

8 September 2021

Committee Secretariat

Justice Committee

Parliament Buildings

Wellington

Dear Committee Secretariat,

**Re: The Justice Committee's Conversion Practices Prohibition Legislation Bill**

Submission from:

New Zealand Association of Child and Adolescent Psychotherapists

For correspondence regarding this submission please contact

Joanne Bruce, Executive Officer of NZACAP

Email: [jo\\_bruce@hotmail.com](mailto:jo_bruce@hotmail.com)

We note this submission has been written by NZACAP Executive and formal membership feedback was not gained due to time constraints.

# Introduction to New Zealand Association of Child and Adolescent Psychotherapists

The New Zealand Association of Child and Adolescent Psychotherapists (NZACAP) is a non-profit national organisation that promotes and upholds professional and ethical standards of practice for child psychotherapists in Aotearoa New Zealand.

NZACAP has its beginnings in Dunedin in 1975 when a small group of practitioners, working in child mental health, saw a need for collegiate support. At that stage the profession was in its infancy but from the beginning the aims were clear, to provide psychotherapy for children by clinicians who were specifically trained to work with children and to do what was necessary to support that training.

NZACAP's primary aim is to foster and advance of the theory and practice of child and adolescent psychotherapy. Our emphasis is on the application of psychoanalytic, psychodynamic and system theory alongside developmental principles in diagnosis and treatment. As an association we also provide a forum and collegial support for our members<sup>1</sup> to promote and maintain professional standards of practice and to uphold and enforce honourable and proper practice.

We are also actively involved in promoting an appropriate standard of training adopting as a basis the national training course for child and adolescent psychotherapists whilst retaining the right to recognise as suitable or to reject as unsuitable any other training course.

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<sup>1</sup>We note that a Child and Adolescent Psychotherapist must be registered with the Psychotherapy Board of Aotearoa New Zealand (PBANZ) and is eligible to be registered under the Child and Adolescent Specialism.

## Position Statement on the Proposed Legislation

Child psychotherapists, who register with the Psychotherapy Board of Aotearoa New Zealand (PBANZ), must follow a strict code of ethics including “a sensitivity to diversity and cannot discriminate on the grounds of colour, creed, ethnicity, gender, sexual orientation, age, disability, social class, religion or political belief” (PBANZ, 2019).

NZACAP’s position is to support the current conversion prohibition legislation that is before the select committee for these reasons:

1. Adolescents, in particular, are in a moratorium of identity, emotional, social and sexual development between the ages of 13-18 years. Their psychological tasks are to explore, practice and understand social and emotional boundaries. Parents and clinicians who work with young people know that this is the age of exploration, taking risks, trying things out, and making mistakes; sometimes more than once. This can only be done effectively if it is in the context of significant and helpful attachment figures such as parents/caregivers/teachers willing to be supportive of this process for young people.

NZACAP advocates these adults, be curious with young people in this developmental stage around their sexual orientation, gender identity or gender expression. This enables adults to remain in positive relationships with their children while being able to guide and inform their choices. Conversion practices do not support the stance child psychotherapists would recommend for parents/carers. In fact, it likely threatens the attachment relationship for young people and the development of their unique and individual identities separate from their parents.

2. Our members, child and adolescent psychotherapists from across the country, have anecdotal evidence that young people who identify as lesbian, gay, bisexual, transexual, queer or questioning, and intersex (LGBTQI) are overrepresented in mental health services due to the lack of social supports, stigmatisation and social

isolation. It is already a difficult time for young people and conversion practices add to the message that these young people are “wrong”, “bad” or “broken” in some way and need changing. NZACAP’s stance is to celebrate a young person’s unique expression of who they are.

3. 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).
4. We highlight to this committee that the proposed legislation aligns with following Articles of the United Nations Convention on the Rights of the Child (The United Nations, 1989):
  - a. ARTICLE 2 - Non-discrimination  
All rights apply to all children without exception. It is the State’s obligation to protect children from any form of discrimination and to take positive action to promote their rights.
  - b. ARTICLE 3 - Adequate care  
Parents, organisations and state parties should always have the best interests of the child as a primary consideration.
  - c. ARTICLE 19 - Freedom from abuse  
The State shall protect the child from all forms of maltreatment by parents or others responsible for the child’s care and shall establish appropriate social programmes for the prevention of abuse and the treatment of victims.

The New Zealand Parliament has ratified this convention and must take reasonable steps to ensure the rights of ALL children and young people are upheld.

## Specific Recommendation to the Proposed Legislations

The following are specific recommendations related to the proposed legislation:

5. Overall, NZACAP supports the objectives and intent of the proposed legislation - which are to affirm the dignity, prevent the harm and uphold the human rights, the rights of the child, and of people with diverse sexual orientations or gender identities and expressions.
6. We note that people with variations in sex characteristics are excluded entirely from the explanatory note and the Bill. We advocate for this legislation to adopt acronym SOGIESC when we refer to all people whose sexual orientation (SO), gender identity and expression (GIE), and sex characteristics (SC) do not fit dominant social-cultural norms.
7. We suggest expanding the definition of Conversion Practice in section (5)(1) to include exposing or showing online or written material that promotes conversion practices to young people.
8. We suggest that for health practitioners to be allowed to continue practising conversion practices under this section (5)(2)(a) adequate New Zealand based research needs to be undertaken to ensure all professional registration bodies have clearly identified Takatāpui <sup>2</sup> and SOGIESC practice guidelines.
9. NZACAP supports the protection of under 18 year olds and vulnerable adults in this legislation. It is important for Aotearoa New Zealand to be a place where Takatāpui and SOGIESC youth are safe, supported and celebrated. We also advocate for conversion practices to be banned for any age group.

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<sup>2</sup> Takatāpui refers to Māori whose sexual orientation, gender identity and expression, and sex characteristics do not fit the colonial dominant norm.

10. We consider in Section 8 the burden of proof should be moved from the Takatāpui and SOGIESC people who have experienced harm to the health service and health practitioner to demonstrate they are not guilty of professional misconduct, malpractice or negligence. Other legislations, and our collective experience offering therapy to survivors of sexual violence going through the criminal justice system, have demonstrated that for the victim to prove harm in court is complex and ineffective. From a therapeutic stance, asking any victim to demonstrate the level of mental injury and other form of harm is unnecessarily traumatic and puts the burden of responsibility on those who are already victimised, marginalised and are vulnerable.
11. In section (9)(2) we suggest the inclusion of “groups” as well as “persons” who may perform conversion practices.

## Concluding Statement

12. As specialists in the field of providing psychotherapy to children and adolescents we consider it important for the government to consider the provision of care, support and advocacy for Takatāpui and SOGIESC who have experienced conversion practices. The proposed legislation identifies the harm these practices can have, as such redress available for the victims needs to include funded therapy.
13. We support the provision of resources be directed to research and the development of competencies for specific disciplines. This will enable us to provide our members with practice guidelines for working safely with Takatāpui and SOGIESC clients, based on research from Aotearoa New Zealand.
14. In summary, NZACAP denounces conversion practices for children and young people under the age of 18 and supports the conversion practice prohibition legislation bill. This aligns with our NZACAP’s code of ethics which states “The ethics of child and adolescent psychotherapy are rooted in the principles of respect for children and adolescents, and for social justice” (NZACAP, 2018).

## References

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