

“Conversion therapies” around the world: a still unknown torture

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Abstract

“Conversion therapies”, or practices aimed at “curing” homosexuality or transidentity, emerged in the 19th century and have exploded since rigorous religious organizations took over the United States in the 1970s. Despite the obvious violations of human rights caused by these so-called “therapies”, they remain unknown to the public and the rare cultural and media representations made of them struggle to show the plurality of the conversion practices. Worse still, this phenomenon is ignored by most states, far too few of which legally prohibit them despite warnings from international organizations.



It was not until 1990 that the World Health Organization (WHO) finally removed homosexuality from the list of mental illnesses, and as late as 2019 for it to do the same with trans identity, under the term of “Gender incongruence”. However, practices still exist around the world aimed at changing sexual orientation (from homosexual to heterosexual), gender identity (from transgender to cisgender) or to inhibit any homosexual desire (forced abstinence): these are the “conversion therapies”.

It is believed that the first practices of “conversion” appeared at the end of the 19th century in the United States. This is indeed when doctors coined and psychiatricized the term “homosexuality” to define what they believe to be a brain disease. To treat it, these doctors try to cure the infected area of the brain using lobotomies, electroshocks, vomiting or even testosterone treatments.

In the 1970s, the North American Evangelical Church seized upon the phenomenon by offering the firsts “conversion therapies”. Several movements were born: “Exodus”, “Courage” or even “Desert Stream Living Waters”, using and diverting extracts from the Bible to justify their condemnation of homosexuality. Homosexuals are therefore considered guilty of sins, psychological and spiritual deviations, performing acts described as “against nature”. At the head of these organizations are often so-called “former homosexuals” claiming to have healed thanks to these “therapies” and to intense religious practice. These movements arrived in France in the 1990s and are now extended internationally as former members are encouraged to travel abroad to connect with local congregations and open new branches. “Therapies” are now mainly offered to parents distraught at the discovery of their child's homosexuality.

As they developed, these “therapies” intersected with various disciplines, relying on the principles of psychoanalysis. Halfway between religion and pseudo-psychology, they combine prayers and “therapies” and are offered by religious groups but also psychiatrists, psychotherapists, sexologists, coaches, counsellors, etc. The “therapies” are based on the idea that homosexuality is a choice and not a natural human behaviour, or that it is a pathology whose cause should be found (trauma, sexual abuse, absent parents...). Moreover, male homosexuality is often associated with paedophilia or perversion.

Surprisingly, “patients”, especially in France, are generally treated with compassion and those organizations claim to have disinterested motivations, wanting to defend the freedom of wanting to leave “the homosexual way of life” and lead to the “right path”, by making it possible to become a “real man” or a “real woman”, cleansed of all deviances. “Therapies” are in fact based on a confusion between gender expression and sexual orientation: male homosexuality thus comes from a failure to be a man and female homosexuality from a failure to be a woman, or a housewife.

Personal choice, lack of masculinity, illness caused by childhood's traumas, presence of the “demon of homosexuality”... The explanations given to homosexual people taking part in these “therapies” are multiple, as are the forms that practices can take. “Treatments” can thus include psychotherapy, discussion groups, healing masses, exercise sessions, archaic religious teachings on gender roles or lessons on the place of women, etc. Minors are thus sent to vacation camps dedicated to conversion, others are invited to regular meetings, adults participate in seminars etc.

There are also more aversive methods that aim, for example, to instill a rejection of one's sexual and romantic preferences by coupling a negative stimulus (electroshock, pain, nausea induced by drugs, etc.)

to homosexual content (pornographic images). In extreme cases, “patients” are injected with testosterone or are victims of exorcism. They are forced to stay locked up, fast and are sleep deprived to “weaken the demon”. In these situations, psychological or pseudo-scientific explanations are abandoned in favor of a mystical justification.

It is extremely complex to estimate the number of victims of these conversion practices, since most of them are carried out discreetly. However, it is considered that the religious organizations offering them are present in some 40 countries. A January 2018 UCLA Law Department investigation found that 698,000 LGBTQI + people aged 18 to 59 had undergone one or more conversion “therapy” in the United States, including 59,000 before coming of age. In France, 4.2% of calls on the telephone line of the Le Refuge association in 2019 concerned “conversion therapy”, or nine to ten calls per month, half of which concerned religious “therapy”.

