological models.
- The most common expression of conversion ideology is in religious language and contexts, claiming that LGBTQA+ people are somehow 'broken' in their sexuality or gender identity. The motivation to address this 'brokenness' can be based in a profound desire to be acceptable to God, gods, or religious tradition, and/or the notion that being cisgender and heterosexual is the originally 'intended', healthy, natural state for humans.
- Involvement in conversion practices can also be motivated by the desire to be acceptable to one's family, culture, or religious community. It is worth highlighting that within any one religion, and even within any one group of religious people, there will be differences in how prevalent these beliefs are, how strongly they are endorsed, and the degree to which people talk openly about them.

- Religious conversion ideology can be present in formal religious settings, such as churches, synagogues, and mosques, and also in faith-based organisations, such as hospitals and schools that are affiliated with a religion, and in the homes of religious families.
- Conversion ideology can also manifest in healthcare contexts through the often-undisclosed views of mental health practitioners or doctors who may steer LGBTQA+ patients or clients, particularly transgender or ace people, away from affirmation, self-acceptance of their identity(s), or gender transition. The extent to which religious motivations drive such practitioners' behaviour varies across contexts and cultures.

See the SOGICE Survivor Statement for more: www.sogicesurvivors.com.au

What are conversion practices?

Conversion practices are activities or techniques that are used with the aim of suppressing or changing the sexual or gender diverse identities of LGBTQA+ people.

- In the past, conversion practices were sometimes referred to as 'ex-gay' practices or conversion therapy.
- Conversion practices are often viewed through the lens of formal conversion programs. These can include one-to-one therapy, support groups, conversion camps, or counselling. Formal conversion practices have become less acceptable and are increasingly rare, particularly as they contravene many professional and consumer codes of practices.
- Most conversion practices occur in informal settings, such as pastoral care, interactions with religious or community leaders, prayer groups, support groups convened by faith communities, and other spiritual or cultural practices initiated within particular communities.

- Therapists or pastoral care workers who incorporate conversion ideology into their activities are usually aware of the general lack of acceptance of conversion practices in the wider community and may conceal their motivations and intentions – even from the participant themselves.
- Some formal conversion practices encourage LGBTQA+ people to participate in traditionally gender normative activities, for example, fashion and makeup activities for women and camping or sporting activities for men, in an effort to ‘re-align’ individuals to a heterosexual and/or cisgender identity.
- Conversion practices are often religious (including prayer, beliefs about sexual and gender minority being sinful, etc.). However, there are non-religious conversion practices and ideologies, including those that occur with secular health care providers (e.g., counsellors, psychologists, medical practitioners). These are particularly risky for transgender and asexual people, for whom conversion ideology can be mixed with medical information.

4%

of LGBTQA+ Australians under 25 have attended counselling, group work, interventions or programs aimed at changing or suppressing their sexuality or gender identity

2 How prevalent are these practices?

Religious communities: Conservative religious communities are known to have a range of responses when sexual or gender minority identities are discovered or disclosed by members of their community. These range from complete acceptance, to silence, or to complete rejection. Enforced celibacy and conversion practices are common. Conversion ideology can be found in many conservative Australian religious communities and schools. Informal conversion practices are more likely to have occurred in recent times than formal conversion practices, although both have extremely recent (and ongoing) histories in Australia.

Formal practices: Currently, a handful of formal programs still openly operate in Australia. Overseas organisations with online forums and programs are easily accessible by people in Australia. ‘Formal practices’ also include less common instances of practices delivered in psychology or paid counselling settings.

- **Conversion resources:** Many Australian religious bookstores sell material promoting conversion ideology. Resources are easily accessible from overseas, either accessed electronically, or purchased and shipped to Australia.
- **Political support:** Some conservative organisations and bodies invest significant resources in promoting conversion ideology to educators and young people. Some groups have also invested in political lobbying and have significant influence. Preventing LGBTQA+ rights has openly been a key objective of such groups' activities.

6,142 LGBTQA+ Australians under the age of 25 were surveyed in 2019. Of these, 249 reported that they had participated in programs or interventions aimed at changing their sexuality or gender identity.