It is clear that, far from being harmless, these conversion practices from another age still concern a large part of the homosexual community around the world today.

“Therapies” with disastrous psychological consequences

“Conversion therapies” are called “restorative therapies” by psychologists and religious practitioners who offer them, implying that there is something wrong, morally or in a pathological sense, with any non-heterosexual person, non-cisgender or non-conforming to gender stereotypes.

In the early years of the conversion “therapy”, “shock therapy” was used as well as lobotomies. Today, these self-proclaimed “therapists” are opting instead for psychological tactics and strongly insist on the use of shame as a primary weapon.

The many LGBTQI+ people who find themselves in the camps or the “therapies” are there out of shame or have been forced by their families. “Therapists” focus on and amplify their fears, shame, and self-hatred. One man, for example, testified that he was forced to bottle his own excrement and stare at it in order to forcibly associate the subconscious connotation of dirt with homosexual intercourse. Patients are also administered pills and drugs such as ketamine. This is aimed at the association of negative sentiment and “homosexual desire”; and if it persists, the “therapists” increase the dose. The latter associate the idea of being homosexual or transgender with a traumatic experience during the childhood of the patients or with the absence of a healthy parenting unit. Thus, they force the patients to do a form of introspection to try to find what could have led them to become a “sexual deviant”. This causes anxiety in patients, who are forced to invent trauma in their lives, which provoke flare-ups of anxiety and suicidal thoughts. “Therapists” hold onto these memories and feelings and use them against patients to humiliate and psychologically torture them in order to make them associate homosexuality with pain, suffering and shame.

To say that conversion “therapy” is abusive in the eyes of a survivor is an understatement - it is physical and psychological torture that can have lasting repercussions. One survivor testified to having violent outbursts of crying, panic attacks, and constant suicidal thoughts that resulted in self-harm. Survivors experience high levels of anxiety, which affects their future sex lives due to the damaging nature of drugs

and “aversion therapy”, which associates a painful feeling with a picture or idea. This makes it impossible for these people to lead fulfilling lives. Those “therapies” can go as far as beating a child or adult repeatedly while they recite verses from a holy text or prayers. For minors, this creates mistrust of authority figures and causes them to lose their self-esteem.

It can also be noted that the men who run these camps or conversion centers, especially in the United States, often claim to have struggled with their “homosexual desire” in their youth and then to have “got rid of” it. One would think that this is the result of years of self-hatred and feelings emasculated by the perpetuation of harmful stereotypes such as “gay men are too effeminate”. During “therapy” sessions, men are sometimes forced to engage in “locker room talk” which usually consists of talking about women in a degrading way, like mere sex objects. They can also be forced to get naked around each other to foster a sense of forced brotherhood, not sexual attraction. The tactics mentioned above, and many others are presented as ways to force them to be more masculine. In recent years, many of these so-called “healed” men running conversion camps and centers have actually come out as homosexuals. They sometimes even regret having given people something that they admit will never work and will only leave pain behind.

It should be noted, however, that in France, the majority of current “therapies” are presented in a benevolent manner, and most of the time take the form of support groups, confessional sessions, or even prayers and biblical readings. The goal seems to be to genuinely want to help the participants so that they are “relieved of the suffering” related to their orientation or their gender considered to be “deviant”.

Remember, however, that LGBTQI + youth are particularly prone to mental health issues. For example, surveys of non-heterosexual and non-cisgender American adolescents show that they are two to seven times more likely to attempt suicide. These alarming figures are particularly linked to homophobia, whether internalized or from others, but also to discrimination, stigmatization, harassment, violence etc.

According to a study by the American Psychological Association, having undergone “conversion therapy” increases the risk of suicide by five. It is therefore obvious that these practices, which foster family rejection and social stigma, worsen the already dramatic figures on the mental health of LGBTQI + youth.

Does religion really condemn homosexuality and trans identity?

We must necessarily distinguish between religious texts and religious institutions.

Female homosexuality and male homosexuality are never explicitly mentioned in the sacred texts of monotheisms. These are modern concepts. On the other hand, homosexual and pederasty practices from Ancient Greece are mentioned. The condemnation of homosexuality by the Church comes from the work of Augustine of Hippo, father of the Church who lived between the 4th and 5th centuries. His interpretation of Genesis chapter 19 relating to the incident between Lot, Abraham's nephew, with the men of Sodom is unequivocal, but the biblical episode is not so explicit. Explanations:

God sends two angels to see if the sin of the people of Sodom is “enormous”. They are welcomed and lodged with Lot. Here is the text in one of the possible translations:

“They [the angels] were not yet in bed when the men of the city, the men of Sodom, surrounded the house, from the boy to the old man, all the people gathered. And they cried out to Lot and said to him, “Where are the men that came into your house last night?” Bring them out to us so that we have relations with them”. (Genesis 19: 5)

In other translations, the last sentence ends with “so that we abuse them” or “so that we know them”. Remember that “to know” biblically means “to have sex”. In the original text, written in Hebrew, the term yada is used to refer to the request for a meeting addressed by the men of Sodom to the angels. It means knowing well, but also knowing someone or even getting to know God in several instances. Thus, it is not certain that the original text alludes to any desire for sexual intercourse, but this remains the largely majority interpretation.

Lot offered his two virgin daughters in exchange, but the locals refused. The angels, in order to protect Lot, brought them into the house and they “struck with blindness” the inhabitants (Genesis 19:11). Convinced of the crime of these latter eras, God then destroys Sodom and its neighboring city Gomorrah, by “brimstone and fire” (Genesis 19:24). For fear that they will no longer be able to have offspring (for lack of men), Lot's daughters will make their father drunk in order to become pregnant with him (see Genesis 19:31-38). They will father Moab for the eldest and Ben-Ammi for the younger.

The sin of the men of Sodom that we find in the Bible is then not anal penetration, but ritual rape and pedophilia (it would be better to speak today of pedocriminality). In the customs of Ancient Greece, this was considered normal or even rewarding. The pederasty system consisted of the education of young men by older citizens established in the city. This education was cultural but also sexual and ensured them a relative social rise. In the Bible, the sin of the inhabitants of Sodom is also associated with the refusal of hospitality.

Lot's sin is to give away his daughters. But what is the sin of Lot's people mentioned in the Quran? Recall that Islam was revealed in the 8th century AD. Augustine of Hippo's interpretation had been circulating for nearly four centuries in the Mediterranean basin.

In the Qur'an, Lot's role, written Lut, is slightly different since he is sent from God to condemn a particular sin. Let us quote verses 54 and 55 of surah naml 27: *“And Lot when he said to his people: are you indulging in turpitude when you know? Are you going to indulge your desires with men instead of women? But you are rather a nation of ignorant people”*.

The term “turpitude” is present in suras 7, 26, 27 and 29. It is directly associated with “[homosexuality]” in brackets only with sura 27 verse 54 in all the French translated Korans consulted for the writing of this article.

In the Sunnah, Ibn Abbas relates the words of the Prophet declaring *“cursed whoever practices the act of the people of Lot”* (Reported by Ahmed and authenticated by Sheikh Albani in Sahih Al Jami n ° 5891).

We have just pointed out that Lot's role in the Old Testament and in the Qur'an therefore diverges. The condemnation of homosexuality in Islam is that of the behavior of the “people of Lot”. It is therefore not

the behavior of the latter, but his people. This is where the two sacred texts diverge. Lot is not from Sodom by the way, he is the nephew of Abraham, himself a guide of the Jewish people of the Exodus. The men of Sodom around the house where he stayed even called him “the stranger” in the Bible. (Genesis 19:09) In the Qur'an, he announces the condemnation of sexual practices to his people. Not in the Bible. He welcomes the angels who must investigate Sodom so that God can condemn him afterwards. To which people then does Lot's character belong? The Jewish people as their uncle or the people of those who “indulge in this turpitude”? And who are his people? The episode of incest between Lot and his daughters is not recorded in the First Holy Book of Islam. But in the biblical account, we can even consider the two peoples he will hire through his daughters as his peoples: the Moabites, by the elder and the Ammonites, by the second.