3 How do survivors of conversion practices present?

There is no 'typical' way in which survivors of conversion practices present. However, it is common for them to have spent many years trying to 'heal' or 'fix' their sexuality or gender identity. They may have experienced trauma as a result of being exposed to conversion ideology or engaging in conversion practices.

- Central to the conversion movement is the idea that sexual or gender minority identities are caused by childhood trauma, abuse or neglect which needs to be 'healed' or 'cured'. Individuals may spend time trying to connect their same-sex attraction to specific early life problems. Such connections are often false and lead to significant distress.
- Sometimes people with sexual or gender minority identities come to believe that their identities are the result of something they have done wrong. Individuals may spend time 'soul-searching' for their wrong-doing or repenting in the hope that this will 'heal' or 'cure' them.
- Those who seek a genuine change of their sexual or gender identity are often told they will become heterosexual or cisgender over time, though lingering feelings may continue to be experienced. These individuals will often present with feelings of guilt, shame, failure, and trauma.
- The conversion movement often confuses being bisexual with being gay or lesbian. The movement can also confuse aspects of gender identity, gender expression, and sexual orientation. Labels, such as those used in the LGBTQA+ community, may prove to be misunderstood by conversion participants.

Transgender and gender diverse individuals are at greater risk of conversion practice exposure than cisgender LGB people.

Individuals from Multicultural and Multifaith backgrounds are more likely to experience conversion practices than White or English speaking individuals.

Bisexual and pansexual people are more likely to have attempted to change or suppress their sexuality than gay men and lesbian women.

Asexual and transgender people often experience conversion practices in secular healthcare settings.

In summary, LGBTQA+ individuals typically internalise a complex set of ideas about their sexuality or gender identity, its causes, and its place in their lives. Some conversion practice participants may expose themselves to lengthy (or costly) prayer sessions, pastoral care programs, group therapy or spiritual rituals.

Conversion ideology in healthcare settings, as experienced by some trans people, can leave doubts about the 'causes' or 'origins' of their gender identity. This is also true for asexual people who can be left with doubts about the origins or causes of their levels of sexual attraction.

Conversion ideology and practices in close-knit cultural groups may result in deep turmoil about a person's cultural identity and family belonging, including the shaming of their families and others within their community. It can also pose additional challenges for individuals wanting to 'come out' in these spaces. Finally, it is worth noting that 'coming out' is not not always important or desired by people from certain cultures, and they can often experience pressure from therapists to come out.

4 Impacts on wellbeing

What are the main areas of risk and concern?

<p>Failure to seek help</p>	<p>Conversion ideology promotes the idea that being LGBTQA+ is typically a manifestation of underlying damage in a person's life, sometimes referred to as 'brokenness'. Such messages feed into internalised negative feelings about one's sexuality or gender (including guilt and shame) and may result in secrecy about these identities. This secrecy may result in sexual and gender diverse individuals failing to seek medical and psychological help when it is needed.</p>
<p>Internalised prejudices</p>	<p>Conversion survivors have usually experienced bullying and are likely to have internalised their experiences of prejudice (e.g., internalised homophobia/biphobia/transphobia), much of which may never have been disclosed .</p>
<p>Impacted mental health</p>	<p>LGBTQA+ people experience increased levels of depression, anxiety and suicidality, which can be heavily compounded by conversion practices or ideology. Religious and cultural group leaders may have a poor awareness of mental health practice and may view mental health through a primarily spiritual lens, leading to spiritual abuse.</p>
<p>Sexual health</p>	<p>Conversion participants who experience 'lapses' in their commitment to conversion practices and become sexually active may not have an awareness of safer sex, and may not take care of their sexual health due to feelings of shame.</p>
<p>Long lasting Impacts</p>	<p>Australian research indicates that conversion survivors report the ongoing impacts of harm long after ceasing conversion practices, including impaired relationships, sexual dysfunction, poor self-concept, and complex trauma.</p>
<p>Conflict with religion or faith</p>	<p>LGBTQA+ people can experience conflict between sexuality or gender identity and their spirituality or spiritual belonging. People may have difficulty reconciling the two, especially if they are in a conservative community, and feel unable to leave that space because it is their primary support.</p>

5 What do I need to know before offering support to survivors of conversion practices?

There are many ways of expressing faith.

A diverse range of views exists within most religions and denominations. For example, within Christianity, there are differences in views between members and leaders from Roman Catholic, Anglican, Baptist and Uniting Church communities.