There remains a theological ambiguity that we will be careful not to decide on, but simply to underline to invite the readership to keep in mind this uncertainty or even this mismatch between the Biblical and Quranic texts. All that remains is the interpretation of Doctors of Religion to try to provide an answer. In the Bible, we can understand this condemnation of homosexuality through the stories of Lot and the destruction of the cities of Sodom and Gomorrah as a desire by religious institutions to radically distinguish their doctrine from the mores and beliefs resulting from Roman and Greek polytheisms. (like pederasty).

What about the place of transidentity in Islamic texts and in the Muslim world?

In the ahâdîth and the Sunnah, non-binarity and trans-identities are in no way condemned: the term *zawj*, often translated as “wives”, is in fact not gendered. Moreover, the term *mukhannathun* seems to indicate a third gender identity. According to Imam An-Nawawi, a *mukhannath* is a man whose movements, appearance and manner of expression have feminine/female characteristics. He distinguishes two categories: the former naturally possess these characteristics and therefore cannot be blamed for this. They don't have to feel guilty, ashamed, unless they are using them to commit crimes or make money out of them (by prostituting themselves, for example). The latter would act like women for immoral reasons and would therefore be sinful and condemnable. The term *mukhannathun* is also used to designate a group of artists close to the Prophet, Tuways and Al-Dalal.

Fatwas have been issued in Egypt and Iran for people who fit the description of *mukhannath* to receive sex reassignment surgery. Fatwas are Islamic legal decisions rendered by an interpreter of Muslim law (*mufti*) on a societal issue, sometimes new. They must frame the good behavior of Muslims. In the Indian subcontinent, particularly in Pakistan and Bangladesh, a predominantly Muslim country built on this identity, the *hijras*, members of the transgender community, live and are officially recognized as a third gender.

If the condemnation of homosexuality is nonetheless a consensus among doctors of Islam, the Ulemas, its repression is not unanimous. There is no official legal text regarding a conviction that could be handed down for a homosexual person. In other words, it is often in reality a condemnation of homosexual practices, and not of the person's sexual orientation, that is advocated.

It is thus possible to be a Muslim and a homosexual. In Islam, only God can judge on Judgment Day. A person's sexual orientation is a matter of privacy, so they cannot be judged by other people. Homophobia is thus not tolerated in Islam.

The modern doctrine of the Church on homosexuality remains to be understood.

Conducted between 1975 and 2005, it revolves around a distinction between the sexual practices that are the responsibility of each one. We can cite the letter to the bishops of the Catholic Church on the pastoral care of homosexual persons (On the Pastoral Care of Homosexual Persons) of Cardinal Joseph Ratzinger, better known as Pope Benedict XVI, dating from 1986. The argumentation quotes extracts from the letters of the Pope Apostle to Romans 1: 18-32, in particular verses 26 and 27, particularly unambiguous: for unnatural relationships; likewise men, abandoning the natural use of women, have burned with desire for one another, perpetrating man-to-man infamy and receiving in their persons the inevitable reward for their error. “As well as the letters to Corinthians 6:9” Neither fornicator, [...] nor depraved, nor people of infamous morals, (or translated “homosexuals”, “the sodomites”) neither thieves nor greedy will inherit the Kingdom of God. “And to Timothy 1:1” A law is not directed against the righteous, but the lawless and rebellious, [...] debauched, sodomites, [...] and all that oppose the teaching of sound doctrine. Homosexual practices are described in this letter from the future Pope Benedict XVI, as “disordered sexual inclinations” but which these people are not to condemn or to damn. They are not defined by their sexuality and remain like any human being “the creation of God, and by his grace, his child and his heir in eternal life”. So it is the same for Catholicism.

These questions are still debated even within religious communities. Some people claim that religious texts condemn homosexual sex itself more than sexual orientation. The fact remains that homosexuality is not presented as a choice. “Conversion therapies” are therefore never considered as a possible solution by the various religious communities.

Insufficient international condemnation

In 2012, the World Health Organization (WHO) declared that the practice of “conversion therapy” threatens the health and rights of those affected. The United Nations (UN) will follow up by condemning in 2015 “conversion therapy” and other similar practices, even equating them to torture in a report from May 2020. The latter also reveals that the practice of “conversion therapy” would concern at least 68 countries in the world.

In the 2018 annual report on fundamental rights of the European Union, the European Parliament urges member states to ban these practices and to adopt “measures that respect and defend the right to gender identity and expression of the said gender”.

Finally, according to the Yogyakarta Principles, which regulate international law on sexual orientation and gender identity, states must prohibit any non consensual treatment based on sexual orientation, gender identity, expression gender or sexual characteristics, such as reassignment surgeries, forced sterilizations or even “conversion” or “reparative” therapy (tenth principle).

Furthermore, “conversion therapies” are widely frowned upon scientifically: science proves that sexual orientation cannot be forcibly changed, and that these practices may have devastating consequences.

Despite this global consensus on the ineffectiveness and harmfulness of “conversion therapy”, there is still a legal vacuum in the vast majority of countries around the world. Yet these practices violate a person's right to physical integrity, health, and the free expression of a person's sexual orientation and gender identity. This absence of legislation in Western countries therefore seems paradoxical given the criminalization of discrimination against LGBTQI + people but also violence against children.

The few countries condemning the conversion therapies

Even if the influence of the international community seems to be working, since parliamentary discussions on the subject are currently underway in several countries, including France, the countries which officially criminalize “conversion therapy” are extremely few. There are only five as of today: Brazil, Ecuador, Malta, Germany, and Albania.

It was Brazil that was the first country in 1999 to make the pathologizing of homosexual behavior and practices illegal, notably by ordering psychologists not to carry out coercive treatment on non-consenting homosexual persons. In May 2012, Ecuador banned them from rehabilitation clinics. However, in both countries the scope of the legislation is not broad enough; it only targets psychologists or clinics, which is only part of the various forms of “therapy” practiced.

It was not until 2016 that a European country banned conversion practices: Malta, which defined them in law as follows: “*treatment, practice, or sustained effort to change, repress and/or eliminate sexual orientation, gender and/or a person's gender expression*”. This broad and comprehensive approach makes it possible to encompass most conversion methods and thus prohibit a wide variety of practices.

Just a few months ago, in May 2020, Albania and Germany in turn made “conversion therapy” illegal for minors, an incomplete but encouraging ban.

Countries which encourage or finance the “therapies”

While China criminalized homosexuality in 1997 and removed it from the list of mental illnesses in 2001, many medical institutions in the country continue to offer “treatments” to cure homosexuality or transidentity. It would prescribe pills, hypnosis sessions or even electric shocks following any physiological reaction to the sight of homosexual pornographic images. In a report, the NGO Public Interest Law Center on Equal Rights for LGBTI reportedly identified 93 government-run and controlled public hospitals and private clinics licensed and supervised by the National Commission for Health and Family Planning. How is it possible ? It is a lucrative business favored by a legal arsenal that does not protect against discrimination and violence suffered because of sexual orientation or gender identity. Thus, victims can hardly seek justice after being traumatized by interventions recommended by their

parents. We can cite the lawsuit won by Peng Yanzi after being forced to undergo “electrotherapy” in 2014.

In Malaysia, homosexual practices are prohibited and qualified as “unnatural”, as is the disrespect for the gender expression assigned at birth, both in civil and religious terms (in Malaysia, the Shariah or Islamic law is applied) and both state and federal. In other words, if society recognizes you as a man while you are a transgender woman, wearing dresses, skirts, or other pageantry considered feminine can land you in jail.

The “conversion therapies” in Malaysia are carried out in Islamic or Christian medical centers. Launched in December 2018, the government program “Mukhayyam” is funded and supervised by the Islamic Development Department. Authorities say participation is on a voluntary basis and welcomed 1,450 “healings”. Newspapers are relaying these findings to encourage many would-be victims to enter these three-day programs held eight times a year. A 218-page e-book and manual have been published to bring people back on the “right path”.

The battle for heteronormativity and cisnormativity does not end there: on July 10, 2020, Malaysian Minister of Religious Affairs Zulkifli Mohamad Al-Bakri announced that he was giving full powers to the police in the repression of transgender people. A statement that the International Court of Justice condemned, denouncing his remarks, and calling for the immediate suspension of this discriminatory policy.