Many have varied positions on sexuality and gender diversity. There are faith communities that demonstrate full support for LGBTQA+ people and others that promote conversion ideology or practices while also banning LGBTQA+ people from leadership positions.

In some religious congregations there is now a majority of LGBTQA-affirming believers. People who have spent considerable time in non-affirming religious groups may not be aware of this. Other congregations might be 'welcoming but not affirming'.

Some conservative groups may be dismissive of progressive religious groups (and vice versa) and this may be reflected in the views of LGBTQA+ members of those faith communities.

Many religious groups, as well as most professional psychological organisations and psychology schools, have strongly asserted that being same-sex attracted, gender diverse or transgender is not a disorder, nor is it caused by abuse or trauma.

These same bodies have also strongly stated that conversion practices are harmful, and have released statements that oppose these practices.

There is no evidence that conversion practices are effective.

All credible research has revealed that these practices do not achieve their intended outcomes, and instead cause long-lasting harms.

In recent years, almost all major leaders of conversion or 'ex-gay' organisations have renounced the conversion movement. This has been widely documented in media, public statements, and documentaries.

Despite this, the conversion movement continues. While larger organisations have closed down or fragmented, conversion conferences and practices still take place across Australia, usually in clandestine ways.

This is evidenced by several conservative politicians and lobbyists arguing publicly for parents to have the right to subject their sexual or gender minority children to conversion practices, as well as a range of conferences (e.g., 'Liberty Ministries' in Sydney in 2020) and media representations in the lead up to the Victorian conversion practices legislative ban in February 2021.

6 Key considerations when offering support to survivors of conversion practices

It is likely that people who are participating in conversion practices will be struggling with their sense of self due to the difficulty of trying to understand or reconcile their faith, gender identity and sexuality. Though it will not be possible to address all of these struggles in one phone call, a helpful space for exploration can be established in the first conversation. While each person's story will hold similarities – particularly regarding the effects of conversion practices – each person's story and needs are also unique. We advise the following:

- 1 **Be affirming** – Introduce and foster the idea that LGBTQA+ people can be comfortable in their sexuality and/or gender and should feel free to celebrate their faith in an affirming environment. Provide information on how they can access support to help them continue this process. Remind them that there are many wonderful LGBTQA+ people of faith who have integrated both faith and sexuality.

Affirm that it is OK for the person to ask questions about their sexuality and gender identity.

- 2 **Understand that many people participating in conversion practices want to remain connected to their religion, faith, or cultural group** – Advising an LGBTQA+ person to leave behind the religious influences in their life may be akin to asking the person to leave behind support networks, family, long-term community, and the benefits of religious connection for the individual. This may further isolate the person if alternative, reliable support networks are not yet available to them. Unless the person is experiencing significant harm, offering such advice may prevent the person from seeking further external assistance.

Survivors may have a complex relationship with their religion or faith. They may be angry or frustrated – this is not the same as wanting to leave their religion or faith.

- 3 **Avoid criticism of religious and cultural groups** – An abrupt refutation of conversion ideology or criticism of people delivering conversion practices may be unhelpful in encouraging a conversion participant to question what they are experiencing. Many survivors who have experienced recovery say that their journey out of the conversion movement began with slowly questioning the beliefs they held about sexuality and gender. Many also began to experience poor mental health that they attributed to conversion practices, leading them to question conversion ideology and the broader conversion movement.

Suggest trying to meet other healthy and supportive LGBTQA+ people over time. Peer support through connecting with other survivors can also be of assistance.

- 4 **Be aware of specific needs for individuals of differing faiths or cultural backgrounds** – Specific considerations may be needed for individuals of multicultural or multifaith backgrounds. For instance, 'coming out' is not always a safe option, and should not be promoted as an important (or necessary) path for these individuals. Survivors of minority backgrounds may wish to find other sexually and gender diverse people of similar faith or cultural backgrounds to safely connect with for peer support.

Survivors may consider finding affirming individuals who they could selectively invite into their life – the process of 'coming in' rather than 'coming out'.