First progress in Europe

In Europe, the situation concerning the criminalisation of “conversion therapies” is highly heterogeneous. There is either slow progress or no progress at all. The only measures taken on the matter are recent.

In Europe, only 4 countries out of 50 juridically banned “conversion therapies” in order to criminalize them.

In 2016, Malta became the first European country to banish “conversion therapies”. One of the most thrilling aspects of the Maltese law¹ is that it bans the practice of “conversion therapies” by medical professionals and non-professionals, a detail that was never explicitly notified before.

On a worldwide scale, the Maltese law is one the most complete law ever promulgated, and the very first national law specifically thought, written and approved with a global approach to ban and prevent those practices. The definition of “conversion therapies” given in the Maltese Law reflects its wide field of application. Even the expression of disapprobation or an attempt of “therapy” can be automatically followed by suing.

The second country to make progress in this matter is Spain. There still no national ban, yet multiple regions and autonomous communities adopted laws to protect the LGBTIQ+ community, involving

¹ The Maltese law defines the conversion “therapies” as “any treatments, practices or efforts which aim at changing, suppressing or eliminating one's sexual orientation, gender identity, or public expression of gender identity”.

specific measures about “conversion therapies.” In October 2019, Madrid, Murcia, Andalusia, Aragon, and Valencia promulgated local bans. Those bans are very complete for they apply to any intervention aiming to modify the gender identity, gender expression or sexual orientation of a person, either executed by “qualified” staff or not. At the end of 2019, it was announced that a draft bill which would ban “conversion therapies” at a national level would be presented in 2020.

Very recently on May the 7th of 2020, Germany voted a law prohibiting “conversion therapies”, but protecting only underage people of less 18 years of age. This measure was in place since 2018, following a declaration of German Health Minister Jens Spahn against “conversion therapies”. A Commission made up of associations and medical, psychological experts and law and social sciences professionals had then been created in April 2019. A scientific inventory about the prohibition of “conversion therapies” was published on August the 30th of 2019 in the form of a final report. On May the 16th of 2020, just a few days after the German government adopted this law, Albania followed the same path and decided to ban “conversion therapies”. However, those two laws have their own limits and have been contested because they do not prohibit “conversion therapies” for individuals over the age of majority.

Progress in other European countries, giving hopes of future bill drafts.

In Ireland for example, a bill draft of 2018 which received positive answers would ban “conversion therapies” with a wide field of application and would also ban their advertising. It would be illegal for medical professionals to recommend to a LGBTQI+ individual another professional who practices “conversion therapies”. However, nothing has been voted yet and therefore “conversion therapies” are still legal in Ireland.

Regarding the situation in Poland, “conversion therapies” are not criminalised yet but the matter was discussed at the Parliament at the beginning of 2019. The draft bill written by Nowoczesna (a liberal political party), and the Campaign against Homophobia would ban the exercise, promotion and advertising of “conversion therapies” and the advising of those to individuals. The process however might take quite some time as Poland is a very conservative country and very discriminatory toward LGBTQI+ people.

In the Netherlands, a medical professional proposing “conversion therapies” can not obtain subventions and is even blocked by Health insurance since June 2012. In May 2019, the government was asked to write a draft bill prohibiting “conversion therapies”, and to study their forms and prevalence in order to end them.

In France, those “therapies” are still not convicted and the principal associations which still implement them are: “Torrents de vie” (evangelical protestants) which aim to turn homosexual individuals into heterosexuals, and “Courage” (catholic) who wants to make homosexuals celibate. However, their speech is less direct than those in the USA: they do not explicitly say that homosexuality is a disease, but they consider that it simply does not exist, everybody is heterosexual and homosexuality results of deviance turning people. This speech has been smoothed to be more politically correct and that is why it is hard to identify organisations practicing “conversion therapies” today.

Even so, progress was made on June the 3rd of 2020: a draft bill aiming to the prohibition of “conversion therapies” was expressed by a Deputy of the majority, Laurence Vanceunebrock. Those violent practices will be punished according to the duration of the total inability to work (ITT in French) of the victim:

Until 8 days of ITT, the maximum penalty would be 2 years of incarceration and a fine of 30 000 euros. Exceeding this limit or if committed in the presence of a minor, the maximum penalty would be of 3 years of incarceration and a fine of 45 000 euros. The draft bill fights those practices on the penal field with aggravating circumstances for underage victims, but also on the civil (Family right) and cultural field. For example: when parents are involved in those practices, which happens most of the time, withdrawal of parental authority would be conceivable. The perpetrators of “medical therapies” would be condemned in criminal court, their equipment would be confiscated and an interdiction to practice for 10 years would be conceivable. This bill draft is still discussed and must pass in front of all jurisdictional and legislative administrations before getting the chance to be officially presented and voted. In addition, this topic is not well-known but still triggers some communities: some religious authorities have refused to be auditioned at the national Assembly. This matter is also a cultural battle in which the Ministry of National Education has a role to play at every stage of the school life, students will have to learn the “respect of their sexual orientation, gender identity and gender expression”. Professors who are not trained to treat those questions will be encouraged to invite associations which fight against homophobia and transphobia.

For all the other European countries, this matter is not considered a priority and we notice no progress on the topic.

For example, in the Republic of Azerbaijan, homosexuality is legal but “conversion therapies” are not prohibited, there is no laws protecting LGBTQI+ individuals against discriminations and homosexual couples are not officially recognised as such. In Armenia, there is no mention of “conversion therapies” and LGBTQI+ individuals have little rights. In Estonia, homosexuality is decriminalised since 1991, but “conversion therapies” are not prohibited. In Norway, the Labour Party announced in June a Ten points plan about “LGBTQI+ rights”, including the interdiction of genital mutilations on intersex people and the prohibition of “conversion therapies”. The Parliament rejected that plan and the Labour party is opposing this decision even while being, on this topic, in minority against the government dominated by the conservative party.

Switzerland is a specific case not because of the Law, as no authority explicitly forbids “conversion therapies”, but they prevent professionals from expressing mental health diagnosis based only on sexual orientation. The Federal Council considers that this protection is enough (while it is not, because as we know “conversion therapies” do not only exist to change people’s sexual orientation but also sometimes gender identity or gender expression), and it is for this reason that Switzerland do not vote in favour or the interdiction of those practices. Yet, those “therapies” are recognised by the Swiss Parliament, since 2016, as contradictory to the Declaration of Rights of Children and are illegal for underage individuals.

In the United Kingdom, “conversion therapies” are still not illegal, but in 2017 a protocol was signed by the English and Scottish department of Health and other parties engaging themselves to end those practices. Furthermore, that same year, the Ministry of Health officially responded to a petition entitled “Make the offer of conversion therapies an infraction in the United Kingdom”. On July the 20th of 2020, the British Prime Minister Boris Johnson announced his support toward the interdiction of “conversion therapies” in the United Kingdom.

In Portugal, although “conversion therapies” are not yet prohibited, TVI diffused on January the 10th of 2019, a report of the journalist Ana Leal about “conversion therapies”. Four days later, 250 psychologists

addressed an open letter to the regulatory body POP (Portuguese Order of Psychologists), which delivers licences to psychologists, to demand an investigation about those practices. The organisation later affirmed that homosexuality is not a mental illness and that “conversion therapies” can not be justified. They reported the affair to the Jurisdictional counsel of the POP.

The exercise of “conversion therapies” is still authorised in Finland, Italy, Belgium, Romania, Greece, Luxembourg etc. Europe is still far from a total prohibition of those “conversion therapies”.

What About Africa?