References

- Australian Psychological Society (2021). [Use of psychological practices that attempt to change or suppress a person's sexual orientation or gender: Position statement.](#)
- Csabs, C., Despott, N., Morel, B., Brodel, A., Johnson, R. (2020). [SOGICE Survivor Statement \(4th ed\).](#) Sydney and Melbourne: SOGICE Survivors, Brave Network, Equal Voices, & MGA Counselling.
- Hammoud-Beckett, S. (2022). [Intersectional Narrative Practice with Queer Muslim Clients.](#) *Journal of Intercultural Studies*, 43(1), 120-147.
- Jones, T.W., Jones, T.M, Power, J., Despott, N., & Pallotta-Chiarolli, M. (2021). [Healing Spiritual Harms: Supporting Recovery from LGBTQA+ Change and Suppression Practices.](#) Melbourne: *The Australian Research Centre in Sex, Health and Society, La Trobe University.*
- Jones, T., Powers, J., Hill, A. O., Despott, N., Carman, M., Jones, T. W., Anderson, J. R., & Bourne, A. (2021). [Religious Conversion Practices and LGBTQA+ Youth.](#) *Sexuality Research and Social Policy*, 1-10.
- Jones, T. W., Power, J., & Jones, T. M. (2022). [Religious trauma and moral injury from LGBTQA+ conversion practices.](#) *Social Science & Medicine*, 115040.
- Rosenkrantz, D.E., Rostosky, S.S., Riggle, E.D.B., & Cook, J.R. (2016). [The positive aspects of intersecting religious/spiritual and LGBTQ identities.](#) *Spirituality in Clinical Practice*, 3(2), 127-138.
- Power, J., Jones, T.W., Jones, T., Despott, N., Pallotta-Chiarolli, M. & Anderson, J. (2022). [Better understanding of the scope and nature of LGBTQA+ religious conversion practices will support recovery.](#) *Medical Journal of Australia.*
- Przeworski, A., Peterson, E., & Piedra, A. (2020). A systematic review of the efficacy, harmful effects, and ethical issues related to sexual orientation change efforts. *Clinical Psychology: Science and Practice*, e12377.
- United Nations (2012). [Born free and equal: Sexual orientation and gender identity in international human rights law.](#) Booklet published by the United Nations Human Rights Office of the High Commissioner.
- Venn-Brown, Anthony: Ambassadors and Bridge Builders International (ABBI) website. www.abbi.org.au.

Legislation

- [Health Legislation Amendment Act 2020 \(Qld\)](#)
- [Sexuality and Gender Identity Conversion Practices Act 2020 \(ACT\)](#)
- [Change or Suppression \(Conversion\) Practices Prohibition Act 2021 \(Vic\)](#)

Civil Response Scheme,
Victorian Equal Opportunity and Human Rights Commission (VEOHRC)
www.humanrights.vic.gov.au/change-or-suppression-practices



For more information, visit:
www.lgbtqareligiousexperiences.org.au

Acknowledgements

The content in this publication has been drawn from findings of a joint Conversion Ideology and Practices research project led by La Trobe University, Macquarie University, Australian GLBTIQ+ Multicultural Council (AGMC), and Brave Network.

The **Brave Network** is a Melbourne-based support and advocacy group for LGBTIQ+ people of faith and allies that hosts online meetings open to people across Australia and Aotearoa New Zealand. Brave specialises in working with survivors of conversion ideology and practices.

Email: bravenetworkmelbourne@gmail.com. Website www.thebravenetwork.org

The **Australian GLBTIQ Multicultural Council (AGMC)** is a national body that advocates for the rights of multicultural and multifaith LGBTIQ individuals and communities. If English is not your first language, you might choose to reach out to them to discuss how to find an interpreter and seek advice on how to set clear guidelines for them. Email: contact@agmc.org.au Website: www.agmc.org.au

This document was co-designed with representatives of SOGICE Survivors and researchers from La Trobe University, Macquarie University, AGMC, and Brave Network. It incorporates content from an earlier document produced in 2014 by Brave Network with support from JOY 94.9 and Beyond Blue.

To cite this document:

Despott, N., Anderson, J., Power, J., Jones, T., Pallotta-Chiarolli, M., Gurtler, P., & Jones, T.W. (2022). Supporting Survivors of LGBTQ+ Conversion Ideology and Practices: A reference guide. *La Trobe University*, Melbourne.