Although Africa is rich from diverse cultures, transphobia and homophobia are still widely considered as the norm. In Africa, we notice less “conversion therapies” in a traditional sense but religion takes a great place in them. Religion pushed people to seek the help of priests or pastors for exorcisms, in order to repress any sexuality or gender identity which do not conform to the hetero-cisnormative social norm, imposed by religions such as Christianity. The Christian faith had led to a form of “spiritual war” against the LGBTQI+ community which is already oppressed on the continent. Some pastors and their disciples believe that LGBTQI+ people are possessed by evil spirits and that if we suppress those spirits, they will be free from any sort of spiritual servitude that maintained them captive. Whether it is about financial debts, family problems or else, any trouble will be considered the result of the evil spirits possessing them. Pastors then use unction oil et prey, sometimes for 30 minutes. The person we pray for is then supposed to convulse, a sign that the demon tries to keep the body captive while the pastor tries to force it out. People may feel pressured to say they have been “liberated”, but they often feel like nothing has changed. The religious practice of exorcism perpetrates the harmful stereotype according to which being homosexual, bisexual or transgender is caused by demonic possession, transmitted through generations, in centre of the same political sphere.

In South Africa, a country named “the rape capital of the world”, a homophobic practice is often perpetrated: “corrective rape”. Hastings omen’s Law Journal defines this practice as such: “corrective rape refers initially to a rape perpetrated by heterosexual men against lesbians with the aim of “correcting” or “curing” their homosexuality” – a punishment for being homosexual and having violated the traditional representation of gender. The term is now also used in a more general meaning to define the rape of any member of a group considered not conform to the norms of gender or heterosexuality, when the motive of the rapist is to “correct” the victim. The problem of corrective rape is that it's a result of rape culture, and an oppressive misogynistic mentality that allows men to believe they have control over women’s bodies. In South Africa, although same sex marriage is legal, still exists an important religious community which rooted the idea that being homosexual is a pathological disease. If we pair up rape culture, coming from a sort of misogyny, and lesbophobia, very present inside South African communities, especially protestant ones, we then face men who feel the need to punish those who do not feel any sexual or emotional attraction toward the opposite sex. All of this allows corrective rape to perdure. Corrective rape could then be considered as a form of “conversion therapy” in South Africa.

The representation of “conversion therapies” in cultural oeuvres

A consequent number of cultural oeuvres speak of and explain the phenomenon of “conversion therapies” to the public, whether they are movies, series, documentary, videos, podcasts, books, etc. Yet, when we look at the cultural industry and its productions in general, it is still rare to see this topic treated. Indeed, even in the recommendation list of cultural oeuvres (that you can find on our website) about this topic, some movies and documentaries do not have “conversion therapies” as the main topic.

Little oeuvres finally choose to treat this subject and when they do it is often a representation of “conversion therapies” in the United States. In the collective unconscious, this phenomenon only exists in this country, when it is in reality a widely spread one, with different degrees of violence. There is also in cultural representation the omnipresence of Christianity as an oppressive religious community when it is not the only one. It is also, most of the time, a representation existing around the 1990’s or at the beginning of the 2000’s. It has for effect to insinuate a reduction of “conversion therapies” in today’s world, which is entirely false. Furthermore, in cultural oeuvres treating the topic of “conversion therapies”, we notice an obvious lack of representation for lesbians, transgender individuals et all the other identities of the LGBTQI+ community. Most of the time, in movies for example, are portrayed only white cisgender homosexual men and their relationship with their homosexuality and “conversion therapies”. It is the case for approximately 70% of the movies listed in our recommendation in the article you can access here.

Conclusion

If the questions of sexual orientation, gender identity and gender expression are now widely known and discussed especially among the youth, the topic of “conversion therapies” still isn’t. They reflect archaic conceptions, in the occidental world especially, where states paradoxically recognise rights and protection for homosexual and transgender individuals. Sadly, we still forget that those practises exist today and that their formal prohibition must be the next step to protect potential victims. It is a demand from international organisations, NGO defending human rights or LGBTQI+ rights, that help be provided to numerous brave testimonies of those who were victims of those traumatising treatments. However, a jurisdictional prohibition would not necessarily end “conversion therapies” which might continue to exist clandestinely. A condemnation of religious authorities on this topic might be beneficial as “conversion therapies” are supported almost only by religious arguments. But this seems unthinkable today as shows the polemic of August 2018 provoked by Pope François’s speech, who recommended psychiatry as a solution against “homosexual penchants” toward children. Finally, a better representation of those practices in cultural oeuvres denouncing them could also open a dialogue in families and discourage parents from sending their children in those “conversion therapies”. We still have a long way to go before being able to all live and love freely.

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